FATCACRS Declaration & Supplementary KYC Information <u>Declaration Form for Individuals</u>

Please seek appropriate advice from your professional tax professional on your tax residency and related FATCA & CRS guidance			
PAN*			
Name			
Address Type [for KYC address]	Residential Business	Residential / B	
Place of Birth		Country of Birth	
Gross Annual Income Details in INR	☐ Below 1 Lakh ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ 25 Lacs - 1 Cr ☐ > 1 Crore	[Please tick any	□ Business □ Professional □ Public Sector □ Private Sector □ Government Service □ Agriculturist □ Housewife □ Student □ Retired
INR. In Lacs [Optional]		one (√)]	☐ Forex Dealer ☐ Others [Please specify]
Net Worth Date [Optional]	dd -mmm -yyyy		
Politically Exposed Person [PEP]	☐ Yes ☐ Related to PEP☐ Not Applicable	Any other information [if applicable]	[Please specify]
Is your Country of Tax Residency other than India – Yes No If 'Yes', please specify the details of all countries where you hold tax residency and its Tax Identification Number & type Country of Tax Payer Identification Number / Identification Type			
	Country of Tax Residency# Functional Equivalent [TIN or other, please specify]		
2			
3			
# to include all countries other than India, where investor is Citizen / Resident / Green Card Holder / Tax Resident in those respective countries especially of USA Declaration:			
I acknowledge and confirm that the information provided above is true and correct to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/ am aware that I may liable for it. I hereby authorize you to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to / any of the Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me of the same. Further, I authorize to share the given information to other SEBI Registered Intermediaries/or any regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I also undertake to keep you informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/ tax authorities. I/We authorize Fund/AMC/RTA to provide relevant information to upstream payors to enable withholding to occur and pay out any sums from my account or close or suspend my account(s) without any obligation of advising me of the same			
Date:			Signature:
Place:			