



ANNEXURE II

KNOW YOUR CLIENT (KYC), FATCA, CRS & ULTIMATE BENEFICIAL OWNERSHIP (UBO) SELF CERTIFICATION FORM FOR NON-INDIVIDUALS

(Please seek appropriate advice from your professional tax advisor on your residency and related FATCA and CRS guidance)

PAN		FOLIO	
Name of the entity			
Type of Address given at KRA	<input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Residential/Business <input type="checkbox"/> Registered Office		
City of Incorporation	Date of Incorporation		
Country of Incorporation	D D / M M / Y Y Y Y		

ADDITIONAL KYC INFORMATION	
Gross Annual Income (Rs.) [Please tick (✓)]	<input type="radio"/> Below 1 lac <input type="radio"/> 1 - 5 lacs <input type="radio"/> 5 - 10 lacs <input type="radio"/> 10 - 25 lacs <input type="radio"/> >25 lacs - 1 crore <input type="radio"/> > 1 crore
OR	
Net Worth	Rs. _____ as on D D / M M / Y Y Y Y (Not older than 1 year)
Entity Constitution Type [Please tick (✓)]	<input type="checkbox"/> Partnership Firm <input type="checkbox"/> HUF <input type="checkbox"/> Private Limited Company <input type="checkbox"/> Public Limited Company <input type="checkbox"/> Society <input type="checkbox"/> AOP/BOI <input type="checkbox"/> Trust <input type="checkbox"/> Liquidator <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Artificial Juridical Person <input type="checkbox"/> Others specify: _____
Politically Exposed Person (PEP) Status* (Also applicable for the authorised signatories/Promoters/Krta/Trustee/Whole time Directors)	<input type="radio"/> I am PEP <input type="radio"/> I am Related to PEP <input type="radio"/> Not applicable
<small>*PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g. Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.</small>	
Non-individual investors involved/providing any of the mentioned services	<input type="checkbox"/> Foreign Exchange / Money Changer Services <input type="checkbox"/> Gaming / Gambling / Lottery / Casino Services <input type="checkbox"/> Money Lending / Pawning <input type="checkbox"/> None of the above

FATCA & CRS DECLARATION			
Please tick the applicable tax resident declaration			
Is "Entity" a tax resident of any country other than India? <input type="radio"/> Yes <input type="radio"/> No (If yes, please provide country(ies) in which the entity is a resident for tax purposes and the associated Tax ID number below)			
Sr. No.	Country	Tax Identification Number ^	Identification Type (TIN or other ^, please specify)
1			
2			
3			
^ In case Tax Identification Number is not available, kindly provide its functional equivalent. In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Equity Identification Number or GIIN, etc. In case the Equity's Country of Incorporation/Tax residence is U.S. but Entity is not a specified U.S. Person, mention Equity's exemption code here:			

PART A (To be filled by Financial Institutions or Direct Reporting NFEs)	
We are a Financial Institution (Refer 1 of Part C) <input type="checkbox"/> or Direct Reporting NFE (Refer 3(vii) of Part C) <input type="checkbox"/>	Please tick (✓) <input type="checkbox"/> GIN _____ Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below: Name of sponsoring entity _____
GIIN not available (Please tick as applicable) <i>If the entity is a financial institution</i>	<input type="checkbox"/> Applied for <input type="checkbox"/> Not obtained - Non-participating FI <input type="checkbox"/> Not required to apply for - please specify 2 digits sub-category [][] (Refer 1 A of Part C)

PART B (Please fill any as appropriate) (To be filled by NFEs other than Direct Reporting NFEs)	
1. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)	Yes <input type="checkbox"/> (If yes, please specify any one stock exchange on which the stock is regularly traded) Name of the stock exchange _____
2. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)	Yes <input type="checkbox"/> (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of listed company _____ Nature of relation: <input type="checkbox"/> Subsidiary of the Listed Company or <input type="checkbox"/> Controlled by a Listed Company Name of the stock exchange _____
3. Is the Entity an active NFE (Refer 2c of Part C)	Yes <input type="checkbox"/> Nature of Business _____ Please specify the sub-category of Active NFE [][] (Mention code - Refer 2c of Part C)
4. Is the Entity a passive NFE (Refer 3(ii) of Part C)	Yes <input type="checkbox"/> Nature of Business _____

