

Important Instructions:

- A. Fields marked with "*" are mandatory fields.
- B. Tick " wherever applicable.
- C. Please fill the form in English and BLOCK letters.
- D. Please fill the date in DD-MM-YY format.
- E. For particular section update, please tick () in the box section number and strike off the sections not required to be updated.
- F. Please read section wise detailed guide
- G. List of State/U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- H. List of two character ISO 3166 country codes is available at the end.
- I. KYC number of applicant is mandatory for update application.
- J. The 'OTP based E-KYC' check box is to be checked for accounts opened using OTP based E-KYC in non-face to face mode

ARN-64917 E434563

For office use only (To be filled by financial institution)

Application Type* New Update

KYC Number (Mandatory for KYC update request)

Account Type* Normal Minor Aadhaar OTP based E-KYC (in non-face to face mode)

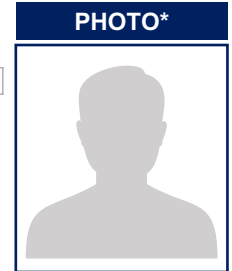
1. Personal Details (Please refer instruction A at the end)

| | | | | |
|---|--|--|--|--|
| | Prefix | First Name | Middle Name | Last Name |
| <input type="checkbox"/> Name* (Same as ID proof) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Maiden Name | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Father / Spouse Name* | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Mother Name | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Date of Birth* | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Gender* | <input type="checkbox"/> M- Male | <input type="checkbox"/> F- Female | <input type="checkbox"/> T- Transgender | |
| PAN* | <input type="text"/> | | <input type="checkbox"/> FORM 60 furnished | |
| Marital Status* | <input type="checkbox"/> Married | <input type="checkbox"/> Unmarried | <input type="checkbox"/> Others | |
| Citizenship* | <input type="checkbox"/> IN- Indian | <input type="checkbox"/> Others – Country | <input type="text"/> | Country Code <input type="text"/> |
| Residential Status* | <input type="checkbox"/> Resident Individual | <input type="checkbox"/> Non Resident Indian | <input type="checkbox"/> Foreign National | <input type="checkbox"/> Person of Indian Origin |

2. PROOF OF IDENTITY AND ADDRESS* (Please refer instruction B at the end)

Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- A-Passport Number Passport Expiry Date
- B-Voter ID Card
- C-Driving Licence Driving Licence Expiry Date
- D-NREGA Job Card
- E-National Population Register Letter
- F-Proof of Possession of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*
- II E-KYC Authentication *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*
- III Offline verification of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*



Signature /Thumb Impression across photo without covering the face

Address [For other than resident Individual, please mention Overseas Address]

Line 1*

Line 2

Line 3 City/Town/Village*

District* Pin/Post Code* State/U.T Code* ISO 3166 Country Code*

3. CURRENT ADDRESS DETAILS (Please refer instruction B at the end)

Same as above mentioned address (In such cases address details as below need not be provided)

- I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)
 - A-Passport Number
 - B-Voter ID Card
 - C-Driving Licence
 - D-NREGA Job Card
 - E-National Population Register Letter
 - F-Proof of Possession of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*
- II E-KYC Authentication *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*
- III Offline verification of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*
- IV Deemed Proof of Address – Document Type code

Address

Line 1*

Line 2

Line 3 City/Town/Village*

District* Pin/Post Code* State/U.T Code* ISO 3166 Country Code*

Supplementary CKYC Form

Know Your Client (KYC) Application Form For Individuals Only

(To be additionally filled by customers using old KYC form)



MUTUAL FUND

(Please fill the form in English and in BLOCK Letters)
Fields marked with * are mandatory fields

KYC Type: Normal (PAN is mandatory)
 PAN Exempt Investors

ARN-64917 E434563

1. Identity Details (Please refer instruction A at the end)

PAN Please enclose a duly attested copy of your PAN Card

| Name* (same as ID proof) | Prefix | First Name | Middle Name | Last Name |
|--------------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Maiden Name (If any*) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Mother Name* | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Residential Status* Resident Individual Non Resident Indian
 Foreign National Person of Indian Origin

Occupation Type* S-Service (Private Sector Public Sector Government Sector)
 O-Others (Professional Self Employed Retired Housewife Student)
 B-Business X-Not Categorized

2. FATCA/CRS Information (Tick if Applicable) Residence for Tax Purposes in Jurisdiction(s) Outside India (Please refer instruction B at the end)

Additional Details Required* (Mandatory only if above option is ticked)

Country of Jurisdiction of Residence* Country Code of Jurisdiction of Residence as per ISO 3166

Tax Identification Number or equivalent (If issued by jurisdiction)*

Place / City of Birth* Country of Birth* Country Code as per ISO 3166

Address Line 1*
 Line 2
 Line 3 City / Town / Village*

District* Zip / Post Code* State/UT Code as per Indian Motor Vehicle Act, 1988
 State/UT* Country* Country Code as per ISO 3166

3. Details of Related Person (Optional) (please refer instruction G at the end) (in case of additional related persons, please fill 'Annexure B1')

Related Person Deletion of Related Person KYC Number of Related Person (if available*)

Related Person Type* Guardian of Minor Assignee Authorized Representative

| Name* | Prefix | First Name | Middle Name | Last Name |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

(If KYC number and name are provided, below details of section 3 are optional)

Proof of Identity [PoI] of Related Person* (Please see instruction (H) at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

A- Passport Number Passport Expiry Date DD - MM - YYYY

B- Voter ID Card

C- PAN Card

D- Driving Licence Driving Licence Expiry Date DD - MM - YYYY

E- Aadhaar Card

F- NREGA Job Card

Z- Others (any document notified by the central government) Identification Number

4. Remarks (If any)

| |
|----------------------|
| <input type="text"/> |
| <input type="text"/> |

5. Applicant Declaration

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I hereby declare that I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date: DD - MM - YYYY Place:

[Signature / Thumb Impression]

Signature / Thumb Impression of Applicant

FATCA-CRS Declaration & Supplementary Information

Declaration Form for Individuals

(Please consult a tax professional for further guidance regarding your tax residency for FATCA & CRS compliance)

| | | | |
|---|-----|---|--|
| Name | | | |
| Mr. | Ms. | M/s. | |
| PAN | | | |
| | | | OR PAN Exempt KYC Ref No. (PEKRN) |
| Place of Birth | | Country of Birth | |
| Nationality <input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify _____) | | Tax Residence Address [for KYC address] <input type="checkbox"/> Residential <input type="checkbox"/> Registered Office <input type="checkbox"/> Business | |

Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India? → Yes No

If 'No' please proceed for the signature of declaration

If 'YES; please fill for ALL countries (other than India) in which you are a Resident for tax purposes i.e., where you are a Citizen / Resident / Green Card Holder / Tax Resident in the Respective countries.

| Sr. No. | Country of Tax Residency | Tax Identification Number or Functional Equivalent | Identification Type (TIN or others, please specify) | If TIN is not available, please tick <input checked="" type="checkbox"/> the reason A, B or C [as defined below] |
|---------|--------------------------|--|---|--|
| 1 | | | | Reason → <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C |
| 2 | | | | Reason → <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C |
| 3 | | | | Reason → <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C |

Reason A → The country where the Account Holder is liable to pay tax does not issue Tax identification Numbers to its residents.

Reason B → No TIN required. (Select this reason Only if the authorities of the respective country of tax residence do not require the TIN to be collected).

Reason C → Others; please state the reason thereof _____

Declaration:

I hereby confirm that the information provided here in above is true, correct and complete to the best of my knowledge and belief and that I shall be solely liable and responsible for the information submitted above. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of the same being effective and also undertake to provide any other additional information as may be required any intermediary or by domestic or overseas regulators / tax authorities.

Date:

Place:

Signature:

FATCA & CRS Terms & Conditions

(Note: The Guidance Note/notification issued by the CBDT shall prevail in respect to interpretation of the terms specified in the form)

Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our unit holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

Please note that you may receive more than one request for information if you have multiple relationships with Mahindra Manulife Investment Management Private Limited (formerly known as Mahindra Asset Management Company Private Limited) or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

FATCA & CRS Instructions

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number.

It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

| FATCA & CRS Indicia observed (ticked) | Documentation required for Cure of FATCA/ CRS indicia |
|--|---|
| U.S. place of birth | 1. Self-certification that the account holder is neither a citizen of United States of America nor its resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND 3. Any one of the following documents: (1) Certified Copy of "Certificate of Loss of Nationality" OR (2) Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; OR (3) Reason the customer did not obtain U.S. citizenship at birth |
| Residence/ mailing address in a country other than India | (1) Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; AND (2) Documentary evidence (refer list below) |
| Telephone number in a country other than India | If no Indian telephone number is provided (1) Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; AND (2) Documentary evidence (refer list below) If Indian telephone number is provided along with a foreign country telephone number (1) Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; OR (2) Documentary evidence (refer list below) |

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

(a) Certificate of residence issued by an authorized government body*, (b) Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)

* Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.