

**Asset Management Company:**

SBI Funds Management Ltd.

(A Joint Venture between State Bank of India &amp; AMUNDI)

**KEY INFORMATION MEMORANDUM**

## **DYNAMIC ASSET ALLOCATION ACTIVE FOF**

An open-ended fund of fund (FOF) scheme investing in units of actively managed equity and debt-oriented mutual fund schemes

| <b>This product is suitable for investors who are seeking*:</b>                                                                                                                | <b>Scheme Riskometer</b>                                                                                                                        | <b>Benchmark Riskometer:<br/>NIFTY 50 Hybrid Composite<br/>debt 50:50 Index</b>                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>Long term Capital appreciation</li> <li>Investment in units of actively managed equity and debt oriented mutual fund schemes</li> </ul> |  <p><b>RISKOMETER</b><br/>The risk of the scheme is High</p> |  <p><b>RISKOMETER</b><br/>The risk of the benchmark is High</p> |

\*Investors should consult their financial advisers if in doubt about whether the product is suitable for them.

The above product labelling assigned during the New Fund Offer (NFO) is based on internal assessment of the scheme characteristics or model portfolio and the same may vary post NFO when the actual investments are made.

Offer of Units of Rs. 10 each during the New Fund Offer  
and NAV related prices on ongoing basis

**New Fund Offer opens on: - 25/08/2025**

**New Fund Offer closes on: - 08/09/2025**

**Scheme re-opens for continuous Sale and Repurchase from Within 5 business days from the date of allotment**

**Mutual Fund: SBI Mutual Fund**

**Name of Asset Management Company:** SBI Funds Management Ltd. (CIN: U65990MH1992PLC065289)

**Trustee Company:** SBI Mutual Fund Trustee Company Pvt. Ltd. (CIN: U65991MH2003PTC138496)

**Address :** 9th Floor, Crescenzo, C-38 & 39, G Block, Bandra Kurla Complex, Bandra (East), Mumbai 400051.  
Visit us at [www.sbimf.com](http://www.sbimf.com)

| Investment objective                                                                                               | The investment objective of the scheme shall be to generate long-term capital appreciation by investing in actively managed equity oriented and actively managed debt oriented mutual fund schemes.<br><br>However, there is no assurance or guarantee that the investment objective of the Scheme would be achieved.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                        |                     |             |                                               |  |         |         |                                                    |    |     |                                                |   |    |                                                                                                                    |   |   |        |                    |                        |                     |                |  |  |  |     |                                |
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| Asset Allocation Pattern of the scheme                                                                             | <p>The funds collected under the scheme shall generally be invested consistent with the objective of the scheme in the following manner:</p> <table><tr><th rowspan="2">Instruments</th><th colspan="2">Indicative allocations<br/>(% of total assets)</th></tr><tr><th>Minimum</th><th>Maximum</th></tr><tr><td>Actively managed Equity &amp; Equity Oriented Schemes^</td><td>35</td><td>100</td></tr><tr><td>Actively managed Debt &amp; Debt Oriented Schemes^</td><td>0</td><td>65</td></tr><tr><td>Money Market Instruments (with maturity not exceeding 91 days), including Tri-Party Repo*, cash &amp; cash equivalents</td><td>0</td><td>5</td></tr></table> <p>^ Including actively managed equity and debt-oriented hybrid schemes.</p> <p>*or similar instruments as may be permitted by SEBI from time to time.</p> <p>The scheme shall invest in the units of existing mutual fund schemes of SBI Mutual Fund and/ or other mutual funds.</p> <p>It may be noted that after the closure of the NFO period, pending deployment of the funds of the Scheme, the Scheme may park the funds in Government securities including Triparty Repo, and units of liquid mutual fund until the full deployment is achieved.</p> <p>Pursuant to clause 12.24 of SEBI Master Circular for mutual funds dated June 27, 2024, the cumulative gross exposure through units of actively managed equity and debt oriented mutual fund schemes, money market instruments as may be permitted by the SEBI (gross notional exposure) shall not exceed 100% of net assets of the scheme. However, pursuant to paragraph 12.25 of SEBI Master Circular of Mutual Funds dated June 27, 2024 and SEBI letter no. SEBI/ HO/ IMD – II/ DOF3 / OW/ P/ 2021/ 31487/ 1 dated November 3, 2021 addressed to AMFI, it has been mentioned that cash or cash equivalents like Government securities, T-Bills and repo on Government Securities with residual maturity of less than 91 days may be treated as not creating any exposure.</p> <p>Indicative Table (Actual instrument/percentages may vary subject to applicable SEBI circulars)</p> <table><tr><th>Sl. No</th><th>Type of Instrument</th><th>Percentage of exposure</th><th>Circular references</th></tr><tr><td colspan="4">Not Applicable</td></tr></table> <p>The scheme shall not directly invest in below instruments:</p> <table><tr><th>Sr.</th><th>Type of securities/instruments</th></tr></table> |                        |                     | Instruments | Indicative allocations<br>(% of total assets) |  | Minimum | Maximum | Actively managed Equity & Equity Oriented Schemes^ | 35 | 100 | Actively managed Debt & Debt Oriented Schemes^ | 0 | 65 | Money Market Instruments (with maturity not exceeding 91 days), including Tri-Party Repo*, cash & cash equivalents | 0 | 5 | Sl. No | Type of Instrument | Percentage of exposure | Circular references | Not Applicable |  |  |  | Sr. | Type of securities/instruments |
| Instruments                                                                                                        | Indicative allocations<br>(% of total assets)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                     |             |                                               |  |         |         |                                                    |    |     |                                                |   |    |                                                                                                                    |   |   |        |                    |                        |                     |                |  |  |  |     |                                |
|                                                                                                                    | Minimum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Maximum                |                     |             |                                               |  |         |         |                                                    |    |     |                                                |   |    |                                                                                                                    |   |   |        |                    |                        |                     |                |  |  |  |     |                                |
| Actively managed Equity & Equity Oriented Schemes^                                                                 | 35                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 100                    |                     |             |                                               |  |         |         |                                                    |    |     |                                                |   |    |                                                                                                                    |   |   |        |                    |                        |                     |                |  |  |  |     |                                |
| Actively managed Debt & Debt Oriented Schemes^                                                                     | 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 65                     |                     |             |                                               |  |         |         |                                                    |    |     |                                                |   |    |                                                                                                                    |   |   |        |                    |                        |                     |                |  |  |  |     |                                |
| Money Market Instruments (with maturity not exceeding 91 days), including Tri-Party Repo*, cash & cash equivalents | 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 5                      |                     |             |                                               |  |         |         |                                                    |    |     |                                                |   |    |                                                                                                                    |   |   |        |                    |                        |                     |                |  |  |  |     |                                |
| Sl. No                                                                                                             | Type of Instrument                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Percentage of exposure | Circular references |             |                                               |  |         |         |                                                    |    |     |                                                |   |    |                                                                                                                    |   |   |        |                    |                        |                     |                |  |  |  |     |                                |
| Not Applicable                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                        |                     |             |                                               |  |         |         |                                                    |    |     |                                                |   |    |                                                                                                                    |   |   |        |                    |                        |                     |                |  |  |  |     |                                |
| Sr.                                                                                                                | Type of securities/instruments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |                     |             |                                               |  |         |         |                                                    |    |     |                                                |   |    |                                                                                                                    |   |   |        |                    |                        |                     |                |  |  |  |     |                                |

| No. |                                                                                                          |
|-----|----------------------------------------------------------------------------------------------------------|
| 1   | ADR/ GDR/ Foreign Securities                                                                             |
| 2   | Repo and reverse repo in corporate debt                                                                  |
| 3   | Securitised Debt                                                                                         |
| 4   | Credit Default Swaps transactions                                                                        |
| 5   | Unrated debt instrument                                                                                  |
| 6   | Debt instruments having structured obligations and credit enhancements                                   |
| 7   | Debt instruments with special features as covered in paragraph 12.2 of Master circular for Mutual Funds. |
| 8   | REITs and InvITs                                                                                         |
| 9   | Securities lending and borrowing                                                                         |
| 10  | Derivatives                                                                                              |

The scheme shall not engage in short selling.

However, the Underlying scheme(s) may have exposure to these securities and may also undertake covered call, securities lending, imperfect hedging using IRFs or such other instruments as permitted by SEBI from time to time.

This investment in units of Liquid mutual fund is subject to prevailing regulatory limits of aggregate inter-scheme investment made by all schemes under the same management or in schemes under the management of any other asset management company which shall not exceed 5% of the net asset value of the mutual fund.

Apart from the investment restrictions prescribed under SEBI (MF) Regulations, the fund follows internal norms vis-à-vis limiting exposure to a particular script or sector, etc.

**Change in Asset Allocation:** The above investment pattern is indicative and may be changed by the Fund Manager for a short-term period on defensive considerations, keeping in view market conditions, market opportunities, applicable SEBI (Mutual Funds) Regulations 1996, legislative amendments and other political and economic factors, the intention being at all times to seek to protect the interests of the Unit Holders. If the exposure falls outside the above-mentioned asset allocation pattern, the portfolio to be rebalanced by AMC within 30 calendar days from the date of said deviation.

#### **Timelines for deployment of funds collected in NFO**

Pursuant to SEBI circular no. SEBI/HO/IMD/IMD-PoD-1/P/CIR/2025/23 dated February 27, 2025; the fund manager shall aim to deploy the funds garnered during the NFO within 30 business days from the date of allotment of units.

In an exceptional case, if the fund manager is not able to deploy the funds within 30 business days as per the scheme's asset allocation, reasons in writing, including details of efforts made to deploy the funds, will be placed before the Investment Committee. The Investment Committee, after examining the root cause for delay in deployment, may extend the timeline by 30 business days.

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|                                   | <p><b>Rebalancing Period:</b> Pursuant to Paragraph 2.9 of SEBI Master Circular for Mutual Funds dated June 27, 2024 read with SEBI circular no. SEBI/HO/IMD/PoD2/P/CIR/2025/92 dated June 26, 2025 in case the fund manager for any reason is not able to rebalance the asset allocation due to passive breaches (occurrence of instances not arising out of omission and commission of AMC) within 30 business days from the date of deviation, justification in writing, including details of efforts taken to rebalance the portfolio shall be placed before Investment Committee. The Investment Committee, if so desires, can extend the timelines up to sixty (60) business days from the date of completion of the mandated rebalancing period.</p> <p>Further, it will follow timelines for rebalancing of portfolios of Mutual Fund Schemes, reporting &amp; disclosure requirements in pursuant to Paragraph 2.9.4 of SEBI Master Circular of Mutual funds dated June 27, 2024. The funds raised under the scheme shall be invested only in transferable securities as per Regulation 44(1), Schedule 7 of the SEBI (Mutual Funds) Regulations, 1996.</p> <p>There can be no assurance or guarantee that the investment objective of the scheme will be achieved.</p>                                                                                                |
| <b>Investment strategy</b>        | <p>SBI Dynamic Asset Allocation Active FoF is an open-ended fund of fund scheme investing in the following category of domestic &amp; overseas schemes subject to the prevailing regulations and applicable laws:</p> <ul style="list-style-type: none"> <li>• Units of actively managed equity &amp; equity-oriented schemes</li> <li>• Units of actively managed debt &amp; debt-oriented schemes</li> </ul> <p>The allocation to various schemes of mutual fund(s) will be dynamically managed and investments in Debt and Money Market Instruments will be for the purpose of liquidity management and within the asset allocation limits specified under 'Asset Allocation' section.</p> <p>The asset allocation between actively managed equity oriented and actively managed debt oriented schemes is based on an in-house framework that evaluates the changing market conditions and evolving macro-economic environment. Further, the Scheme shall follow an active investment strategy.</p>                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Risk Profile of the Scheme</b> | <p>1. Investment in Underlying scheme(s) may be subject to the following risks:</p> <ol style="list-style-type: none"> <li>The investors of Fund of Funds shall bear the recurring expenses of Fund of Fund scheme in addition to the expenses of the underlying scheme(s) (subject to regulatory limits) in which the investments are made and hence the returns of the Fund of Fund scheme may be materially impacted or may at times be lower than the returns that investors may obtain by directly investing in such schemes.</li> <li>As the Fund of Fund scheme may shift the allocation weightage of between underlying scheme(s), the expenses charged being dependent on the structure of the underlying scheme(s) (being different) may lead to a non- uniform charging of expenses over a period of time.</li> <li>The Portfolio disclosure of Fund of Funds (FOF) scheme will be limited to providing the particulars of the allocation to the Underlying scheme(s) where FOF scheme has invested and will not include the investments made by the Underlying scheme(s).</li> <li>The scheme specific risk factors of each of the underlying scheme(s) become applicable where a fund of funds invests in any underlying scheme(s). Investors who intend to invest in Fund of Funds are required to and are deemed to have read and understood the risk</li> </ol> |

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|  | <p>factors of the underlying schemes relevant to the Fund of Fund scheme that they invest in. The investors should refer to the Scheme Information Documents and the related addendums for the scheme specific risk factors of the respective Underlying Schemes.</p> <p>e) All risks associated with Underlying Schemes, including performance of their underlying stocks, derivative instruments, stock-lending, investments in foreign securities etc., will therefore be applicable in the case of FOF scheme.</p> <p>f) Movements in the Net Asset Value (NAV) of the Underlying scheme(s) may impact the performance of FOF scheme. Any change in the investment policies or fundamental attributes of the Underlying scheme(s) will affect the performance of FOF scheme.</p> <p>g) Redemption by FOF scheme from the underlying scheme(s) would be subject to applicable exit loads, which may impact performance of FOF scheme.</p> <p>h) The underlying scheme(s) in which the FOF scheme invests may not perform in line with the market and may also not achieve its investment objective. In such a situation, the performance of the FOF scheme could be affected and its ability to achieve its investment objective may be impaired.</p> <p>i) To the extent the assets of the FOF scheme are invested in the underlying overseas fund/s the performance, risk profile, and liquidity of the FOF scheme will be directly related to those of the underlying scheme(s).</p> <p>j) In the event of receipt of an inordinately large number of redemption requests and inability of the</p> <ol style="list-style-type: none"> <li>I. Underlying Scheme(s) to generate enough liquidity because of market conditions, there may be delays in</li> <li>II. redemption of units</li> </ol> <p>k) If the underlying scheme(s) winds up the scheme for any reason, the FOF scheme may have to find the similar alternative scheme. Until such alternative is found and investments transferred into it, the FOF scheme may not earn scheme objective related return.</p> <p>l) The tax benefits described in the SAI &amp; SID are as available under the present taxation laws and are available subject to relevant condition. The information given is included only for general purpose and is based on advice received by the AMC regarding the law and practice currently in force in India and the Investors and Unit Holders should be aware that the relevant fiscal rules or their interpretation may change. As in the case with any investment, there can be no guarantee that the tax position or the proposed tax position prevailing at the time of the investment in the FOF Scheme will endure indefinitely. In view of the individual nature of tax consequences, each Investor / Unit holder is advised to consult his/her/its own professional tax advisor.</p> <p>m) The Mutual Fund is not assuring any IDCW nor is it assuring that it will make any IDCW distributions. All IDCW distributions are subject to the availability of distributable surplus and would depend on the performance of the FOF scheme.</p> <p>n) While it would be the endeavour of the Fund Manager of the Fund of Fund scheme to invest in the target schemes in a manner, which will seek to maximize returns, the performance of the underlying scheme(s) may vary which may lead to the returns of the Fund of Funds being adversely impacted.</p> <p>o) A Fund Manager managing any one of the FOF scheme may also be the Fund Manager for any underlying scheme(s).</p> |
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|  | <p><b>2. Investment in equity &amp; equity related instruments by the underlying scheme may be subject to the following risks:</b></p> <ul style="list-style-type: none"> <li>a) Equity and Equity related instruments are volatile in nature and are subject to price fluctuations on daily basis. The volatility in the value of the equity and equity related instruments is due to various micro and macro-economic factors affecting the securities markets. This may have adverse impact on individual securities /sector and consequently on the NAV of Scheme.</li> <li>b) The inability of the Scheme to make intended securities purchases due to settlement problems could cause the Scheme to miss certain investment opportunities as in certain cases, settlement periods may be extended significantly by unforeseen circumstances. Similarly, the inability to sell securities held in the schemes portfolio may result, at times, in potential losses to the scheme, should there be a subsequent decline in the value of the securities held in the schemes portfolio.</li> <li>c) Trading volumes, settlement periods and transfer procedures may restrict the liquidity of the investments made by the scheme. Different segments of the Indian financial markets have different settlement periods, and such periods may be extended significantly by unforeseen circumstances leading to delays in receipt of proceeds from sale of securities.</li> <li>d) The AMC may invest in unlisted securities that offer attractive yields within the regulatory limit. This may however increase the risk of the portfolio as these unlisted securities are inherently illiquid in nature and carry larger liquidity risk as compared to the listed securities or those that offer other exit options to the investors.</li> </ul> <p><b>3. Investments in Debt &amp; money market instruments by the underlying scheme may be subject to the following risks:</b></p> <ul style="list-style-type: none"> <li>a) Credit Risk: Credit risk is risk resulting from uncertainty in counterparty's ability or willingness to meet its contractual obligations. This risk pertains to the risk of default of payment of principal and interest. Government Securities have zero credit risk while other debt instruments are rated according to the issuers' ability to meet the obligations.</li> <li>b) Liquidity Risk: Liquidity Risk pertains to how saleable a security is in the market. If a particular security does not have a market at the time of sale, then the scheme may have to bear an impact depending on its exposure to that particular security.</li> <li>c) Interest Rate: Interest Rate risk is associated with movements in interest rate, which depend on various factors such as government borrowing, inflation, economic performance etc. The value of investments will appreciate/depreciate if the interest rates fall/rise. However, if the investments are held on till maturity of the investments, the value of the investments will not be subjected to this risk.</li> <li>d) Reinvestment Risk: This risk arises from uncertainty in the rate at which cash flows from an investment may be reinvested. This is because the bond will pay coupons, which will have to be reinvested. The rate at which the coupons will be reinvested will depend upon prevailing market rates at the time the coupons are received.</li> <li>e) Risk associated with unrated debt instruments: Investments in unrated instruments are subject to the risk associated with investments in any other fixed income securities such as credit risk, interest rate risk etc. However, investments in unrated instruments are subject to greater risk of loss of principal and interest than rated instruments.</li> </ul> <p><b>4. Risks associated with segregated portfolio: Different types of securities in which the scheme</b></p> |
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|                       | <p>would invest carry different levels and types of risk as given in the Scheme Information Document of the scheme. In addition to the same, unitholders are requested to also note the following risks with respect to Segregated Portfolio:</p> <ul style="list-style-type: none"> <li>a) Investor holding units of segregated portfolio may not be able to liquidate their holding till the time there is recovery of money from the issuer.</li> <li>b) Listing of units of segregated portfolio in recognized stock exchange does not necessarily guarantee their liquidity, as there may not be active trading of units in the stock market. Further trading price of units on the stock market may be at a significant discount compared to the prevailing NAV.</li> <li>c) Securities which are part of the segregated portfolio may or may not recover any money, either fully or partially.</li> </ul> <p>5. Investment in Mutual Fund Units involves investment risks, including but not limited to risks such as liquidity risk, volatility risk, default risk including the possible loss of principal.</p> <ul style="list-style-type: none"> <li>a) Liquidity risk – The liquidity of the scheme’s investments is inherently restricted by trading volumes and settlement periods. In the event of an inordinately large number of redemption requests, or of a restructuring of the scheme’s investment portfolio, these periods may become significant. In view of the same, the right to limit redemptions will be in accordance with paragraph 1.12 of the SEBI Master Circular for Mutual Funds dated June 27, 2024.</li> <li>b) Volatility risks: There is the risk of volatility in markets due to external factors like liquidity flows, changes in the business environment, economic policy etc. The scheme will manage volatility risk through diversification across companies and sectors within PSUs.</li> <li>c) Default risk - Credit risk is risk resulting from uncertainty in counterparty's ability or willingness to meet its contractual obligations. This risk pertains to the risk of default of payment of principal and interest. Government Securities have zero credit risk while other debt instruments are rated according to the issuer's ability to meet the obligations.</li> </ul> |
| <b>Plans /Options</b> | <p>The Scheme has two plans viz. Direct Plan &amp; Regular Plan.</p> <p><b>Direct Plan:</b></p> <p>Direct Plan is only for investors who purchase /subscribe Units in a Scheme directly with the Mutual Fund or through Registered Investment Advisor (RIA) and is not available for investors who route their investments through a Distributor. All the features of the Direct Plan under Scheme like the investment objective, asset allocation pattern, investment strategy, risk factors, facilities offered, load structure etc. will be the same except for a lower expense ratio as detailed in <b>Section IV – Fees and Expenses – B. – Annual Recurring Expenses</b> of the SID. Brokerage/Commission paid to distributors will not be paid / charged under the Direct Plan. Both the plans shall have a common portfolio.</p> <p><b>Eligible investors:</b> All categories of investors as permitted under the Scheme Information Document of the Scheme are eligible to subscribe under Direct Plan.</p> <p><b>Modes for applying:</b> Investments under Direct Plan can be made through various modes offered by the Mutual Fund for investing directly with the Mutual Fund.</p> <p><b>How to apply:</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

- Investors desirous of subscribing under Direct Plan of a Scheme will have to ensure to indicate “Direct Plan” against the Scheme name in the application form.
- Investors should also indicate “Direct” in the ARN column of the application form.

**Regular Plan:**

This Plan is for investors who wish to route their investment through any distributor.

In case of Regular and Direct plan the default plan under following scenarios will be:

| Scenario | Broker Code mentioned by the investor | Plan mentioned by the investor | Default Plan to be captured |
|----------|---------------------------------------|--------------------------------|-----------------------------|
| 1        | Not mentioned                         | Not mentioned                  | Direct Plan                 |
| 2        | Not mentioned                         | Direct                         | Direct Plan                 |
| 3        | Not mentioned                         | Regular                        | Direct Plan                 |
| 4        | Mentioned                             | Direct                         | Direct Plan                 |
| 5        | Direct                                | Not Mentioned                  | Direct Plan                 |
| 6        | Direct                                | Regular                        | Direct Plan                 |
| 7        | Mentioned                             | Regular                        | Regular Plan                |
| 8        | Mentioned                             | Not Mentioned                  | Regular Plan                |

In cases of wrong/ invalid/ incomplete ARN codes mentioned on the application form, the application shall be processed under Direct Plan.

Both plans provide two options for investment – Growth Option and Income Distribution cum Capital Withdrawal (IDCW) Option. Facility for “IDCW Re-investment”, “IDCW Pay-out” and “IDCW Transfer” is available. Between “Growth” or “IDCW” option, the default will be treated as “Growth”. In “IDCW” option between “IDCW Payout” or “IDCW Reinvestment” or “IDCW Transfer”, the default will be treated as “IDCW Reinvestment”.

Investors can select only one option either IDCW payout or IDCW Reinvestment or IDCW Transfer in IDCW plan at a Scheme and folio level. Any subsequent request for change in IDCW option viz. IDCW Payout to IDCW Reinvestment or IDCW Transfer or vice-versa would be processed at the Folio / Scheme level and not at individual transaction level. Accordingly, any change in IDCW option (payout / reinvestment) will reflect for all the units held under the scheme / folio.

Note – If the payable IDCW amount is less than or equal to Rs. 100/-, the same will be compulsorily reinvested in the respective Scheme(s)/Plan(s)/Option(s) irrespective of the IDCW facility selected by investor. If the IDCW amount payable is greater than Rs. 100/- then it will be either reinvested or paid as per the mandate selected by the investor

**Applicable NAV (after the scheme opens for subscriptions)**

**For Purchases including Switch-ins (irrespective of application amount):**

1. In respect of valid applications received upto 3.00 p.m. on a Business Day at the official points of acceptance, where funds for the entire amount of subscription/purchase (including switch-ins) are credited to the bank account of the Scheme before the cut-off time on the same day i.e. available for utilization before the cut-off time on the same day - the closing

| and redemptions )                                                                         | <p>NAV of the day shall be applicable.</p> <p>2. In respect of valid applications received after 3.00 p.m. on a Business Day at the official points of acceptance, where funds for the entire amount of subscription/purchase (including switch-ins) are credited to the bank account of the Scheme either on the same day or before the cut-off time of the next Business Day i.e. available for utilization before the cut-off time of the next Business Day – the closing NAV of the next Business Day shall be applicable.</p> <p>3. Irrespective of the time of receipt of application at the official points of acceptance, where funds for the entire amount of subscription/purchase (including switch-in) are credited to the bank account of the Scheme before the cut-off time on any subsequent Business Day - i.e. available for utilization before the cut-off time on any subsequent Business Day - the closing NAV of such subsequent Business Day shall be applicable.</p> <p>4. In case of switch transactions from one scheme to another scheme, units allotment in switch-in scheme shall be in line with the redemption payouts. The aforesaid provisions shall also apply to systematic transactions including Systematic Investment Plan (SIP), Systematic Transfer Plan (STP), IDCW Transfer etc. irrespective of the installment date or IDCW record date.</p> <p><b>For Redemptions including switch-out:</b> In respect of valid applications received on a business day, upto the 3.00 pm by the Mutual Fund, same day’s closing NAV shall be applicable. In respect of valid applications received after the 3.00 pm by the Mutual Fund, the closing NAV of the next business day shall be applicable.</p> |                                                           |  |           |                      |             |                                                                                           |                                                 |                                                           |                                                                             |  |  |
|-------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|--|-----------|----------------------|-------------|-------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------------|--|--|
| Minimum Application Amount                                                                | <table><tr><th>Purchases</th><th>Additional Purchases</th><th>Redemptions</th></tr><tr><td><b>During NFO Period:</b> Rs. 5,000 per application and in multiples of Re. 1 thereafter.</td><td>Rs. 1000/- and in multiples of Re. 1 thereafter</td><td>Rs.500/- or 1 Unit or account balance whichever is lower.</td></tr><tr><td><b>On Continuous Basis:</b> Rs. 5000/- and in multiples of Re. 1 thereafter</td><td></td><td></td></tr></table> <p><b>Note –</b> For investments made by designated employees of SBI Funds Management Limited in terms of paragraph 6.10 of the SEBI Master Circular for Mutual Funds dated June 27, 2024, requirement for minimum application/ redemption amount will not be applicable</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                           |  | Purchases | Additional Purchases | Redemptions | <b>During NFO Period:</b> Rs. 5,000 per application and in multiples of Re. 1 thereafter. | Rs. 1000/- and in multiples of Re. 1 thereafter | Rs.500/- or 1 Unit or account balance whichever is lower. | <b>On Continuous Basis:</b> Rs. 5000/- and in multiples of Re. 1 thereafter |  |  |
| Purchases                                                                                 | Additional Purchases                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Redemptions                                               |  |           |                      |             |                                                                                           |                                                 |                                                           |                                                                             |  |  |
| <b>During NFO Period:</b> Rs. 5,000 per application and in multiples of Re. 1 thereafter. | Rs. 1000/- and in multiples of Re. 1 thereafter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Rs.500/- or 1 Unit or account balance whichever is lower. |  |           |                      |             |                                                                                           |                                                 |                                                           |                                                                             |  |  |
| <b>On Continuous Basis:</b> Rs. 5000/- and in multiples of Re. 1 thereafter               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                           |  |           |                      |             |                                                                                           |                                                 |                                                           |                                                                             |  |  |
| Despatch of Repurchase (Redemption) request                                               | <p>Redemption: Within 4 working days for electronic payout and within 6 working days for cheque payout from the receipt of the redemption request at the authorised centre of the SBI Mutual Fund.</p> <p>Further, in exceptional situations additional timelines in line with AMFI letter no. AMFI/35P/MEM -COR/74/2022-23 dated January 16, 2023 will be applicable for transfer of redemption or repurchase proceeds to the unitholders.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                           |  |           |                      |             |                                                                                           |                                                 |                                                           |                                                                             |  |  |
| Benchmark Index                                                                           | NIFTY 50 Hybrid Composite debt 50:50 Index                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           |  |           |                      |             |                                                                                           |                                                 |                                                           |                                                                             |  |  |
| Income Distribution cum Capital                                                           | The Trustee reserves the right to declare Income Distribution cum Capital withdrawal (IDCW) under the IDCW option of the Scheme depending on the net distributable surplus available under the Scheme.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                           |  |           |                      |             |                                                                                           |                                                 |                                                           |                                                                             |  |  |

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|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>withdrawal (IDCW) Policy</b>             | <p>The procedure and manner of payment of IDCW shall be in line with Chapter 11 of the SEBI Master Circular for Mutual Funds dated June 27, 2024, as amended from time to time.</p> <p>Investors are requested to note that amounts can be distributed out of investors capital (Equalization Reserve), which is part of sale price of the unit that represents realized gains.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>Name of the Fund Manager</b>             | <p>Ms. Nidhi Chawla – For Equity Portion</p> <p>Mr. Ardhendu Bhattacharya – For Debt Portion</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Name of the Trustee Company</b>          | SBI Mutual Fund Trustee Company Private Limited                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Performance of the scheme</b>            | This is a new scheme. This scheme does not have any performance track record.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Additional Scheme Related Disclosure</b> | <p>This is a new Scheme and therefore, the requirement of following additional disclosures shall not be applicable for the Scheme.</p> <p><b>1. Top 10 holdings by issuer:</b> Not Applicable</p> <p><b>2. Fund allocation towards various sectors:</b> Not Applicable</p> <p><b>3. Portfolio Turnover Ratio:</b> Not Applicable</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Expenses of the scheme</b>               | <p><b>New Fund Offer Period:</b> These expenses are incurred for the purpose of various activities related to the NFO like sales and distribution fees paid marketing and advertising, registrar expenses, printing and stationery, bank charges etc.</p> <p>The entire New Fund Offer expenses for the launch the Scheme will be borne by the AMC.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Load Structure</b>                       | <p><b>Exit Load:</b> For NFO &amp; Ongoing basis:</p> <ul style="list-style-type: none"> <li>For units purchased or switched in from another scheme to the Fund are redeemed or switched out on or before 12 months from the date of allotment: Upto 25% of the investments – Nil; For remaining investments – 1% of applicable NAV</li> <li>For exit after 12 months from the date of allotment: Nil</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Recurring Expenses</b>                   | <p>The AMC has estimated that the expenses upto 2.25% per annum as per regulation 52(6)(a) including weighted average of the total expense ratio levied by the underlying scheme(s) (plus additional expenses as allowed under regulation 52(6A)) of the daily net asset will be charged to the scheme. The maximum annual recurring expenses that can be charged to the Scheme, excluding issue or redemption expenses, whether initially borne by the mutual fund or by the asset management company, but including the investment management and advisory fee shall be within the limits stated in Regulations 52 read with Chapter 10 of SEBI master circular for Mutual Funds dated June 27, 2024.</p> <p>The AMC may charge the investment and advisory fees within the limits of total expenses prescribed under Regulation 52 of the SEBI (Mutual Funds) Regulations. Any other expenses which are directly attributable to the Scheme may be charged with the approval of the Trustee within the overall limits as specified in the Regulations except those expenses which are specifically prohibited.</p> <p>These estimates have been made in good faith as per the information available to the Investment Manager based on past experience and are subject to change inter-se. Types of expenses charged shall be as per the SEBI (MF) Regulations. These are the fees and expenses for operating the scheme. These expenses include Investment Management and Advisory Fee charged by the AMC,</p> |

Registrar and Transfer Agents' fees, marketing and selling costs etc. incurred towards different heads mentioned under regulations 52(2) and 52(4) and as illustrated in table below:

| Expense head                                                                                                                          | % of daily Net Assets             |
|---------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| Investment Management and Advisory Fees                                                                                               | Upto 2.25% (Refer Note (A) below) |
| Trustee fee                                                                                                                           |                                   |
| Audit fees                                                                                                                            |                                   |
| Custodian fees                                                                                                                        |                                   |
| RTA Fees                                                                                                                              |                                   |
| Marketing & Selling expenses including agent's commission                                                                             |                                   |
| Cost related to investor communications                                                                                               |                                   |
| Cost of fund transfer from location to location                                                                                       |                                   |
| Cost of providing account statements and Income Distribution cum capital withdrawal redemption cheques and warrants                   |                                   |
| Costs of statutory Advertisements                                                                                                     |                                   |
| Cost towards investor education & awareness                                                                                           |                                   |
| Brokerage & transaction cost over and above 12 bps and 5 bps for cash and derivative market trades respectively. (refer note 1 below) |                                   |
| Goods & Service tax on expenses other than investment and advisory Fees                                                               |                                   |
| Goods & Service tax on brokerage and transaction cost                                                                                 |                                   |
| Other Expenses                                                                                                                        |                                   |
| Expenses charged by the underlying scheme                                                                                             |                                   |
| Maximum total expense ratio (TER) permissible under Regulation 52 (6) (a)                                                             | Upto 2.25% (Refer Note (A) below) |
| Additional expenses for gross new inflows from specified cities under regulation 52 (6A) (b) (refer note 2 below)                     | Upto 0.30%                        |
| Additional expenses under regulation 52 (6A) (c) (refer note 3 below)                                                                 | Upto 0.05%                        |

^Any other expenses which are directly attributable to the Scheme, may be charged with the approval of the Trustee within the overall limits as specified in the Regulations except those expenses which are specifically prohibited.

The aforesaid expenses are fungible within the overall maximum limit prescribed under SEBI (Mutual Funds) Regulations. This means that mutual fund can charge expenses within overall limits, without any internal cap on the aforesaid expenses head.

Note (A): Investors may please note that they will be bearing the recurring expenses of the Scheme in addition to the expenses of the underlying schemes in which the fund of fund (FOF) scheme makes investment. The total expense ratio of the FOF scheme including weighted average of the total expense ratio levied by the underlying scheme(s) shall not exceed 2.25 per cent of the daily net assets of the scheme.

Maximum total expense ratio (TER) permissible under Regulation 52 (6) (a), in case of fund of funds scheme:

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
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|  | <p>(i) investing in liquid schemes, index fund scheme and exchange traded funds, the total expense ratio of the scheme including weighted average of the total expense ratio levied by the underlying scheme(s) shall not exceed 1.00 per cent of the daily net assets of the scheme.</p> <p>(ii) investing a minimum of sixty-five per cent of assets under management in equity-oriented schemes as per scheme information document, the total expense ratio of the scheme including weighted average of the total expense ratio levied by the underlying scheme(s) shall not exceed 2.25 per cent of the daily net assets of the scheme.</p> <p>(iii) investing in schemes other than mentioned in points (i) &amp; (ii), the total expense ratio of the scheme including weighted average of the total expense ratio levied by the underlying scheme(s) shall not exceed 2.00 per cent of the daily net assets of the scheme:</p> <p>Further, the total expense ratio to be charged by FOF scheme over and above the weighted average of the total expense ratio of the underlying scheme shall not exceed two times the weighted average of the total expense ratio levied by the underlying scheme(s), subject to the limit as specified above.</p> <p>In addition to expenses as permissible under Regulation 52 (6) (a), the AMC may charge the following additional costs or expenses to the scheme:</p> <ol style="list-style-type: none"> <li>1. In terms of Regulation 52 (6A) (a), Brokerage and transaction costs which are incurred for the purpose of execution of trade up to 0.12 per cent of trade value in case of cash market transactions and 0.05 per cent of trade value in case of derivatives transactions. Further in terms of paragraph 10.1.14 of SEBI Master Circular for Mutual Funds dated June 27, 2024, any payment towards brokerage and transaction cost, over and above the said 0.12 per cent and 0.05 per cent for cash market transactions and derivatives transactions respectively may be charged to the scheme within the maximum limit of Total Expense Ratio (TER) as prescribed under regulation 52 of the SEBI (Mutual Funds) Regulations, 1996. Goods &amp; service tax on brokerage and transaction cost paid for execution of trade, if any, shall be within the limit prescribed under regulation 52 of the Regulations.</li> <li>2. In terms of Regulation 52 (6A) (b), expenses not exceeding of 0.30 per cent of daily net assets will be charged, if the new inflows from such cities as specified from time to time are at least – <ol style="list-style-type: none"> <li>I. 30 percent of gross new inflows in the scheme, or;</li> <li>II. 15 percent of the average assets under management (year to date) of the scheme, whichever is higher:</li> </ol> <p>Provided that if inflows from such cities is less than the higher of sub-clause (i) or subclause (ii), such expenses on daily net assets of the scheme shall be charged on proportionate basis:</p> <p>Provided further that expenses charged under this clause shall be utilized for distribution expenses incurred for bringing inflows from such cities:</p> <p>Provided further that amount incurred as expense on account of inflows from such cities shall be credited back to the scheme in case the said inflows are redeemed within a period of one year from the date of investment.</p> <p>The additional TER in terms of Regulation 52(6A)(b) of SEBI (Mutual Funds) Regulations, 1996 shall be charged based on inflows from Retail Investors from beyond top 30 cities (B-30 cities). Accordingly, the inflows of amount upto Rs 2,00,000/- per transaction, by individual</p> </li> </ol> |
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|  | <p>investors shall be considered as inflows from “Retail Investors</p> <p>Note: SEBI vide its letter no. SEBI/HO/IMD-SEC-3/P/OW/2023/5823/1 dated February 24, 2023, and AMFI letter dated No. 35P/ MEM-COR/ 85-a/ 2022-23 dated March 02, 2023, has directed AMCs to keep B-30 incentive structure in abeyance with effect from March 01, 2023, till further notice.</p> <ol style="list-style-type: none"> <li>In terms of Regulation 52 (6A) (c), the scheme may charge additional expenses incurred towards different heads mentioned under regulations (2) and (4), not exceeding 0.05% of the daily net assets. Pursuant to paragraph 10.1.7 of SEBI Master Circular for mutual funds dated June 27, 2024, additional expenses under regulation 52 (6A) (c) shall not be levied if the scheme doesn't have exit load.</li> <li>The Goods and Service Tax (GST) on investment management and advisory fees would be charged in addition to above limit. Further, GST on expenses other than investment and advisory fees shall be borne by the Scheme within the maximum limit of annual recurring expenses as prescribed in Regulation 52.</li> </ol> <p>Direct Plan shall have a lower expense ratio excluding distribution expenses, commission, etc., vis-à-vis the Regular Plan and no commission shall be paid from Direct Plan. Both the plans, i.e. Direct &amp; Regular shall have common portfolio. However, Regular Plan and Direct Plan shall have different NAVs.</p> <p>For investor education and awareness initiative, the AMC or the Schemes of the Fund will annually set apart at least 0.02 percent of daily net assets of the Schemes of the Fund within the maximum limit of the total expense ratio as per SEBI Regulation. Pursuant to paragraph 10.1.16 of SEBI Master Circular for mutual funds dated June 27, 2024, Fund of Funds (FoFs) investing more than 80% of its NAV in the underlying domestic funds shall not be required to set aside 0.02 percent of the daily net assets towards investor education and awareness initiatives.</p> <p>The Mutual Fund would disclose daily Total Expense Ratio (TER) of scheme on the mutual fund website and on the website of AMFI. Any change in the base TER (i.e. TER excluding additional expenses provided in Regulation 52(6A)(b), 52(6A)(c) of SEBI (Mutual Funds) Regulations, 1996 and Goods and Services Tax on investment management and advisory fees) in comparison to previous base TER charged to the scheme/plan will be communicated to investors and the notice of such change in base TER will be updated on the website, at least three working days prior to effecting such change, in the manner specified by SEBI from time to time. Investors can refer <a href="https://www.sbimf.com/en-us/disclosure/total-expense-ratio-of-mutual-fund-schemes">https://www.sbimf.com/en-us/disclosure/total-expense-ratio-of-mutual-fund-schemes</a> for Total Expense Ratio (TER) details.</p> <p>All scheme related expenses including commission paid to distributors, by whatever name it may be called and in whatever manner it may be paid, shall necessarily be paid from the scheme only within the regulatory limits and not from the books of AMC, its associate, sponsor, trustees or any other entity through any route in terms of SEBI circulars, subject to the clarifications provided by SEBI to AMFI vide letter dated February 21, 2019 on implementation of SEBI Circular on Total Expense Ratio (TER) and performance disclosure for Mutual Fund.</p> <p>The AMC shall not enter into any revenue sharing arrangement with the Underlying scheme(s) in any manner and shall not receive any revenue by whatever means/head from the Underlying scheme(s). Any commission or brokerage received from the Underlying scheme(s) shall be credited to scheme's account.</p> |
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## Key Information Memorandum

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|                                                                                                                                                                                                                                                                                                                                            | The investors are bearing the recurring expenses of the scheme, in addition to the expenses of underlying schemes in which the Fund of Funds Scheme makes investments.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                             |                                   |                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                                                            | Actual expenses for the previous financial year: N.A.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                             |                                   |                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                             |
| <b>Tax treatment for the Investors</b>                                                                                                                                                                                                                                                                                                     | Investors are advised to refer to the details in the Statement of Additional Information & also independently refer to their tax advisor.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                             |                                   |                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                             |
| <b>Daily Net Asset Value (NAV) Publication</b>                                                                                                                                                                                                                                                                                             | <p>The AMC will calculate and disclose the first NAV not later than 5 business days from the date of allotment. Subsequently, NAVs of the Scheme would be computed and declared on every Business Day. NAV will be calculated and disclosed in the manner as may be specified under SEBI (Mutual Funds) Regulations, 1996. NAVs can be viewed on <a href="http://www.sbimf.com">www.sbimf.com</a> and <a href="http://www.amfiindia.com">www.amfiindia.com</a>. Further, the Mutual Fund shall send the latest available NAVs to the unitholders through SMS, upon receiving a specific request in this regard.</p> <p>The AMC shall update the NAVs on the website of Association of Mutual Funds in India - AMFI (<a href="http://www.amfiindia.com">www.amfiindia.com</a>) and on website of the Mutual Fund (<a href="http://www.sbimf.com">www.sbimf.com</a>) by 10.00 a.m. on next business day.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                             |                                   |                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                             |
| <b>For Investor Grievances please Contact</b>                                                                                                                                                                                                                                                                                              | <table><tr><td>Name &amp; address of Registrar</td><td>Name &amp; address of SBI Mutual Fund</td></tr><tr><td>Computer Age Management Services Limited<br/>(SEBI Registration No.: INR000002813) Rayala Towers 158, Anna Salai Chennai 600002<br/>Tel No.: (022 ) 28881101/36 Fax : (044) 30407101<br/>Email : <a href="mailto:Eng_Sbimf@Camsonline.Com">Eng_Sbimf@Camsonline.Com</a>, Website: <a href="http://Www.Camsonline.Com">Www.Camsonline.Com</a></td><td>Mr. C.A. Santosh<br/>(Investor Relations Officer)<br/>SBI Funds Management Ltd.<br/>9th Floor, Crescenzo, C-38 &amp; 39, G Block, Bandra Kurla Complex, Bandra (East), Mumbai – 400 051<br/>Tel: 022- 61793537<br/>Email: <a href="mailto:Customer.Delight@Sbimf.Com">Customer.Delight@Sbimf.Com</a></td></tr></table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Name & address of Registrar | Name & address of SBI Mutual Fund | Computer Age Management Services Limited<br>(SEBI Registration No.: INR000002813) Rayala Towers 158, Anna Salai Chennai 600002<br>Tel No.: (022 ) 28881101/36 Fax : (044) 30407101<br>Email : <a href="mailto:Eng_Sbimf@Camsonline.Com">Eng_Sbimf@Camsonline.Com</a> , Website: <a href="http://Www.Camsonline.Com">Www.Camsonline.Com</a> | Mr. C.A. Santosh<br>(Investor Relations Officer)<br>SBI Funds Management Ltd.<br>9th Floor, Crescenzo, C-38 & 39, G Block, Bandra Kurla Complex, Bandra (East), Mumbai – 400 051<br>Tel: 022- 61793537<br>Email: <a href="mailto:Customer.Delight@Sbimf.Com">Customer.Delight@Sbimf.Com</a> |
| Name & address of Registrar                                                                                                                                                                                                                                                                                                                | Name & address of SBI Mutual Fund                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                             |                                   |                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                             |
| Computer Age Management Services Limited<br>(SEBI Registration No.: INR000002813) Rayala Towers 158, Anna Salai Chennai 600002<br>Tel No.: (022 ) 28881101/36 Fax : (044) 30407101<br>Email : <a href="mailto:Eng_Sbimf@Camsonline.Com">Eng_Sbimf@Camsonline.Com</a> , Website: <a href="http://Www.Camsonline.Com">Www.Camsonline.Com</a> | Mr. C.A. Santosh<br>(Investor Relations Officer)<br>SBI Funds Management Ltd.<br>9th Floor, Crescenzo, C-38 & 39, G Block, Bandra Kurla Complex, Bandra (East), Mumbai – 400 051<br>Tel: 022- 61793537<br>Email: <a href="mailto:Customer.Delight@Sbimf.Com">Customer.Delight@Sbimf.Com</a>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                             |                                   |                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                             |
| <b>Unit holders' Information</b>                                                                                                                                                                                                                                                                                                           | <p>Pursuant to Regulation 36 of the SEBI Regulation, the following shall be applicable with respect to account statement:</p> <p>As the Units of the Scheme are in demat, the holding statement issued by the Depository Participant would be deemed to be adequate compliance with requirements of SEBI regarding dispatch of statements of account.</p> <p>In terms of SEBI Circular No. IR/MRD/DP/31/2014 dated November 12, 2014 on Consolidated Account Statement, investors having Demat account has an option to receive consolidated account statement:</p> <ul style="list-style-type: none"><li>Investors having MF investments and holding securities in Demat account shall receive a single Consolidated Account Statement (CAS) from the Depository.</li><li>Consolidation of account statement shall be done based on Permanent Account Number (PAN). In case of multiple holding, it shall be PAN of the first holder and pattern of holding. The CAS shall be generated monthly.</li><li>If there is any transaction in any of the Demat accounts of the investor or in any of his mutual fund folios, depositories shall send the CAS within twelve (12) days from the month end and to investors that have opted for delivery via physical mode, within fifteen (15) days from the month end w.e.f May 14, 2025 pursuant to SEBI Circular No. SEBI/HO/MRD/PoD1/CIR/P/2025/16 dated February 14, 2025. In case, there is no transaction in any of the mutual fund folios and demat accounts then CAS with holding details shall be</li></ul> |  |                             |                                   |                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                             |

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
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|  | <p>sent to the investor on half yearly basis. The depositories shall dispatch the CAS to investors that have opted for e-CAS on or before the eighteenth (18th) day of April and October and to investors that have opted for delivery via physical mode by the twenty first (21st) day of April and October.</p> <ul style="list-style-type: none"> <li>• In case an investor has multiple accounts across two depositories, the depository with whom the account has been opened earlier will be the default depository.</li> <li>•</li> </ul> <p>The half yearly portfolio of scheme (along with the ISIN) shall be disclosed within 10 days from close of each half year on the Website of the Mutual Fund (<a href="http://www.sbimf.com">www.sbimf.com</a>) and on the Website of AMFI (<a href="http://www.amfiindia.com">www.amfiindia.com</a>). Also, the Fund shall email the half yearly portfolio to the unitholders whose email address is registered with the Fund within 10 days from close of each half year. The AMC shall publish an advertisement in all India edition of at least two daily newspapers, one each in English and Hindi, every half year disclosing the hosting of the half-yearly statement of the schemes portfolio on the Website of the Mutual Fund and on the Website of AMFI and shall also specify the modes through which a written request can be submitted by the unitholder for obtaining a copy of the statement of scheme portfolio. Further, before expiry of one month from the close of each half year i.e. on March 31 or September 30, the Fund shall host a soft copy of half – yearly unaudited financial results on the website of the Fund and that of AMFI. A notice shall be published disclosing the hosting of such financial results on the website of the mutual fund, in atleast one English daily newspaper having nationwide circulation and in a newspaper having wide circulation published in the language of the region where the Head Office of the mutual fund is situated.</p> <p><b>Annual Report:</b></p> <p>Scheme wise Annual Report or an abridged summary thereof shall be provided to all unitholders within four months from the date of closure of the relevant accounts year i.e. 31st March each year as follows:</p> <ol style="list-style-type: none"> <li>1. The Scheme wise annual report / abridged summary thereof shall be hosted on website of the Fund i.e., <a href="http://www.sbimf.com">www.sbimf.com</a> and on the website of AMFI i.e. <a href="http://www.amfiindia.com">www.amfiindia.com</a>. The physical copy of the scheme-wise annual report or abridged summary shall be made available to the unitholders at the registered office of SBI Mutual Fund at all times.</li> <li>2. The scheme annual report or an abridged summary thereof shall be emailed to those unitholders whose email addresses are registered with the Fund.</li> <li>3. The AMC shall publish an advertisement on annual basis, in all India edition of at least two daily newspapers, one each in English and Hindi; disclosing the hosting of the scheme wise annual report on its website viz. <a href="http://www.sbimf.com">www.sbimf.com</a> and on the website of AMFI i.e. <a href="http://www.amfiindia.com">www.amfiindia.com</a> and the modes through which a written request can be submitted by the unitholder for obtaining a physical or electronic copy of the scheme-wise annual report or abridged summary.</li> <li>4. The AMC shall provide physical copy of the abridged summary of the Annual report, without charging any cost, on receipt of a specific request from the unitholder.</li> </ol> |
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This Key Information Memorandum is dated: 18<sup>th</sup> Aug 2025

### GENERAL INFORMATION AND GUIDELINES

1. Please read carefully the Scheme Information Document of the scheme(s) containing the terms of offer before investing. Prospective investors should not treat the contents of this document or the Scheme Information Document of the scheme(s) as advice relating to legal, taxation, investment or any other matter and are recommended to consult their own professional advisors concerning the acquisitions, holding or disposal of the Magnums/units. It must be understood clearly that all applicants are deemed to have accepted the terms subject to which this offer is being made and bind themselves to the terms upon signing the application form and tendering payment. The Scheme Information Document /Key Information Memorandum(s) of the respective Scheme(s) are available with the SBIFML Branches/Office of CAMS/ brokers/distributors and also displayed at the SBIMF website i.e. [www.sbimf.com](http://www.sbimf.com)
2. Please complete the Application Form legibly in black ink or any dark coloured ink, in the English language, in BLOCK CAPITALS. Please strike out with a line across any section that is not applicable.
3. Application by post: Applications can be sent by post to the office of the Registrar to the scheme (Computer Age Management Services Ltd., Rayala Towers, 158, Anna Salai, Chennai – 600 002.) and should be accompanied by cheques payable at Chennai. Applications received by post will be deemed to have been submitted on date of receipt at the Registrar's end.
4. Investors are advised to retain the acknowledgement slip signed/stamped by the collection centre where they submit the application.
5. Mode of Payment: Payment may be made by cheque payable locally, at any of the official point of acceptance of SBIMF. Cheques should be drawn in favour of "SBI Dynamic Asset Allocation Fund Active FOF". Outstation cheques and Non CTS cheques will not be accepted and application forms accompanied by such cheques will be rejected. Please do not pay Cash for subscription to any Agent.
6. Allotment of Magnums/units: Allotment is assured to all applicants provided the applications are complete in all respects and are in order. Applications not complete in any respect are liable for rejection.
7. SEBI has banned rebating in any form. Investors should not be guided by considerations other than the Scheme's objective for investment.
8. Right to Limit Redemptions:

In accordance with paragraph 1.12 of SEBI Master Circular for Mutual Funds dated June 27, 2024, the provisions of restriction on redemption (including switch out) in Schemes of SBI Mutual Fund are as under:

1. Restrictions may be imposed when there are circumstances leading to a systemic crisis or event that severely constricts the market liquidity or the efficient functioning of the market such as:
  - i. Liquidity Issues: When markets at large become illiquid affecting almost all securities rather than any issuer specific security.
  - ii. Market failures, exchange closure: When markets are affected by unexpected events which impact functioning of exchanges or the regular course of transactions. Such unexpected events could also be related to political, economic, military, monetary or other emergencies.
  - iii. Operational Issues: When exceptional circumstances are caused by force majeure, unpredictable operational problems and technical failures (e.g. a black out).
2. Restrictions on redemption may be imposed for a specified period of time not exceeding 10 Business Days in any period of 90 days.
3. When restrictions on redemption is imposed, the following procedure will be applied:
  - i. No redemption requests upto Rs. 2 Lacs shall be subject to such restriction.
  - ii. Where redemption requests are above Rs.2 lakh, AMC shall redeem the first Rs.2 Lacs without such restrictions and remaining part over and above Rs.2 Lacs shall be subject to such restrictions.

Any restriction on Redemption of the units shall be made applicable only after specific approval of the Board of Directors of the Asset Management Company and Trustee Company. The approval from the AMC Board and the Trustee giving details of the circumstances and justification shall also be informed to SEBI immediately.
9. Prevention of Money Laundering: In terms of the Prevention of Money Laundering Act, 2002, the Rules issued there under and the guidelines/circulars issued by SEBI regarding the Anti Money Laundering (AML Laws), all SEBI registered intermediaries, including Mutual Funds, are required to formulate and implement a client identification programme, verify and maintain the

record of identity and address(s) of the investors. In this regard, investors who wish to make an investment in the units of mutual fund will be required to produce prescribed documents to any such offices as may be notified by SBIMF of AMFI for time to time in order to comply with KYC norms of SBIMF.

- 10. Ultimate Beneficial Owner:** Pursuant to Prevention of Money Laundering Act, 2002 (PMLA) and Rules framed there under, SEBI Master circular dated December 31, 2010 on Anti Money Laundering (AML) sufficient information to identify persons who beneficially own or control the securities account is required to be obtained. Also, SEBI had vide its circular no. CIR/ MIRSD/2/2013 dated January 24, 2013 prescribed guidelines regarding identification of Ultimate Beneficial Owner(s) ("UBO").

As per these guidelines UBO means "Natural Person", or persons who ultimately own, control or influence a client and/or persons on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a legal person or arrangement. Investors are requested to refer to the "Declaration for UBO" for detailed guidelines on identification of UBO.

The provisions relating to UBO are not applicable where the investor or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company. The AMC/ Trustee reserves the right to reject application forms submitted without disclosing necessary information as prescribed under the aforesaid laws/ rules/ regulations.

Investors are requested to promptly inform the AMC if the information provided undergoes any change in future.

- 11.** Application Forms incomplete in any respect or not accompanied by a Cheque are liable to be rejected.
- 12.** Cash investments in mutual funds: In order to help enhance the reach of mutual fund products amongst small investors, who may not be tax payers and may not have PAN/bank accounts, such as farmers, small traders/businessmen/workers, SEBI has permitted receipt of cash for purchases / additional purchases to the extent of Rs. 50,000/- per investor, per mutual fund, per financial year subject to (i) compliance with Prevention of Money Laundering Act, 2002 and Rules framed there under; the SEBI Circular(s) on Anti Money Laundering (AML) and other applicable AML rules, regulations and guidelines and (ii) sufficient systems and procedures in place. However, payment towards redemptions, IDCW, etc. with respect to aforementioned investments shall be paid only through banking channel.

In view of the above the fund shall accept subscription applications with payment mode as "Cash" ("Cash Investments") to the extent of Rs. 50,000/- per investor, per financial year subject to the following:

1. Eligible Investors: Only resident individuals, sole proprietorships and minors (through guardians), who are KYC Compliant and have a Bank Account can make Cash Investments.
2. Mode of application: Applications for subscription with "Cash" as mode of payment can be submitted in physical form only at select OPAT of SBI Mutual Fund.
3. Cash collection facility with State Bank of India (SBI): Currently, the Fund has made arrangement with SBI to collect cash at its selected branches from investors (accompanied by a deposit slip issued and verified by the Fund).

The Bank only acts as an aggregator for cash received towards subscriptions under various schemes received on a day at the various SBI branches. AMC reserves the right to reject acceptance of cash investments if it is not in compliance with applicable SEBI circular or other regulatory requirements.

- 13.** By investing in the Scheme, the investor authorizes the AMC to share all sensitive personal data / information collected from the investors with its Registrar and Transfer Agents ("RTA") or with any other third party engaged by the AMC / RTA for the purpose of processing / storage etc. The AMC also authorizes the RTA to collect all such sensitive personal data / information on behalf of the AMC, through any mode of communication either directly from investors or through their distributors or through any other third party engaged by the AMC / RTA. Further, the RTA is entitled to retain all such sensitive personal data / information collected from the investors and distributors or any other third party service providers on a permanent basis for the purpose of authenticating the investor's / distributor's identity.
- 14.** Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor
- 15.** Submission of Application Forms: Applications complete in all respects together with necessary remittance may be submitted before the closing of the offer for each Fund at SBIMF Corporate Office, SBIFML – Branches, the designated office of Registrar or other such collecting centres as may be designated by AMC. The list of collection centres is printed overleaf. Application by post: Applications can be sent by post to the office of the Registrar to the scheme and should be accompanied by cheques payable at Chennai. Applications received by post will be deemed to have been submitted on date of receipt at the Registrar's end.

### NOTES TO HELP YOU COMPLETE THE APPLICATION FORM

#### Note 1 - First applicant's personal details:

- a) Applications for Individuals: Please write your name in the sequence of First Name, Middle Name and Last Name. Please do not abbreviate any name. Write your name exactly as it appears in your PAN as provided in the bank account details.
- b) In case the Sole / first applicant has an existing Folio No., it should be stated along with name and PAN details in the space provided for them. The form thereafter should be filled from Section 6 (onwards) (i.e. the back side of the form).
- c) Please fill Date of Birth (DOB) as it is mandatory. In case of minor, both minor DOB and Guardian DOB is mandatory.
- d) If you have an email ID please include it as this will help us resolve any queries more promptly.
- e) To help us service you better, your telephone number(s) / mobile number(s) should also be provided including the relevant STD / ISD code.
- f) Permanent Account Number: Permanent Account Number (PAN) is the sole identification number for all investors transacting in the units of SBI Mutual Fund, irrespective of the amount of transaction. Submission of attested copy of PAN card is mandatory for all categories of investors (including NRIs, Guardian of a minor). Attestation can be done by distributors / AMC staff etc.
- g) Micro investments - As per Securities and Exchange Board of India (SEBI) letter no. OW/16541/2012 dated July 24, 2012 regarding Exemption from the need for Permanent Account Number (PAN) for micro financial products" informed that investments in mutual fund schemes [including investments through Systematic Investment Plan (SIP)] of up to Rs. 50,000/- (Rupees Fifty Thousand) per investor per year per mutual fund shall be exempted from the requirement of PAN. However, such investors shall be required to quote PAN Exempt KYC Reference Number (PEKRN) details of which are given in PAN Exempt Investments. Accordingly, PAN shall be exempted if the aggregate of the lump sum investment (fresh purchase & additional purchase) and SIP installments by an investor in a rolling 12 months period or in a financial year i.e. April to March does not exceed Rs. 50,000/- (Rupees Fifty Thousand) (hereafter referred to as "Micro investments"). However, the requirements of Know Your Client (KYC) shall be mandatory for all investments, irrespective of the amount of investment.
- h) Know Your Customer (KYC)

KYC (Know Your Customer) norms are mandatory for ALL investors for all types of transactions including purchase, redemption, switches, systematic transactions and also non financial transactions.

Further, to bring uniformity in KYC process, SEBI has introduced a common KYC for all the SEBI registered intermediaries with effect from January 1, 2012. New investors are therefore requested to carry out the KYC process including In-Person Verification (IPV) with any SEBI registered intermediaries including mutual funds. The KYC application forms are also available on our website [www.sbimf.com](http://www.sbimf.com). SBI Funds Management Ltd. (AMC) or NISM/AMFI certified distributors who are KYD compliant are authorized to undertake the IPV for Mutual Fund investors. Further, in case of any applications received directly (i.e. without being routed through the distributors) from the investors, the Mutual Fund may rely upon the IPV (on the KYC Application Form) performed by the scheduled commercial banks.

In this regard, all categories of investors who wish to make an investment in the units of mutual fund will be required to submit the KYC form along with the prescribed documents at any of the SBIFML Branches or such other offices as may be notified by SBIMF from time to time to comply with KYC norms.

#### Central KYC Records Registry (CKY CR) Process

SEBI vide circular no. CIR/MIRSD/66/2016 dated July 21, 2016 and circular no. CIR/ MIRSD/120 /2016 dated November 10, 2016, has intimated about operationalization of Central KYC Records Registry (CKYCR). Further, AMFI vide circular dated December 22, 2016 has prescribed new CKYC forms which shall be applicable for prospective investors.

Accordingly, with effect from February 1, 2017, any new individual investor who has not done KYC under KRA regime shall fill the new CKYC form. In case any such new individual investor uses the old KYC form, he/she shall provide additional/missing information by filling the Supplementary CKYC form or the new CKYC form. Existing investors who are registered or verified in the KRA system can continue making investments without any additional documentation. However, for any modification to their existing records, they need to fill up the CKYC form. The aforesaid forms are available on the website of the Fund viz. [www.sbimf.com](http://www.sbimf.com) and for completion of CKYC process, the investors are required to visit the nearest Point of Service or Point of Acceptance of transactions of the Fund. The KYC requirements shall be governed by SEBI Circulars/ notifications and AMFI Guidelines which may change from time to time.

Once the investor has done KYC with a SEBI registered intermediary, the investor need not undergo the same process again with another intermediary including mutual funds. Investor should enclose the KYC acknowledgement letter with the investment application. Existing KYC compliant investors of the Mutual Fund can continue to invest as per the current practice.

Please refer to [www.sbimf.com](http://www.sbimf.com) for details.

It is mandatory to complete the KYC requirements for all unit holders, including for all joint holders and the guardian in case of folio of a minor investor. Accordingly, financial transactions (including purchases, redemptions, switches and all types of systematic plans) and non-financial requests will not be processed if the unit holders have not completed KYC requirements. Unit holders are advised to use the applicable CKYC & KYC Form for completing the KYC requirements and submit the form at the point of acceptance. Further, upon updation of PAN details with the KRA, the unit holders are requested to intimate us/our Registrar and Transfer Agent i.e. Computer Age Management Services Limited, their

PAN information along with the folio details for updation in our records.

- i) Your address should be written in full. P.O. Box address is not sufficient. Please provide PIN code to enable us to serve you better.
- j) Procedure for NRIs: Applications on a Repatriable basis will be made by remitting funds from abroad through normal banking channels or by cheques drawn on NRE accounts or through Special Non-resident Rupee Accounts maintained with banks authorized to deal in foreign exchange in India. NRI applicants are requested to instruct the bank branch through which they have made the remittance or where they have the NRE / FCNR / Special Non-resident Rupee Account to send the necessary FIRC in original on security paper to the registrars as soon as possible to enable early processing of their applications. NRIs can also apply on a non-repatriable basis from their NRO account. NRIs should mandatorily state their overseas address in complete otherwise the application will be rejected. NRIs are requested to provide an Indian address (if available) for correspondence.
- k) Who can invest:

Prospective investors are advised to satisfy themselves that they are not prohibited by any law governing such entity and any Indian law from investing in the Scheme and are authorized to purchase units of mutual funds as per their respective constitutions, charter documents, corporate / other authorisations and relevant statutory provisions.

The following is an indicative list of persons who are generally eligible and may apply for subscription to the Units of the Scheme:

- Indian resident adult individuals, either singly or jointly (not exceeding three);
- Minor through parent / lawful guardian; (please see the note below)
- Companies, bodies corporate, public sector undertakings, association of persons or bodies of individuals and societies registered under the Societies Registration Act, 1860;
- Religious and Charitable Trusts, Wakfs or endowments of private trusts (subject to receipt of necessary approvals as required) and Private Trusts authorised to invest in mutual fund schemes under their trust deeds;
- Partnership Firms constituted under the Partnership Act, 1932;
- A Hindu Undivided Family (HUF) through its Karta;
- Banks (including Co-operative Banks and Regional Rural Banks) and Financial Institutions;
- Non-Resident Indians (NRIs) / Persons of Indian Origin (PIO) on full repatriation basis or on non-repatriation basis.

Prospective investors are advised to note that the SID / SAI / KIM does not constitute distribution, an offer to buy or sell or solicitation of an offer to buy or sell Units of the Fund in any jurisdiction in which such distribution, sale or offer is not authorized as per applicable law. Any investor by making investment in SBI Mutual Fund confirms that he is an eligible investor to make such investment(s) and confirms that such investment(s) has been made in accordance with applicable law;

- Foreign Portfolio Investor
- Army, Air Force, Navy and other para-military funds and eligible institutions;
- Scientific and Industrial Research Organisations;
- Provident / Pension / Gratuity and such other Funds as and when permitted to invest;

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- International Multilateral Agencies approved by the Government of India / RBI; and
- The Trustee, AMC or Sponsor or their associates (if eligible and permitted under prevailing laws).
- A Mutual Fund through its schemes, including Fund of Funds schemes.
- Such other individuals, entities etc. as may be decided by the Mutual Fund / Trustees from time to time, so long as wherever applicable they are in conformity with applicable laws / Regulations

Note: Following is the process for investments made in the name of a Minor through a Guardian:

- Payment for investment by means of Cheque or any other mode shall be accepted from the bank account of the minor or from a joint account of the minor with the guardian or from bank account of the guardian.
- Mutual Fund will send an intimation to Unit holders advising the minor (on attaining majority) to submit an application form along with prescribed documents to change the status of the account from 'minor' to 'major'.
- All transactions / standing instructions / systematic transactions etc. will be suspended i.e. the Folio will be frozen for operation by the guardian from the date of beneficiary child completing 18 years of age, till the status of the minor is changed to major. Upon the minor attaining the status of major, the minor in whose name the investment was made, shall be required to provide all the KYC details, updated bank account details including cancelled original cheque leaf of the new bank account.
- No investments (lumpsum/SIP/ switch in/ STP in etc.) in the scheme would be allowed once the minor attains majority i.e. 18 years of age unless the status is changed to Major by providing requisite documents.

### Notes:

1. Non Resident Indians and Persons of Indian Origin residing abroad (NRIs) / Foreign Institutional Investors (FIIs) have been granted a general permission by Reserve Bank of India [Schedule 5 of the Foreign Exchange Management (Transfer or Issue of Security by a Person Resident Outside India) Regulations, 2000 for investing in / redeeming units of the mutual funds subject to conditions set out in the aforesaid regulations.
2. In case of application under a Power of Attorney or by a limited company or a corporate body or an eligible institution or a registered society or a trust fund, the original Power of Attorney or a certified true copy duly notarised or the relevant resolution or authority to make the application as the case may be, or duly notarised copy thereof, alongwith a certified copy of the Memorandum and Articles of Association and/or bye-laws and / or trust deed and / or partnership deed and Certificate of Registration should be submitted. The officials should sign the application under their official designation. A list of specimen signatures of the authorised officials, duly certified / attested should also be attached to the Application Form. In case of a Trust / Fund it shall submit a resolution from the Trustee(s) authorizing such purchases.

Applications not complying with the above are liable to be rejected.

3. Returned cheques are liable not to be presented again for collection, and the accompanying application forms are liable to be rejected.

### Who cannot invest

It should be noted that the following entities cannot invest in the scheme:

1. Any individual who is a Foreign National, except for Non –Resident Indians and Persons of Indian Origin (who are not residents of United States of America or Canada), provided such Foreign National has procured all the relevant regulatory approvals applicable and has complied with all applicable laws, including but not limited to and pertaining to anti money laundering, know your customer (KYC), income tax, foreign exchange management (the Foreign Exchange Management Act, 1999 and the Rules and Regulations made thereunder) , in the sole discretion and to the sole satisfaction of SBI Funds Management Limited.

SBI Funds Management Limited in its capacity as an asset manager to the SBI Mutual Fund reserves the right to amend/ terminate this facility at any time, keeping in view business/operational exigencies.

2. Overseas Corporate Bodies (OCBs) shall not be allowed to invest in the Scheme. These would be firms and societies which are held directly or indirectly but ultimately to the extent of at least 60% by NRIs and trusts in which at least 60% of the beneficial interest is similarly held irrevocably by such persons (OCBs)
3. Residents of United States of America and Canada.
4. Such other persons as may be specified by AMC from time to time

SBIMFTCPL reserves the right to include / exclude new / existing categories of investors to invest in the Scheme from time to time, subject to SEBI Regulations and other prevailing statutory regulations, if any.

Subject to the Regulations, any application for Units may be accepted or rejected in the sole and absolute discretion of the Trustee. For example, the Trustee may reject any application for the Purchase of Units if the application is invalid or incomplete or if, in its opinion, increasing the size of any or all of the Scheme's Unit capital is not in the general interest of the Unit holders, or if the Trustee for any other reason does not believe that it would be in the best interest of the Scheme or its Unit holders to accept such an application.

The AMC / Trustee may need to obtain from the investor verification of identity or such other details relating to a subscription for Units as may be required under any applicable law, which may result in delay in processing the application.

Applications not complete in any respect are liable to be rejected.

**Note 2 - Second and Third Applicants' details:** The Names of Second and Third Applicants should be provided here. Please see note 1 above.

**Note 3 - Bank Particulars:** SEBI has made it mandatory for investors in mutual funds to state their bank account numbers in their applications and in redemption requests. Investors are requested to provide these details in the space provided in the application form. This measure is intended to avoid fraud/misuse or theft of warrants in transit. Kindly note that applications not containing these details may be rejected. To enable verification of the bank mandate details and ensure expeditious clearing, the following should be provided,

- i) Details of the "City" of the Clearing Circle in which the bank / branch participates; and
- ii) The 9-digit MICR (Magnetic Ink Character Recognition) number appearing to the right of the cheque number on the bottom white strip of a cheque leaf. Copy of a cancelled cheque/leaf is mandatory to verify bank account details.
- iii) The 11 digit IFS Code
- iv) Direct credit facility as and when it is available, we will electronically / directly credit your Redemption proceeds / IDCW in the Bank Account provided by you.
- v) Depending on your residential status and intent of repatriation, please indicate the type of bank account most relevant to you from the list of options provided.
- vi) Only CTS -2010 compliant cheques will be accepted.
- vii) In case of change in bank mandate:

For registration of an investor's bank account details at the time of investment and/or registering of new/changed bank account details submitted either separately or together with any financial and/or non-financial transaction the documents as detailed below will need to be submitted by the investors alongwith the relevant application form / transaction slip / letter for processing of the COB requests:

- 1. A cheque leaf (with the first holder's/applicant's name printed therein) of the new bank account with the words "CANCELLED" written in bold letters across the face of the cheque OR
- 2. Attested/Notarized photocopy of a blank cheque leaf (with the first holder's/ applicant's name printed therein) of the new bank mandate.
- 3. In case the first holder's / investor's name is not printed on the face of the cheque or if the new bank account does not provide a cheque book facility then such investors should furnish an attested / Notarized copy of the relevant page of the Pass Book of such bank account wherein the first holder's/investor's name and address is clearly legible..

viii) Restriction on acceptance of Third-party payments

SBIMF will not accept subscriptions with Third-Party payments except in the following exceptional situations:

- 1) Payment by parent / legal guardian on behalf of minor through lumpsum / Systematic Investment Plans subject to compliance with SEBI Regulations and Guidelines issued by AMFI from time to time.
- 2) Payment by Employer on behalf of employee under Systematic Investment Plans or lump sum / one-time subscription, through Payroll deductions or deduction out of expense reimbursements.
- 3) Custodian on behalf of an FII or a client

- 4) Payment by Asset Management Company to a Distributor empanelled with it on account of commission/incentive etc. in the form of the Mutual Fund Units of the Funds managed by such AMC through Systematic Investment Plans or lump sum / one-time subscription, subject to compliance with SEBI Regulations and Guidelines issued by AMFI, from time to time. (Note: For all the above instances, the investor and the person making the payment should be KYC compliant and also submit 'Third Party Payment Declaration Form' with complete details. The said form is available at the nearest OPAT of SBI Mutual Fund or can be downloaded from our website [www.sbimf.com](http://www.sbimf.com)).
- 5) Payment by a Corporate to its Agent/Distributor/Dealer (similar arrangement with Principal agent relationship), on account of commission or incentive payable for sale of its goods/services, in the form of the Mutual Fund Units through SIP or lump sum / one-time subscription, subject to compliance with SEBI Regulations and Guidelines issued by AMFI, from time to time.

ix) Registration of Bank Mandate For New Folio Creation

Investor are requested to note that, it is mandatory to submit any one of the following documents in case the pay-out bank account details (i.e. bank account for receipt of redemption / IDCW proceeds) mentioned in the application form is different from pay-in bank details (i.e., bank account from which subscription payment is being made):

- Original Cancelled cheque with first unit holder name and bank account number printed on the face of the cheque (or)
- Bank passbook or bank statement (with current entries not older than 3 months) containing the first unit holder name, bank mandate information and bank account number (or)
- A letter from bank on its letter head duly signed by bank manager/authorised personnel with bank seal, name, designation and employee number confirming the investor details and bank mandate information.

The above documents shall be submitted in original. If copies are furnished, the same must be submitted at any of the Official Point of Acceptance of SBI MF where they will be verified with the original documents to the satisfaction of the Fund. The original documents will be returned across the counter to the applicant after due verification. In case the original of any document is not produced for verification, then the copies should be attested by the bank manager/authorised personnel by affixing the bank seal and mentioning the name, designation and employee code.

The AMC/Trustee reserves the right to amend the aforesaid requirements.

x. Registration of multiple bank accounts:

SBIMF also provides a facility to the investors to register multiple bank accounts. Investor can register upto 5 bank accounts in case of individuals /HUFs, and upto 10 in other cases. Investor may choose one of the registered bank accounts as default bank account for the credit of redemption / IDCW proceeds. In case of existing investors, their existing bank mandate registered with the AMC / RTA, and in case of new investors, their bank account details as mentioned in the application form shall be treated as default bank account for pay-out, if they have not specifically designated a default bank account.

Investors may change the same in writing, using the Multiple Bank Account Registration. By registering multiple bank accounts, investors can use any of the registered bank accounts to receive IDCW / redemption proceeds. These account details will be used by the SBIMF/ R&T for verification of instrument used for subscription to ensure that third party payments are not used for mutual fund subscription, except where permitted. Investors are requested to avail the facility of registering multiple bank accounts by filling in the Application Form for Registration of Multiple Bank Accounts available at the nearest SBIFML Branches or the same can be downloaded from our website [www.sbimf.com](http://www.sbimf.com)

In case the application for subscription does not comply with the above provisions, SBIMF retains the sole and absolute discretion to reject / not to process such application and refund the subscription money and shall not be liable for any such rejection.

For registration of Multiple bank account investors are requested to submit

- (i) proof of any one of the existing bank account(s) in the folio(s) AND
- (ii) proof of all the new bank account(s) to be registered in the folio(s) along with the Multiple Bank Accounts Registration form. Investors can submit any one of the following document/s as supporting document/s for a bank account:
  - A "CANCELLED" original cheque leaf (where the first holder's / investor's name and bank account number is printed on the face of the cheque)
  - A copy of the bank pass book or bank statement (with entries not older than 3 months) wherein the first holder's / investor's name, bank a/c no & bank branch is clearly legible.

- A letter from the investor's bank on their letter head certifying the investor's bank account information viz. account holder's name and address, bank account number, bank branch, account type, MICR & IFSC code. The letter should be certified by an authorized official of the bank with his/her full signature, name, designation and bank seal.

Investors may produce photocopies of the above-mentioned documents along with the original documents at any of the SBIFML Branches for verification. The photocopies of such document/s will be verified with the original document/s to the satisfaction of SBI Mutual Fund and the original document/s will be returned to investors. In case the original of any document/s is not made available for verification, then the photocopies thereof duly attested by an authorized official of the bank clearly mentioning the name & designation with bank seal shall be accepted.

**Note 4 - Services:** We offer an online account management service which gives you the latest details of your account 24 hours a day, seven days a week, including your current valuation. Please visit [www.sbimf.com](http://www.sbimf.com) for further details. Investors who provides the e-mail address may receive the statement by e-mail.

**Note 5 - Investment details:**

- Payment may be made by cheque at any of the SBIFML Branches/Corporate Office of the Mutual Fund/Office of the Registrar/SBIFML Branches and Transaction Points of the Registrar or such other Collection Centres as may be decided by the Mutual Fund from time to time. Outstation cheques will not be accepted and application forms accompanied by such cheques will be rejected. Cheque to be crossed "Account Payee" only and should be drawn in favour of "SBI Income Plus Arbitrage Active FOF".

The name of the scheme as mentioned on the cheque shall prevail in the event of a mismatch in the scheme name between the application form and the cheque.

- INVESTMENT OPTIONS:

Direct Plan is the plan where investors purchase /subscribe Units in a Scheme directly with the Fund and is not available for investors who route their investments through a Distributor. Such separate plan have a lower expense ratio excluding distribution expenses, commission, etc., and no commission shall be paid from such plans.

Options exercised at the time of application may be changed by the investor at a later date by way of written request to the Registrar of the Scheme. Such changes would be effective from a prospective date.

Default Option:

Between Regular Plan & Direct Plan:

| Scenario | Broker code mentioned by the investor | Plan mentioned by the investor | Default plan to be captured |
|----------|---------------------------------------|--------------------------------|-----------------------------|
| 1        | Not mentioned                         | Not mentioned                  | Direct Plan                 |
| 2        | Not mentioned                         | Direct                         | Direct Plan                 |
| 3        | Not mentioned                         | Regular                        | Direct Plan                 |
| 4        | Mentioned                             | Direct                         | Direct Plan                 |
| 5        | Direct                                | Not mentioned                  | Direct Plan                 |
| 6        | Direct                                | Regular                        | Direct Plan                 |
| 7        | Mentioned                             | Regular                        | Regular Plan                |
| 8        | Mentioned                             | Not mentioned                  | Regular Plan                |

In cases of wrong/ invalid/ incomplete ARN codes mentioned on the application form, the application shall be processed under Direct Plan.

In terms of paragraph 10.4.1 (a) of SEBI Master Circular for Mutual Funds dated June 27, 2024, no entry load on any application will be charged by the Schemes to the investor.

**Note 6 - Direct Credit of IDCW/Redemption:** SBIFM has arrangement for direct credit/NEFT/RTGS facility of IDCW / redemptions with certain banks. For the investors who have a core account with such banks and whose IFSC code is updated in folio records, the payment of IDCW / redemption proceeds would be directly credited into their bank account.

The AMC may alter the list of banks participating in direct credit arrangement from time to time/ withdraw direct credit facility from banks, based on its experience of dealing with any such banks or add/withdraw the name of bank with whom direct credit facility arrangement can be introduced/ discontinued as the case may be. However, in the event of the direct credit facility being not available or discontinued or rejected by banks for any reasons whatsoever, the unitholders will receive payments in respect of such IDCW / redemption through any other mode such as cheque, demand draft, warrant etc. as in the normal course.

**Note 7 - Systematic Withdrawal Plan (SWP):** Under SWP, a minimum amount of Rs. 500/- can be withdrawn every week, month, quarter, half-yearly or annually by indicating in the application form or by issuing advance instructions to the Registrar at any time. Investors may indicate the month and year from which SWP should commence along with the frequency. SWP can be processed on any date of the month for monthly/ quarterly/ semi – annual /annual SWP. Weekly SWP can be done on 1st/8th/ 15th/22nd of every month.

If no date is mentioned, 10th will be considered as the default SWP date. If no frequency mentioned, 'Monthly' will be considered as the default frequency. If 'End date' not mentioned, the same will be considered as 'Perpetual'.

**Note 8 - BANDHAN - SWP:**

BANDHAN - SWP is intended to provide regular payout to the children/spouse/parents/sibling (family members) of an individual investor who have invested under the Growth option of the Scheme

The details of this facility are as under:

- This facility will be available to investors with "Individual" status on any of the existing SWP dates viz. 1st / 5th / 10th / 15th / 20th / 25th / 30th (last working day in case of February) only at MONTHLY frequency.
- This facility will be available only under the Growth option for both Regular and Direct plans
- This facility will work similar to Systematic Withdrawal Plan (SWP), where the 1st unitholder can apply for the facility and can opt for monthly payment to maximum 3 of his eligible family members specifying the SWP date & amount. The SWP request for this facility should be submitted at least 7 days prior to the first SWP date. If the SWP due date is a nonbusiness day, then the same will be processed on the next business day.
- The beneficiary should be resident individual and cannot be an NRI.
- Unit holder/s are required to submit the following documents on behalf of the beneficiary at the time of registration for "BANDHAN- SWP" facility. These documents should be attested by unitholder(s).
  - o Proof of relation such as Passport, PAN card, Birth Certificate, SSC / Degree certificate, Marriage certificate wherein the name of the specified family member is mentioned with the relationship. This document should clearly establish the relationship between the unit holder and the beneficiary.
  - o Cancelled cheque of the Bank account OR Copy of Bank Statement/Passbook of the beneficiary family member where the name of the beneficiary and bank a/c no. is printed on it.
  - o Proof of ID and Address of the Beneficiary.
  - o In case KYC Acknowledgment or specific documents mentioned as proof of ID and address are not available, then the following documents can be submitted.
- Proof of Identity - Identity card with applicant's photograph issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.
- Proof of Address – Utility bill which is not more than two months old of any service provider (electricity, telephone, postpaid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity Card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

- The amount of SWP payout will be minimum of Rs.5000/- and in multiples of Rs.1/- thereof. Minimum number of monthly installments would be 12. If no specific amount is mentioned by the unitholder, then the default specified amount will be Rs.5000/- per month. If no SWP date is mentioned, then the default date will be considered as “10th” and if no specific period is mentioned, then the default period will be considered as “perpetual”.
- Only maximum 3 SWP of a specified amount under the “BANDHAN - SWP” facility per Folio/ Scheme shall be accepted.
- Under “BANDHAN - SWP” facility, the beneficiary is restricted to only 3 family member of the first unitholder i.e. child/ sibling above 15 years of age or spouse or either of the parents. It is clarified that the unitholder/s under the same Folio may opt to enroll for normal SWP for self and SWP under “BANDHAN - SWP” facility simultaneously.
- “BANDHAN - SWP” facility will discontinue on happening of any OR all of the following events:
  - o Value of outstanding units in the investor Folio/Scheme is nil/ insufficient
  - o On completion of SWP period
  - o On receipt of written communication of the death of the 1st unitholder or the registered beneficiary
  - o In the event of change of option under the scheme/s
  - o If the units are under pledge/STOP due to any reason
  - o The holding mode is changed from physical to dematerialized holdings
- The investments/payouts under the said facility will be subject to applicable exit load, tax & other provisions applicable to the Scheme
- Unitholder has the option to discontinue the “BANDHAN- SWP” facility anytime by submitting cancellation request to SBI Mutual Fund OR our R&T Agent CAMS at least 7 days prior to the next SWP date
- All other remaining terms & conditions of normal SWP facility shall also apply to “BANDHAN - SWP” facility.
- Any tax liability arising out of such payout under the Bandhan-SWP facility to the registered beneficiary shall be the sole liability of the investor.
- SBIMF reserves the right to seek any additional information/document from the unitholder/s as it deems fit and necessary from time to time, failing which, SBIMF reserves the right to cancel the Bandhan-SWP facility.

Separate Bandhan SWP form has to be filled to opt for multiple beneficiaries from a single folio/scheme.

**Note 9 - Systematic Transfer Plan (STP):** STP is a combination of systematic withdrawal from one scheme and systematic investment into another scheme. Therefore, the minimum amount of withdrawals applicable under SWP would be applicable to STP also. Similarly, the minimum investment applicable for each scheme under SIP would be applicable to STP also. STP facility would allow investors to transfer a predetermined amount from one scheme of the Mutual Fund to the other. The transfer would be processed on any business day as decided by the investor at the time of opting for this facility.

#### **General terms and conditions for STP, Flex STP and CASTP**

1. Exit load shall be as applicable for all transfers in the target/source schemes.
2. The enrolment / termination request should be submitted, at least 10 days prior to the desired commencement / termination date.
3. Default options:
  - Between Regular STP, Flex STP and CASTP – Regular STP
  - Between daily, weekly, monthly & quarterly frequency – monthly frequency
  - Default date for monthly and quarterly frequency – 10th
4. In case the date of transfer falls on a Non-Business Day, then the immediate following Business Day will be considered for the purpose of transfer.
5. In case start date is mentioned but end date is not mentioned, the application will be registered for perpetual period.
6. Weekly transfer will be done on 1st, 8th, 15th & 22nd of the month.

### Terms and conditions of monthly & quarterly STP:

1. STP would be permitted for a minimum period of six months between two schemes.
2. Investor can transfer the amount from the switch-out scheme, subject to a minimum transfer of Rs.1000 and in multiples of Rs. 1 thereafter per month for 6 months, Rs. 500 and in multiples of Rs. 1 thereafter per month for 12 months and Rs. 1500 and in multiples of Rs. 1 thereafter per quarter for one year for other equity schemes, without any restriction on maintaining the minimum balance requirement as stipulated for the switch out scheme.

### Terms and conditions of daily & weekly STP:

1. Under this facility, investor can transfer a predetermined amount from one scheme (Source Scheme) to the other scheme (Target Scheme) on daily basis / weekly basis.
2. Minimum amount of STP for SBI Long Term Equity Fund will be Rs. 500 & in multiples of Rs. 500 for both daily & weekly STP and for other funds the minimum amount of STP will be Rs. 500 & in multiple of Re. 1 for daily STP & Rs. 1000 & in multiple of Re. 1 for weekly STP.
3. Minimum number of installments will be 12 for daily STP & 6 for weekly STP. Where SBI Long Term Equity Fund is the target scheme, Minimum number of installments for daily STP & for weekly STP shall be 6.
4. Weekly STP will be done on 1st, 8th, 15th & 22nd of every month. In case any of these days is a non business day then the immediate next business day will be considered.
5. The complete application form for enrolment / termination for STP should be submitted, at least 7 days prior to the desired commencement/ termination date.
6. Exit load shall be as is applicable in the target/source schemes.

### Flex Systematic Transfer Plan (Flex STP):

Flex Systematic Transfer Plan is a facility wherein an investor under a designated open-ended scheme can opt to transfer variable amounts linked to the value of his investments on the date of transfer at pre-determined intervals from designated open-ended scheme (source scheme) to the Growth option of another open-ended scheme (target scheme).

### Terms and conditions of Flex STP:

1. The amount to be transferred under Flex STP from source scheme to target scheme shall be calculated using the below formula:  
$$\text{Flex STP amount} = [(\text{fixed amount to be transferred per instalment} \times \text{number of instalments already executed, including the current instalment}) - \text{market value of the investments through Flex STP in the transferee scheme on the date of transfer}]$$
2. The first Flex STP instalment will be processed for the fixed instalment amount specified by the investor at the time of enrolment. From the second Flex STP instalment onwards, the transfer amount shall be computed as per formula stated above.
3. Flex STP is available for Monthly and Quarterly frequencies.
4. Flex STP is available only in "Growth" option of the target scheme.
5. If there is any other financial transaction (purchase, redemption or switch) processed in the target scheme during the tenure of Flex STP, the Flex STP will be processed as normal STP for rest of the instalments for the fixed amount.
6. A single Flex STP enrolment form can be filled for transfer into one scheme/ plan/ option only.
7. In case the amount (as per the formula) to be transferred is not available in the source scheme in the investor's folio, the residual amount will be transferred to the target scheme and Flex STP will be closed.
8. All other terms & conditions of Systematic Transfer Plan are also applicable to Flex STP.

### Capital Appreciation Systematic Transfer Plan (CASTP):

CASTP is a facility wherein an investor can opt to transfer the entire capital appreciation linked to the value of his investments on the date of transfer at pre-determined intervals from designated open-ended scheme (source scheme) to another open-ended scheme (target scheme).

**Terms & conditions for Capital Appreciation Systematic Transfer Plan (CASTP):**

1. Investor can avail this facility by submitting the request to transfer entire capital appreciation, subject to minimum of Rs. 100 on any business day.
2. Source scheme: This facility is available only under Growth option of all open ended schemes [except Equity Linked Savings Scheme & Exchange Traded Funds (ETFs)] of SBI Mutual Fund.
3. Target scheme: All open ended schemes except ETFs and daily IDCW option.
4. The facility is available for weekly, monthly & quarterly frequencies.
5. Minimum number of instalments will be 6 for weekly and monthly frequencies and 4 for quarterly frequency.
6. Capital appreciation, if any, will be calculated from the enrollment date of the CASTP, till the first transfer date. Subsequent capital appreciation, if any, will be the capital appreciation between the previous CASTP date (where CASTP has been processed and transferred) and the current CASTP date.
7. In case end date is mentioned but start date is not mentioned, the application will be registered after the expiry of 10 days from the submission of the application for the date of transfer mentioned in the application, provided the minimum number of instalments is met.
8. Minimum investment requirement in the target scheme and minimum redemption amount in the source scheme is not applicable for CASTP.
9. Investor can register only one CASTP for transfer from a source scheme.

**Note 10 - Switchover facility:** Magnum/Unit holders will have the facility of switchover to other plans/options within scheme/plan/to other plans in the scheme/other schemes. Switch from Regular Plan with broker code to Direct Plan shall be subject to applicable exit load, if any. However, no exit load shall be charged for any switch from Regular Plan to Direct Plan where the transaction received without broker code in the Regular Plan. Further, no exit load shall be levied in case of switches from Direct Plan to Regular Plan. Inter Scheme switches between schemes shall be subject to exit load as applicable for the respective scheme. Switchover between this scheme and other schemes of the Mutual Fund would be at NAV related prices. Switchovers would be at par with redemption from the outgoing option/Plan/scheme and would attract the applicable tax provisions and load at the time of switchover.

**Note 11 - Declaration and signatures:**

All signatures should be in English or any Indian language. Thumb impressions should be from the left hand for males and the right hand for females and in all cases to be attested by an authorised official of State Bank Group (SBG), Magistrate, Notary Public under his/her official seal.

**Note 12 -TERMS AND CONDITIONS FOR SYSTEMATIC INVESTMENT PLAN (SIP)**

- (a) Under the SIP an investor can invest a fixed amount every day for minimum 12 installments (subject to a minimum of Rs. 500 per installment and in multiples of Re 1 thereafter)
- (b) every week for minimum six weeks (subject to a minimum of Rs. 1000 per week and in multiples of Re. 1) or every week for minimum twelve weeks (subject to a minimum of Rs. 500 per week and in multiples of Re. 1)
- (c) every month for minimum six months (subject to a minimum of Rs. 1000 per month and in multiples of Re. 1)
- (d) every month for one year (subject to a minimum of Rs. 500 per month and in multiples of Re. 1)
- (e) every quarter for one year (subject to a minimum of Rs. 1500 per quarter and in multiples of Re.1) at applicable NAV-related prices. This facility will help the investor to average out their cost of investment over a period of time and thus overcome the short-term fluctuations in the market.
- (f) Semi-annual - Minimum amount of investment will be Rs. 3,000 and in multiples of Re.1 thereafter. Minimum number of installments will be 4.
- (g) Annual - Minimum amount of investment will be Rs. 5,000 and in multiples of Re.1 thereafter. Minimum number of installments will be 4.

Entry into SIP can be on any date A minimum 20 days gap needs to be maintained between SIP application submission date and first instalment date. The application may be mailed to the Registrars directly or submitted at any of the Investor Service Centers. The number of Magnums/Units allotted to the investor will be equal to the amount invested during the month divided

by the NAV for that day. For SIP applications submitted during NFO period, the first SIP instalment will be triggered only once the scheme is reopened for transactions.

### For Weekly SIP

- a) Weekly SIP will be done on 1st, 8th, 15th & 22nd of the month
- b) New investors need not have an existing folio for investments into respective Schemes. Such investors can start a folio with a SIP.

The provision for 'Minimum Application Amount specified in' the respective scheme offer document will not be applicable for SIP investments. For e.g. the minimum application amount for new investors in SBI Contra Fund is Rs. 5000. However, in case of SIP investments, an investor can enter the Scheme with minimum amount of Rs. 1000 per month (6 months)/Rs. 500 per month (12 months)/Rs. 1500 per quarter (12 months)

- c) SIP offers investors the following frequencies:
  - i) Daily Systematic Investment Plan (DSIP)
  - ii) Weekly Systematic Investment Plan (WSIP)
  - iii) Monthly Systematic Investment Plan (MSIP)
  - iv) Quarterly Systematic Investment Plan (QSIP)

Semi-annual and Annual Systematic Investment Plan - Minimum amount of investment will be Rs. 3,000 and in multiples of Re.1 thereafter for Semi-Annual SIP & Rs. 5,000 and in multiples of Re.1 thereafter in case of Annual SIP. Minimum number of installments will be 4.

- d) Unit holders must write the Folio number / Application number, if any, on the reverse of the cheques accompanying the Forms.
- e) Returned cheque(s) may not to be presented again for collection. In case the returned cheques are presented again, the necessary charges are liable to be debited to the investor.
- f) An intimation of the allotment will be sent to the investor. The facility may be terminated by the investor after giving at least three weeks' written notice to the Registrar.
- g) For investment through NACH/Direct Debit, please complete the registration cum mandate form along with the application form
- h) Any Day SIP' Facility under SIP section:

Under 'Any Day SIP facility', investor can register SIP for any day for the frequencies i.e. Monthly, Quarterly, Semi-Annual and Annual through electronic mode like OTM / Debit Mandate. Accordingly, under 'Any Day SIP facility', investors can select any date from 1st to 30th of a month as SIP date (for February, the last business day would be considered if SIP date selected is 29th & 30th of a month). Default SIP date will be 10th. In case the SIP due date is a Non Business Day, then the immediate following Business Day will be considered for SIP processing.

Fixed-end period SIP & Top-up SIP facilities in all open ended schemes of SBI Mutual Fund offering Systematic Investment Plan (SIP) facility:

- Fixed-end Period SIP

Investors can opt for a SIP for a period of 3 years, 5 years, 10 years, and 15 years in addition to the existing end date & perpetual SIP options.

Terms and conditions of Fixed-end period for SIP are as follows:

1. If the investor does not specify the end date of SIP, the default period for the SIP will be considered as perpetual.
2. If the investor does not specify the date of SIP, the default date will be considered as 10th of every month.
3. If the investor does not specify the frequency of SIP, the default frequency will be considered as Monthly.
4. If the investor does not specify the plan option, the default option would be considered as Growth option for debt schemes.
5. If investor specifies the end date and also the fixed end period, the end date would be considered.

- **Top-up SIP**

Top-up SIP is a facility whereby an investor has an option to increase the amount of the SIP installment by a fixed amount at pre-defined intervals. This will enhance the flexibility of the investor to invest higher amounts during the tenure of the SIP.

Terms and conditions of Top-up SIP are as follows:

1. The Top-up option must be specified by the investors while enrolling for the SIP facility.
2. The minimum SIP Top-up amount is Rs. 500 and in multiples of Rs. 500.
3. The Top-up details cannot be modified once enrolled. In order to make any changes, the investor must cancel the existing SIP and enroll for a fresh SIP with Top-up option.
4. In case of Monthly SIP, Half-yearly as well as Yearly frequency are available under SIP Top-up. If the investor does not specify the frequency, the default frequency for Top-up will be considered as Half-yearly.
5. In case of Quarterly SIP, only the Yearly frequency is available under SIP Top-up.
6. Top up facility will not be applicable for Daily and Weekly SIP.
7. All other terms & conditions applicable for regular SIP will also be applicable to Top-up SIP.
8. SIP Top-up facility shall be available for SIP Investments through Direct debit facility only.

- **Top-up SIP Cap**

Under this option, the investor can define the maximum SIP Top-up Cap, beyond which the SIP instalment will not increase in future. The investor shall have the flexibility to choose either Top-Up SIP Cap amount or Top-Up SIP Cap month-year. In case of multiple selection, Top-Up SIP Cap amount will be considered as default selection. The terms and conditions of Top-up SIP Cap shall be as follows:

- **Top-up SIP CAP Amount:** Investor has an option to fix the SIP Top-up amount once it reaches a maximum predefined amount. The pre-defined amount should be equal to or lesser than the maximum amount mentioned by the investor in One Time Debit Mandate Form (OTM). The instalment amount after Top-up shall not exceed the amount mentioned in OTM at any given time.
- If SIP amount reaches the Top-up Cap before the end of SIP tenure, the SIP Top up will cease and last SIP instalment amount will remain constant for remaining SIP Tenure.
- **Top-up SIP CAP Month-Year:** It is the month from which SIP Top-up amount will cease and last SIP instalment including Top-Up amount will remain constant till the end of SIP tenure.
- If none of the above option is selected by the investor, the SIP Top-up will continue as per the SIP end date subject to the maximum amount mentioned in OTM Form

The AMC/Trustee reserves the right to terminate or modify the conditions of Top-up SIP Cap at its discretion.

- **SIP Pause:**

Under SIP pause facility, the investor shall have option to discontinue their SIP temporarily for specific number of instalments. The terms and conditions of SIP Pause facility shall be as follows:

1. Investors can pause their SIP at any time by filling SIP pause form and submitting the same at any branch of SBIMF/ CAMS. Pause request should be received 15 days prior to the subsequent SIP date.
2. SIP Pause facility is available for SIP registration with Weekly, Monthly, Quarterly, Semi-Annual, and Annual frequency.
3. SIP shall restart immediately after the completion of Pause period.
4. SIP Pause facility will allow investors to 'Pause' their existing SIP during the tenure of SIP across all frequencies for a period upto one year. The actual number of instalments that will get paused will be as per the SIP frequency.
5. Investors can avail this facility multiple times during the tenure of the existing SIP.
6. SIP Pause facility will not be available for the SIPs sourced/registered through MFU, Exchange & Channel platforms as the mandate is registered by them.
7. If the SIP Pause period is coinciding with the Top-Up facility, the SIP instalment amount post completion of pause period would be inclusive of SIP Top-up amount. For e.g. SIP instalment amount prior to Pause period is Rs. 2,000/- and Top-up amount is Rs. 1,000/-. If the pause period is completed after date of Top-up, then the SIP instalment amount post completion of pause period shall be Rs.3,000/-.

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8. In case of multiple SIPs registered in a scheme, SIP Pause facility will be made applicable only for those SIP instalments whose SIP date, frequency, amount and Scheme/Plan is specified in the form. Further for different or multiple SIP mandate in the same scheme, separate SIP Pause Forms are required to be submitted for each SIP mandate.
9. The AMC reserves the right to terminate this facility or modify the conditions of the SIP Pause facility at its discretion.
10. In case of discrepancies in the information provided in the SIP Pause Form and the details registered with the AMC, the details registered with the AMC shall be considered for processing or in case of ambiguity in the SIP Pause Form, the AMC reserves the right to reject the SIP Pause Form.
11. Investor cannot cancel the SIP Pause once registered.

### Note 13 - TERMS AND CONDITIONS FOR SYSTEMATIC INVESTMENT PLAN (SIP) THROUGH NACH /DIRECT DEBIT

NACH (National Automated Clearing House) is a funds clearing platform set up by NPCI (National Payments Corporation of India) similar to ECS of RBI.

LIST OF DIRECT DEBIT BANKS (All core branches): SBIMF has arrangement for direct debit facility for SIP with certain banks.

The AMC may alter the list of banks participating in direct debit arrangement from time to time / withdraw direct debit facility from banks, based on its experience of dealing with any such bank or add/withdraw the name of the bank with whom direct debit facility arrangement can be introduced/ discontinued as the case may be.

- i. Completed application form, SIP registration form and the first cheque should be submitted atleast 20 days before the first installment date.
- ii. Completed Application Form for Cancellation/Change of Bank Mandate for SIP debit can be submitted on any date of the month and the same would be processed subject to the condition that there would be a minimum of 30 days period between the submission of the application and the SIP date.
- iii. Investors should mandatorily give a cheque for the first transaction drawn on the same bank account.
- iv. For Daily, Monthly, Quarterly, Semi Annual and Annual SIP: SIP facility is available only on any day of the month, or the subsequent day in case that happens to be a non – business day. For Weekly SIP - Weekly SIP will be done on 1st, 8th, 15th & 22nd of the month.
- v. The investor agrees to abide by the terms and conditions of Reserve Bank of India (RBI).
- vi. Investor will not hold SBI Funds Management Ltd, its registrars and other service providers responsible if the transaction is delayed or not effected or the investor bank account is debited in advance or after the specific SIP date due to interruptions/ delays at bank's end.
- vii. SBI Funds Management Ltd., its registrars and other service providers shall not be responsible and liable for any damages/ compensation for any loss, damage etc. incurred by the investor. The investor assumes the entire risk of using this facility and takes full responsibility.
- viii. SBI Funds Management Ltd. reserves the right to reject any application without assigning any reason thereof.
- ix. Investor can cancel SIP by submitting cancellation form 10 days in advance from the next SIP due date.

### Note 14 - TERMS AND CONDITIONS FOR MITRA SIP

1. MITRA SIP facility is available under select schemes of SBI Mutual Fund (mentioned below) for a fixed SIP tenure of either 8 years, 10 years, 12 years, 15 years, 20 years, 25 years or 30 years.
2. This facility is allowed under 'Monthly' frequency for Growth option of the eligible SIP / SWP schemes.
3. **Schemes eligible for SIP, Switch-in and SWP:** The target scheme can either be the source scheme (i.e. SIP scheme) or any one of the pre-defined schemes mentioned below.

| Name of Schemes (for SIP)  | Name of Schemes (for Switch and SWP) |
|----------------------------|--------------------------------------|
| SBI Magnum Equity ESG Fund | SBI Conservative Hybrid Fund         |
| SBI Large & Midcap Fund    | SBI Multi Asset Allocation Fund      |
| SBI Magnum Global Fund     | SBI BlueChip Fund                    |

| Name of Schemes (for SIP)                    | Name of Schemes (for Switch and SWP) |
|----------------------------------------------|--------------------------------------|
| SBI Equity Hybrid Fund                       | SBI Arbitrage Opportunities Fund     |
| SBI Consumption Opportunities Fund           | SBI Short Term Debt Fund             |
| SBI Technology Opportunities Fund            | SBI Banking & PSU Fund               |
| SBI Healthcare Opportunities Fund            | SBI Equity Savings Fund              |
| SBI Contra Fund                              | SBI Balanced Advantage Fund          |
| SBI Nifty Index Fund                         | SBI Equity Hybrid Fund               |
| SBI Focused Equity Fund                      |                                      |
| SBI Conservative Hybrid Fund                 |                                      |
| SBI Magnum MidCap Fund                       |                                      |
| SBI Magnum COMMA Fund                        |                                      |
| SBI Flexicap Fund                            |                                      |
| SBI Multi Asset Allocation Fund              |                                      |
| SBI BlueChip Fund                            |                                      |
| SBI Infrastructure Fund                      |                                      |
| SBI PSU Fund                                 |                                      |
| SBI Small Cap Fund                           |                                      |
| SBI Banking & Financial Services Fund        |                                      |
| SBI Equity Minimum Variance Fund             |                                      |
| SBI International Access-US Equity FoF       |                                      |
| SBI Nifty Next 50 Index Fund                 |                                      |
| SBI Balanced Advantage Fund                  |                                      |
| SBI Multicap Fund                            |                                      |
| SBI Nifty Midcap 150 Index Fund              |                                      |
| SBI Nifty Smallcap 250 Index Fund            |                                      |
| SBI Dividend Yield Fund                      |                                      |
| SBI S&P BSE Sensex Index Fund                |                                      |
| SBI Nifty50 Equal Weight Index Fund          |                                      |
| SBI Energy Opportunities Fund                |                                      |
| SBI Automotive Opportunities Fund            |                                      |
| SBI Innovative Opportunities Fund            |                                      |
| SBI Nifty 500 Index Fund                     |                                      |
| SBI Nifty India Consumption Index Fund       |                                      |
| SBI Nifty Bank Index Fund                    |                                      |
| SBI BSE PSU Bank Index Fund                  |                                      |
| SBI Income Plus Arbitrage Active FOF         |                                      |
| SBI Nifty200 Momentum 30 Index Fund          |                                      |
| SBI Nifty 100 Low Volatility 30 Index Fund   |                                      |
| SBI Nifty200 Quality 30 Index Fund           |                                      |
| SBI Dynamic Asset Allocation Fund Active FOF |                                      |

4. Minimum installment amount under this facility for SIP / SWP would be the same as prescribed under Monthly frequencies in the respective schemes. All other terms and conditions pertaining to SIP and SWP shall be applicable for MITRA SIP / SWP.

## Key Information Memorandum

5. On completion of the SIP period, the entire accumulated clear unit balance shall be switched on T+15 calendar days to a pre-defined target scheme (T is the last SIP transaction date of the facility) or continue to remain in the same scheme as per option selected by the investor. In case the source and target scheme is different, then switch out from the source scheme would be subject to applicable exit load and taxes if any.
6. SWP shall commence from the target scheme from the next month onwards on the same SIP instalment date. The SWP transaction shall be subject to applicable exit load and taxes if any.
7. Investor can opt for SWP instalment amount as per the matrix below or specific amount to be mentioned, provided that the amount mentioned by the investor is less than or equal to amount mentioned as per the matrix and shall be subject to minimum SWP amount of the respective schemes.

| SIP Tenure | Monthly SWP Instalment       |
|------------|------------------------------|
| 8 years    | 1 x monthly SIP instalment   |
| 10 years   | 1.5 x monthly SIP instalment |
| 12 years   | 2 x monthly SIP instalment   |
| 15 years   | 3 x monthly SIP instalment   |
| 20 years   | 5 x monthly SIP instalment   |
| 25 years   | 8 x monthly SIP instalment   |
| 30 Years   | 12 x monthly SIP instalment  |

For example, for a 10 years SIP with instalment amount of Rs 10,000, SWP amount must be less than or equal to Rs 15,000 (i.e 1.5 times of monthly SIP instalment). If SWP amount mentioned on application form is greater than the applicable slab, then it shall lead to rejection of the application. In case investor does not fill in any SWP amount, the default amount shall be as per the applicable slab given above.

8. In case no SIP tenure is selected, the default tenure shall be 12 years. In case no SIP date is selected, the default date shall be 10.
9. In case, no scheme is mentioned in the target scheme section in Switch-In/SWP, the SWP shall be triggered from existing source SIP scheme itself.
10. SWP Date will be same as the SIP date. The Start date of SWP will be the month following the last SIP instalment date and the SWP End Date will be perpetual i.e. the SWP under this facility shall be processed till units are available in the respective target scheme. In case, the SWP trigger date is a non- business day, the next business day shall be considered as trigger date.
11. This facility shall get discontinued in the following events:
  - i) On cancellation of SIP before the end of tenure, the switch trigger and SWP will cease.
  - ii) In case, redemption / switch-out processed in Source Scheme during the SIP tenure, the Switch trigger and SWP will cease, however SIP shall continue under the source scheme as normal SIP.
  - iii) In case redemption / switch-out is processed in Source Scheme after the SIP tenure till the execution of switch trigger, the switch trigger and the SWP will cease.
12. SIP Top-Up and SIP Pause is allowed under this facility. However, SWP would get registered based on the initial SIP instalment amount / slab mentioned in the application form.
13. Under a single folio, an investor can have multiple registrations under this facility. However, if investor wishes to invest in multiple schemes, investor shall have to submit separate MITRA SIP registration forms.
14. This facility will not be available under DEMAT mode and for Minor investors.

### Note 15 - APPLICATION VIA ELECTRONIC MODE

SBIFML/SBIMF/Registrar to the scheme(s) (hereinafter referred to as 'Recipient') may accept certain transactions through one or more electronic mode such as facsimile, web or through any other electronic manner (hereinafter referred to as 'electronic transaction') from time to time, subject to the investor fulfilling terms and conditions stipulated as under:

- i. Acceptance of electronic transactions by the recipient will be as permitted by SEBI or other regulatory authorities or the rules & regulations governing the same;

- ii. Transmitter accepts that the electronic transactions shall not be processed until time- stamped as a valid transaction in the scheme in line with SEBI regulations;
- iii. Acceptance of electronic transactions will be solely at the risk of the transmitter of such transactions and the recipient shall not in any way be liable or responsible for any loss, damage, costs caused to the transmitter directly or indirectly, as a result of the transmitter sending or purporting to send such transactions;
- iv. Recipient will also not be liable in case where the transaction sent or purported to be sent is not processed on account of the fact that it was not received by the recipient;
- v. Recipient, instead of accepting electronic transactions, may require the transmitter to apply through any other permitted manner and is under no obligation to act on any electronic transaction received, which is sent or purported to be sent by the transmitter;
- vi. Transmitter acknowledges that electronic transactions is not a secure means of giving instructions/ requests and that the transmitter is aware of the risks involved arising out of such transmission, including but not limited to, such transmission being inaccurate, incomplete, lacks clarity or quality, altered, misrepresented, unlawful, or is not received on time as prescribed, etc.;
- vii. Recipient on receiving any electronic transaction may in good faith agree to process the same on the presumption that it is transmitted in lawful manner. Recipient shall not be liable or responsible if any complaint is received thereafter in respect of such transmission;
- viii. Transmitter agrees that security procedures adopted by the recipient may include signature verification, telephone call backs which may be recorded by tape recording device and the transmitter consents to such recording and agrees to co-operate with the recipient to enable confirmation of such electronic transaction;
- ix. Transmitter agrees to indemnify and keep indemnified the AMC, Directors, employees, agents, representatives of the AMC, SBI Mutual Fund and Trustees from and against all actions, claims, demands, liabilities, obligations, losses, damages, costs and expenses of whatever nature (whether actual or contingent) directly or indirectly suffered or incurred, sustained by or threatened against the indemnified parties whatsoever arising from or in connection with or any way relating to the indemnified parties in good faith accepting and acting on electronic transaction or relying upon such electronic transaction, which is sent or purported to be sent by the transmitter.

The SBIFML reserves the right to discontinue the facility at any point of time.

#### **Note 16 - SBI MULTI SELECT**

The open-ended schemes of SBI Mutual Fund, offers a facility namely SBI MULTI SELECT through which an investor can invest in multiple schemes of SBI Mutual Fund with a single cheque. Minimum subscription amount in a scheme would be as per the SID of the respective scheme. However, minimum total investment in the facility shall be INR 1 lakh in case of lumpsum purchase and minimum investment amount in a respective scheme in case of SIP.

Investors are requested to visit "<http://www.sbimf.com>" [www.sbimf.com](http://www.sbimf.com) for detailed terms & conditions of the facility.

**Note 17** - As per the Notification issued by Department of Revenue, Ministry of Finance, Government of India, a stamp duty of 0.005% would be levied on applicable mutual fund transactions, with effect from July 1, 2020. Accordingly, pursuant to levy of stamp duty, the number of units allotted on applicable transactions (Purchase, Switch-in, Reinvestment of Income Distribution cum Capital withdrawal Plan (IDCW Reinvestment) & Systematic transactions viz. SIP/STP-in etc.) to the unit holders would be reduced to that extent.

#### **Note 18 - DEMAT ACCOUNT**

Investors who wish to hold Mutual Fund units in Demat mode must ensure that the sequence of names as mentioned in the application form matches with that of the account held with the Depository Participant. The application form should mandatorily accompany the latest Client Master / Demat Account Statement. If the details mentioned in the application are incomplete/ incorrect or not matches with the Depository data, in such cases units shall be allotted in physical mode. Wherever units are allotted in Demat Mode, Statement of Account will be issued by the Depository concerned. Further allotment of units (through additional purchase / SIP) in the same scheme/plan in same folio will be allotted in Demat mode and investor can do further transactions through near Depository Participant only.

### **Note 19 - SMS (Short Messaging Service) Transactions facility “(m-Easy)”**

The SMS Transactions facility “(m-Easy)” enables Unitholders to subscribe and/or redeem Units of the Scheme by sending instructions through SMS from their registered mobile phone number on the dedicated number 9210192101. This facility is available for purchase and redemption for amounts less than Rs 1 crore. To avail this facility investor needs to provide a duly signed m-Easy mobile no. and bank mandate registration form. For purchase send SMS “INV <AMOUNT> <SCHEME CODE>”, for redemption send SMS “RED <AMOUNT/ALL> <SCHEME CODE>”, for switch send SMS SWT <AMOUNT / ALL> <FROM SCHEME CODE> <TO SCHEME CODE> and for any help send SMS “HELP”.

For detail term & conditions, please refer SAI/ registration mandate/ website ([www.sbimf.com](http://www.sbimf.com))

### **Note 20 - COMPLIANCE REQUIREMENTS UNDER FOREIGN LAWS / REGULATIONS, INCLUDING FOREIGN ACCOUNT TAX COMPLIANCE ACT (“FATCA”):**

As a part of various ongoing tax and regulatory developments around the globe (e.g. As a part of various ongoing tax and regulatory developments around the globe (e.g. information exchange laws such as FATCA, CRS), financial institutions like SBIFML are being cast with additional investor and counterparty account related due diligence requirements.

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 Banks, Mutual Funds, etc. to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our investors and counterparties. In relevant cases, information will have to be reported to tax authorities/ appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

The onus to provide accurate, adequate and timely inputs in this regard would be that of the investor or counterparty. In this regard, any change in the status or information or certification previously provided should also be intimated to SBIFML / Authorised Registrar / KRA, as applicable forthwith but not later than thirty days from the date of knowledge of such change in status / information. Please note that we will be unable to provide advice to you about any tax status or FATCA/CRS classification relevant to your account. It is your responsibility to ensure that you record your correct tax status / FATCA/ CRS classification. You may seek advice from your tax advisor in this regard.

Please note that you may receive more than one request for information if you have multiple relationships with SBI 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.

For detail term & conditions, please refer SAI/ registration mandate/ website ([www.sbimf.com](http://www.sbimf.com))

### **Note 21 - APPOINTMENT OF MF UTILITIES INDIA PRIVATE LIMITED**

SBI Funds Management Limited (“the AMC”) has entered into an Agreement with MF Utilities India Private Limited (“MFUI”), a “Category II – Registrar to an Issue” under SEBI (Registrars to an Issue and Share Transfer Agents) Regulations, 1993, for usage of MF Utility (“MFU”) - a shared services initiative of various Asset Management Companies, which acts as a transaction aggregation portal for transacting in multiple Schemes of various Mutual Funds with a single form and a single payment instrument.

Accordingly, all financial and non-financial transactions pertaining to Schemes of SBI Mutual Fund can be done through MFU either electronically on [www.mfuonline.com](http://www.mfuonline.com) as and when such a facility is made available by MFUI or physically through the authorized Points of Service (“POS”) of MFUI with effect from the respective dates as published on MFUI website against the POS locations. The list of POS of MFUI is published on the website of MFUI at [www.mfuindia.com](http://www.mfuindia.com) as may be updated from time to time. The Online Transaction Portal of MFU i.e. [www.mfuonline.com](http://www.mfuonline.com) and the POS locations of MFUI will be in addition to the existing Official Points of Acceptance (“OPA”) of the AMC.

Applicability of NAV shall be based on time stamping of application and realization of funds in the bank account of SBI Mutual Fund within the applicable cut-off timing. The uniform cut-off time as prescribed by SEBI and as mentioned in the SID / KIM of respective schemes shall be applicable for applications received by MFU (physical / online). However, investors should note that transactions on the MFUI portal shall be subject to the eligibility of the investors, any terms & conditions as stipulated by MFUI / Mutual Fund / the AMC from time to time and any law for the time being in force.

Investors are requested to note that, MFUI will allot a Common Account Number (“CAN”), a single reference number for all investments in the Mutual Fund industry, for transacting in multiple Schemes of various Mutual Funds through MFU and to map existing folios, if any. Investors can create a CAN by submitting the CAN Registration Form (CRF) and necessary documents at the MFUI POS. The AMC and / or its Registrar and Transfer Agent (RTA) shall provide necessary details to MFUI as may be needed for providing the required services to investors / distributors through MFU. Investors are requested to visit the website of

MFUI ([www.mfuindia.com](http://www.mfuindia.com)) to download the relevant forms.

## **Note 22 - APPOINTMENT OF MFCENTRAL AS OFFICIAL POINT OF ACCEPTANCE**

Pursuant to paragraph 16.6 of the SEBI Master Circular for Mutual Funds dated June 27, 2024, to comply with the requirements of RTA inter-operable Platform for enhancing investors' experience in Mutual Fund transactions / service requests, the Qualified RTA's (QRTA's), KFin Technologies Private Limited (KFintech) and Computer Age Management Services Limited (CAMS) have jointly developed MFCentral – A digital platform for Mutual Fund investors.

MFCentral is created with an intent to be a one stop portal / mobile app for all Mutual fund investments and service-related needs of investors that significantly reduces the need for submission of physical documents by enabling various digital / phygital (involving both physical and digital processing) services to Mutual fund investors across fund houses subject to applicable Terms & Conditions of the Platform. MFCentral will be enabling various features and services in a phased manner. MFCentral may be accessed using <https://mfcentral.com/> and a Mobile App in future.

With a view to comply with all provisions of the aforesaid circular and to increase digital penetration of Mutual funds, SBI Mutual Fund designates MFCentral as its Official Point of Acceptance (DISC – Designated Investor Service Centre).

Any registered user of MFCentral, requiring submission of physical document as per the requirements of MFCentral, may do so at any of the DISC or collection centres of KFintech or CAMS.

## **Note 23 - FACILITATING TRANSACTIONS THROUGH STOCK EXCHANGE MECHANISM**

In terms of paragraph 16.2.2 of SEBI Master Circular for Mutual Funds dated June 27, 2024, units of the Scheme can be transacted through all the registered stock brokers and distributor of the National Stock Exchange of India Limited and / or BSE Limited who are also registered with AMFI and are empanelled as distributors with SBI Mutual Fund. Accordingly such stock brokers shall be eligible to be considered as 'official points of acceptance' of SBI Mutual Fund.

Further in line with paragraph 16.2.12 of SEBI Master Circular for Mutual Funds dated June 27, 2024, it has been decided to allow investors to directly access infrastructure of the recognised stock exchanges to purchase mutual fund units directly from Mutual Fund/ Asset Management Companies. SEBI circular has advised recognised stock exchanges, clearing corporations and depositories to make necessary amendment to their existing byelaws, rules and/or regulations, wherever required

Note - Investors are requested to refer Scheme Information Document for details of facilities like STP, SWP, M-Easy etc.

## **Note 24 - LEGAL ENTITY IDENTIFIER (LEI) FOR NON-INDIVIDUALS**

As per RBI circular, w.e.f. 1st April 2021, LEI is mandatory for RTGS / NEFT transactions of Rs. 50 Crores and above undertaken by entities (non-individuals). Accordingly, it is mandatory to include remitter and beneficiary LEI information while initiating RTGS and NEFT transaction of Rs. 50 Crore and above.

While transferring funds (Rs. 50 crore and above) by non-individual investors through RTGS / NEFT to SBIMF bank accounts, investors should mention LEI of SBI MF as mentioned below.

| Name            | LEI                  | Validity    |
|-----------------|----------------------|-------------|
| SBI Mutual Fund | 335800ABZMKJ462QSS41 | 21 Jan 2026 |

Application No. \_\_\_\_\_

| APPLICATION FORM FOR SBI DYNAMIC ASSETS ALLOCATION FUND ACTIVE FOF (Please fill in BLOCK Letters) |                                              |                     |                 |                                                                 |               |
|---------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------|-----------------|-----------------------------------------------------------------|---------------|
| ARN & Name of Distributor                                                                         | Branch Code<br><small>(only for SBG)</small> | Sub-Broker ARN Code | Sub-Broker Code | EUIN*<br><small>(Employee Unique Identification Number)</small> | Reference No. |
|                                                                                                   |                                              |                     |                 |                                                                 |               |

**Declaration for "Execution-only" transaction (where the above EUIN box is left blank & no investment advice is solicited) / Registered Investment Advisor (RIA) Transaction:**  
 \* I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.  
 \*\* By mentioning RIA code, I / we authorize you to share with the SEBI Registered Investment Advisor (RIA), the details of my / our transactions in the scheme(s) of SBI Mutual Fund.

|                      |                                                            |                                                   |                                                   |
|----------------------|------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------|
| <b>SIGNATURE (S)</b> | <b>1<sup>st</sup> Holder/Authorised Signatory/Guardian</b> | <b>2<sup>nd</sup> Holder/Authorised Signatory</b> | <b>3<sup>rd</sup> Holder/Authorised Signatory</b> |
|                      |                                                            |                                                   |                                                   |

| SECTION I - INDIVIDUAL INVESTOR / SOLE PROPRIETOR                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                    |                                                                                                                                                                                          |  |
|----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Investor Details                                                                                         | 1 <sup>st</sup> Applicant/Minor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2 <sup>nd</sup> Applicant                                                                                                          | 3 <sup>rd</sup> Applicant                                                                                                                                                                |  |
| <b>Investor Name</b><br><small>(As per Income Tax)</small>                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                    |                                                                                                                                                                                          |  |
| <b>PAN Number</b>                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                    |                                                                                                                                                                                          |  |
| <b>Date of Birth</b><br><small>(As per Income Tax)</small>                                               | DD/MM/YYYY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | DD/MM/YYYY                                                                                                                         | DD/MM/YYYY                                                                                                                                                                               |  |
| <b>Guardian Details</b><br><small>(In case of Minor)<br/>(Please fill details as per Income Tax)</small> | Guardian Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Relationship with Minor<br><input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Legal Guardian | Relationship Proof attached<br><input type="checkbox"/> Birth Certificate <input type="checkbox"/> Passport<br><input type="checkbox"/> Aadhar Card <input type="checkbox"/> Court Order |  |
|                                                                                                          | Guardian PAN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Guardian Date of Birth   DD/MM/YYYY                                                                                                |                                                                                                                                                                                          |  |
| <b>Mode of Holding</b>                                                                                   | <input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Anyone or Survivor(s) <i>(Joint applicants not allowed in case of Minor investment)</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                    |                                                                                                                                                                                          |  |
| <b>CKYC Number (KIN)</b>                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                    |                                                                                                                                                                                          |  |
| <b>Tax Status</b>                                                                                        | <input type="checkbox"/> Resident Individual <input type="checkbox"/> Resident Minor <input type="checkbox"/> Resident Individual <input type="checkbox"/> PIO <input type="checkbox"/> Resident Individual <input type="checkbox"/> PIO<br><input type="checkbox"/> NRI (Repatriable) <input type="checkbox"/> NRI (Non Repatriable) <input type="checkbox"/> NRI (Repatriable) <input type="checkbox"/> NRI (Non Repatriable) <input type="checkbox"/> NRI (Repatriable) <input type="checkbox"/> NRI (Non Repatriable)<br><input type="checkbox"/> NRI - Minor (Repatriable) <input type="checkbox"/> NRI - Minor (Non Repatriable) <input type="checkbox"/> NRI - Minor (Repatriable) <input type="checkbox"/> NRI - Minor (Non Repatriable)<br><input type="checkbox"/> PIO <input type="checkbox"/> Sole Proprietor <i>(Please attach GST Certificate)</i> |                                                                                                                                    |                                                                                                                                                                                          |  |
| <b>Power of Attorney (POA) Details - If applicable</b>                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                    |                                                                                                                                                                                          |  |
| <b>POA Holder Name</b>                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                    |                                                                                                                                                                                          |  |
| <b>PAN of POA Holder</b>                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                    |                                                                                                                                                                                          |  |
| <b>POA copy attached</b>                                                                                 | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>                                                                                                           | <input type="checkbox"/>                                                                                                                                                                 |  |

| SECTION II NON - INDIVIDUAL INVESTOR                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                    |            |                                                   |
|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|------------|---------------------------------------------------|
| <b>Investor Name</b><br><small>(As per Income Tax)</small>                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                    |            |                                                   |
| <b>PAN Number</b>                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Date of Incorporation</b><br><small>(As per Income Tax)</small> | DD/MM/YYYY | CKYC Number (KIN)                                 |
| <b>Contact Person Name</b>                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                    |            |                                                   |
| <b>Legal Entity Identifier</b><br><small>(LEI Copy to enclosed)</small>                                           | LEI No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Validity                                                           | DD/MM/YYYY |                                                   |
|                                                                                                                   | <b>Note: LEI code mandatory if investment value is equal to or exceeds 50 crore limit.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                    |            |                                                   |
| <b>Tax Status of Entity</b>                                                                                       | <input type="checkbox"/> Partnership Firm <input type="checkbox"/> Private Limited Company <input type="checkbox"/> AOP <input type="checkbox"/> NPO* <input type="checkbox"/> Bank & Institutions<br><input type="checkbox"/> HUF <input type="checkbox"/> Public Limited Company <input type="checkbox"/> BOI <input type="checkbox"/> NGO* <input type="checkbox"/> Gratuity Fund<br><input type="checkbox"/> LLP <input type="checkbox"/> Government Body <input type="checkbox"/> FOF <input type="checkbox"/> Trust* <input type="checkbox"/> Body Corporate<br><input type="checkbox"/> FII/FPI <input type="checkbox"/> Pension & Retirement Fund <input type="checkbox"/> Society* <input type="checkbox"/> NPS Trust* <input type="checkbox"/> Others _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                    |            |                                                   |
| <b>*NPO Declaration: (Mandatory for Trust &amp; Society)</b><br><small>(Please attach Darpan Certificate)</small> | <b>*I/We are Non-profit organisation (NPO)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No. <b>If yes, please quote registration number of Darpan Portal</b> _____<br><small>We are falling under "Non-Profit organisation (NPO) which has been constituted for religious or charitable purpose referred to in clause (15) of section 2 of Income-Tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State Legislation or Company Registered under the section 8 of the Companies Act, 2013 (18 of 2013).</small><br><small>If not registered, please register immediately and confirm with the above information to avoid non processing of applications. Failure to get above confirmation or registration with the portal as mandated, wherever applicable will force MF/AMC to register your entity name in the above portal and may report to the relevant authorities as applicable. We are aware that we may be liable for any fines or consequences as required under the respective statutory requirement and authorise you to deduct such fines/charges under intimation to us or collect such fines/charges in any other manner as might be applicable.</small> |                                                                    |            |                                                   |
| <b>Other Details</b>                                                                                              | <b>Is the entity involved/providing any of the following service(s) :</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                    |            |                                                   |
|                                                                                                                   | For foreign exchange/money changer services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                    |            | YES   NO                                          |
|                                                                                                                   | Money Lending/Pawning                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                    |            | <input type="checkbox"/> <input type="checkbox"/> |
|                                                                                                                   | Gaming/Gambling/Lottery services (eg Casinos/betting syndicates)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                    |            | <input type="checkbox"/> <input type="checkbox"/> |
| <b>Networth in Rs.</b><br><small>(Not older than 1 year)<br/>Mandatory</small>                                    | Rs. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                    |            | As on   DD/MM/YYYY                                |

**Note: Non-Individual Investors should mandatorily fill separate FATCA/CRS & UBO Form (Annexure - I) along with this form.**

### SECTION III - CONTACT & BANK DETAILS

|                                                    |                                                                                                                                                                                                          |                                             |                              |                                    |                                                           |                              |                                    |                                             |                              |
|----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|------------------------------|------------------------------------|-----------------------------------------------------------|------------------------------|------------------------------------|---------------------------------------------|------------------------------|
| Address for Communication                          | Correspondence Address<br>(Address as per KRA records)                                                                                                                                                   |                                             |                              |                                    | Overseas Address<br>(Mandatory for NRI/PIO/FII applicant) |                              |                                    |                                             |                              |
|                                                    |                                                                                                                                                                                                          |                                             |                              |                                    |                                                           |                              |                                    |                                             |                              |
|                                                    |                                                                                                                                                                                                          |                                             |                              |                                    |                                                           |                              |                                    |                                             |                              |
|                                                    | City/Town                                                                                                                                                                                                |                                             | Pin                          |                                    | City/Town                                                 |                              | Zip                                |                                             |                              |
|                                                    | State                                                                                                                                                                                                    |                                             | Country                      |                                    | State                                                     |                              | Country                            |                                             |                              |
|                                                    | Tel. (Res.)                                                                                                                                                                                              |                                             | Tel. (Off.)                  |                                    | Tel. (Res.)                                               |                              | Tel. (Off.)                        |                                             |                              |
| Bank Details<br>(Please attach Bank Account proof) | Bank Name                                                                                                                                                                                                |                                             |                              |                                    | Bank Account No.                                          |                              |                                    |                                             |                              |
|                                                    | Branch Name                                                                                                                                                                                              |                                             |                              |                                    | IFSC                                                      |                              | MICR (9 Digit)                     |                                             |                              |
|                                                    | Branch Address                                                                                                                                                                                           |                                             |                              |                                    | City                                                      |                              | Pin code                           |                                             |                              |
|                                                    | A/C Type <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> FCNR <input type="checkbox"/> Others _____ |                                             |                              |                                    |                                                           |                              |                                    |                                             |                              |
| Contact Details                                    | 1 <sup>st</sup> Applicant/Minor                                                                                                                                                                          |                                             |                              | 2 <sup>nd</sup> Applicant          |                                                           |                              | 3 <sup>rd</sup> Applicant          |                                             |                              |
| Mobile Number                                      | Country Code -                                                                                                                                                                                           |                                             |                              | Country Code -                     |                                                           |                              | Country Code -                     |                                             |                              |
| Given Mobile Number Pertains to                    | <input type="checkbox"/> Self                                                                                                                                                                            | <input type="checkbox"/> Dependent Children |                              | <input type="checkbox"/> Self      | <input type="checkbox"/> Dependent Children               |                              | <input type="checkbox"/> Self      | <input type="checkbox"/> Dependent Children |                              |
|                                                    | <input type="checkbox"/> Spouse                                                                                                                                                                          | <input type="checkbox"/> Dependent Parents  |                              | <input type="checkbox"/> Spouse    | <input type="checkbox"/> Dependent Parents                |                              | <input type="checkbox"/> Spouse    | <input type="checkbox"/> Dependent Parents  |                              |
|                                                    | <input type="checkbox"/> Guardian                                                                                                                                                                        | <input type="checkbox"/> Dependent Sibling  |                              | <input type="checkbox"/> Guardian  | <input type="checkbox"/> Dependent Sibling                |                              | <input type="checkbox"/> Guardian  | <input type="checkbox"/> Dependent Sibling  |                              |
|                                                    | <input type="checkbox"/> Custodian                                                                                                                                                                       | <input type="checkbox"/> POA                | <input type="checkbox"/> PMS | <input type="checkbox"/> Custodian | <input type="checkbox"/> POA                              | <input type="checkbox"/> PMS | <input type="checkbox"/> Custodian | <input type="checkbox"/> POA                | <input type="checkbox"/> PMS |
| Email ID                                           |                                                                                                                                                                                                          |                                             |                              |                                    |                                                           |                              |                                    |                                             |                              |
| Given Email ID Pertains to                         | <input type="checkbox"/> Self                                                                                                                                                                            | <input type="checkbox"/> Dependent Children |                              | <input type="checkbox"/> Self      | <input type="checkbox"/> Dependent Children               |                              | <input type="checkbox"/> Self      | <input type="checkbox"/> Dependent Children |                              |
|                                                    | <input type="checkbox"/> Spouse                                                                                                                                                                          | <input type="checkbox"/> Dependent Parents  |                              | <input type="checkbox"/> Spouse    | <input type="checkbox"/> Dependent Parents                |                              | <input type="checkbox"/> Spouse    | <input type="checkbox"/> Dependent Parents  |                              |
|                                                    | <input type="checkbox"/> Guardian                                                                                                                                                                        | <input type="checkbox"/> Dependent Sibling  |                              | <input type="checkbox"/> Guardian  | <input type="checkbox"/> Dependent Sibling                |                              | <input type="checkbox"/> Guardian  | <input type="checkbox"/> Dependent Sibling  |                              |
|                                                    | <input type="checkbox"/> Custodian                                                                                                                                                                       | <input type="checkbox"/> POA                | <input type="checkbox"/> PMS | <input type="checkbox"/> Custodian | <input type="checkbox"/> POA                              | <input type="checkbox"/> PMS | <input type="checkbox"/> Custodian | <input type="checkbox"/> POA                | <input type="checkbox"/> PMS |

## SECTION IV - INVESTMENT DETAILS

|                                                                                                  |                                                                                                                                                                                                                                |                                                                                                                                                                                                                           |
|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Investment Type</b>                                                                           | <input type="checkbox"/> Lumpsom Investment <input type="checkbox"/> Systematic Investment Plan (SIP)<br>(Please Attach SIP & OTM Form) <input type="checkbox"/> Lumpsom with SIP Investment<br>(Please Attach SIP & OTM Form) |                                                                                                                                                                                                                           |
| <b>Scheme Details</b>                                                                            |                                                                                                                                                                                                                                |                                                                                                                                                                                                                           |
| <b>Scheme Name</b>                                                                               | <b>SBI DYNAMIC ASSTS ALLOCATION FUND ACTIVE FOF</b>                                                                                                                                                                            |                                                                                                                                                                                                                           |
| <b>Plan</b>                                                                                      | <input type="checkbox"/> Regular                                                                                                                                                                                               | <input type="checkbox"/> Direct                                                                                                                                                                                           |
| <b>Option</b>                                                                                    | <input type="checkbox"/> Growth                                                                                                                                                                                                | <input type="checkbox"/> IDCW (Dividend)                                                                                                                                                                                  |
| <b>IDCW Facility</b>                                                                             | <input type="checkbox"/> Payout                                                                                                                                                                                                | <input type="checkbox"/> Reinvest                                                                                                                                                                                         |
|                                                                                                  | <input type="checkbox"/> Transfer <i>(In case you wish to transfer IDCW amount to other scheme)</i>                                                                                                                            |                                                                                                                                                                                                                           |
| <b>IDCW Transfer Details</b><br>(If selected IDCW transfer)                                      | To Scheme Name                                                                                                                                                                                                                 |                                                                                                                                                                                                                           |
|                                                                                                  | Plan                                                                                                                                                                                                                           | Option                                                                                                                                                                                                                    |
|                                                                                                  | IDCW Facility                                                                                                                                                                                                                  | IDCW Frequency                                                                                                                                                                                                            |
| <b>IDCW Frequency</b>                                                                            | <input type="checkbox"/> Daily<br><input type="checkbox"/> Fortnightly<br><input type="checkbox"/> Quarterly                                                                                                                   | <input type="checkbox"/> Weekly<br><input type="checkbox"/> Monthly<br><input type="checkbox"/> Annual                                                                                                                    |
| <b>Payment Details</b><br>(Cheque in favour of Scheme Name)                                      | Cheque No. / UTR No./ Reference No.                                                                                                                                                                                            |                                                                                                                                                                                                                           |
|                                                                                                  | Cheque Date                                                                                                                                                                                                                    |                                                                                                                                                                                                                           |
| <b>Amount in Rs.</b>                                                                             |                                                                                                                                                                                                                                |                                                                                                                                                                                                                           |
| <b>Amount in Words</b>                                                                           |                                                                                                                                                                                                                                |                                                                                                                                                                                                                           |
| <b>Drawn on</b>                                                                                  | Bank Name                                                                                                                                                                                                                      |                                                                                                                                                                                                                           |
|                                                                                                  | Branch Name                                                                                                                                                                                                                    |                                                                                                                                                                                                                           |
|                                                                                                  | Bank A/c No.                                                                                                                                                                                                                   |                                                                                                                                                                                                                           |
| <b>Payment Mode</b>                                                                              | <input type="checkbox"/> Cheque<br><input type="checkbox"/> Fund Transfer                                                                                                                                                      | <input type="checkbox"/> RTGS/NEFT<br><input type="checkbox"/> OTM                                                                                                                                                        |
| <b>DEMAT Details</b><br>(Please provide details ONLY if you wish to hold units in / under Demat) | Depository Participant Name<br><input type="checkbox"/> National Securities Depository Limited (NSDL)<br>DP ID & Beneficiary Account No.                                                                                       | Proof Attached <input type="checkbox"/> Latest Client Master <input type="checkbox"/> Demat Account Statement<br><input type="checkbox"/> Central Depository Securities (India) Limited (CDSL)<br>Beneficiary Account No. |

**Note:** The sequence of names as mentioned in the MF application form should be as per the sequence of names in Demat account.

| SECTION V - FATCA & CRS INFORMATION MANDATORY FOR INDIVIDUAL / SOLE PROPRIETOR                                                                                                                                                                                                                                                                                     |                                                          |                                                          |                                                          |                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------|
| Non-Individual Investors should Mandatorily fill separate FATCA/CRS & UBO Form (Annexure - I) along with this form.                                                                                                                                                                                                                                                |                                                          |                                                          |                                                          |                                                          |
| FATCA & CRS                                                                                                                                                                                                                                                                                                                                                        | 1 <sup>st</sup> Applicant                                | 2 <sup>nd</sup> Applicant                                | 3 <sup>rd</sup> Applicant                                | Guardian                                                 |
| Country of Birth                                                                                                                                                                                                                                                                                                                                                   |                                                          |                                                          |                                                          |                                                          |
| Place/City of Birth                                                                                                                                                                                                                                                                                                                                                |                                                          |                                                          |                                                          |                                                          |
| Nationality                                                                                                                                                                                                                                                                                                                                                        |                                                          |                                                          |                                                          |                                                          |
| Is the applicant(s)<br>Country of Birth/<br>Nationality/Tax<br>Residency other<br>than India                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>If Yes, Please provide following information:</b>                                                                                                                                                                                                                                                                                                               |                                                          |                                                          |                                                          |                                                          |
| Country of Tax<br>Residency 1                                                                                                                                                                                                                                                                                                                                      |                                                          |                                                          |                                                          |                                                          |
| Identification Type                                                                                                                                                                                                                                                                                                                                                |                                                          |                                                          |                                                          |                                                          |
| Tax Payer Ref ID No.                                                                                                                                                                                                                                                                                                                                               |                                                          |                                                          |                                                          |                                                          |
| Country of Tax<br>Residency 2                                                                                                                                                                                                                                                                                                                                      |                                                          |                                                          |                                                          |                                                          |
| Identification Type                                                                                                                                                                                                                                                                                                                                                |                                                          |                                                          |                                                          |                                                          |
| Tax Payer Ref ID No.                                                                                                                                                                                                                                                                                                                                               |                                                          |                                                          |                                                          |                                                          |
| Country of Tax<br>Residency 3                                                                                                                                                                                                                                                                                                                                      |                                                          |                                                          |                                                          |                                                          |
| Identification Type                                                                                                                                                                                                                                                                                                                                                |                                                          |                                                          |                                                          |                                                          |
| Tax Payer Ref ID No.                                                                                                                                                                                                                                                                                                                                               |                                                          |                                                          |                                                          |                                                          |
| <b>Note:</b> In case Tax Identification Number is not available, kindly provide its functional equivalent. If no TIN is available or has not yet been issued, please provide an Explanation and attach this to the form. (Please attach additional sheet if necessary and mention all countries in which applicant is a tax resident and provide relevant details) |                                                          |                                                          |                                                          |                                                          |

| SECTION VI - OTHER PERSONAL INFORMATION                                             |                                                                                                                      |                                                                                                                      |                                                                                                                      |                                                                                                                      |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| Other Information                                                                   | 1 <sup>st</sup> Applicant/Minor                                                                                      | 2 <sup>nd</sup> Applicant                                                                                            | 3 <sup>rd</sup> Applicant                                                                                            | Guardian                                                                                                             |
| Gender                                                                              | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other                         | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other                         | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other                         | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other                         |
| Father's Name                                                                       |                                                                                                                      |                                                                                                                      |                                                                                                                      |                                                                                                                      |
| Spouse Name                                                                         |                                                                                                                      |                                                                                                                      |                                                                                                                      |                                                                                                                      |
| Occupation                                                                          | <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector                                       | <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector                                       | <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector                                       | <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector                                       |
|                                                                                     | <input type="checkbox"/> Government Service <input type="checkbox"/> Doctor                                          | <input type="checkbox"/> Government Service <input type="checkbox"/> Doctor                                          | <input type="checkbox"/> Government Service <input type="checkbox"/> Doctor                                          | <input type="checkbox"/> Government Service <input type="checkbox"/> Doctor                                          |
|                                                                                     | <input type="checkbox"/> Business <input type="checkbox"/> Professional                                              | <input type="checkbox"/> Business <input type="checkbox"/> Professional                                              | <input type="checkbox"/> Business <input type="checkbox"/> Professional                                              | <input type="checkbox"/> Business <input type="checkbox"/> Professional                                              |
|                                                                                     | <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired                                              | <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired                                              | <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired                                              | <input type="checkbox"/> Agriculture <input type="checkbox"/> Retired                                                |
|                                                                                     | <input type="checkbox"/> Student <input type="checkbox"/> House Wife                                                 | <input type="checkbox"/> Student <input type="checkbox"/> House Wife                                                 | <input type="checkbox"/> Student <input type="checkbox"/> House Wife                                                 | <input type="checkbox"/> Student <input type="checkbox"/> House Wife                                                 |
|                                                                                     | <input type="checkbox"/> Others (Please Specify)<br>_____                                                            | <input type="checkbox"/> Others (Please Specify)<br>_____                                                            | <input type="checkbox"/> Others (Please Specify)<br>_____                                                            | <input type="checkbox"/> Others (Please Specify)<br>_____                                                            |
| Gross Income Range (in Rs.)<br><br>OR<br>Networth in Rs.<br>(Not older than 1 year) | <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs                                               | <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs                                               | <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs                                               | <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs                                               |
|                                                                                     | <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs                                               | <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs                                               | <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs                                               | <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs                                               |
|                                                                                     | <input type="checkbox"/> 25 lacs - 1 Cr <input type="checkbox"/> 1-5 Cr                                              | <input type="checkbox"/> 25 lacs - 1 Cr <input type="checkbox"/> 1-5 Cr                                              | <input type="checkbox"/> 25 lacs - 1 Cr <input type="checkbox"/> 1-5 Cr                                              | <input type="checkbox"/> 25 lacs - 1 Cr <input type="checkbox"/> 1-5 Cr                                              |
|                                                                                     | <input type="checkbox"/> 5-10 Cr <input type="checkbox"/> > 10cr                                                     | <input type="checkbox"/> 5-10 Cr <input type="checkbox"/> > 10cr                                                     | <input type="checkbox"/> 5-10 Cr <input type="checkbox"/> > 10cr                                                     | <input type="checkbox"/> 5-10 Cr <input type="checkbox"/> > 10cr                                                     |
|                                                                                     | Rs. _____                                                                                                            | Rs. _____                                                                                                            | Rs. _____                                                                                                            | Rs. _____                                                                                                            |
|                                                                                     | As on DD/MM/YYYY                                                                                                     | As on DD/MM/YYYY                                                                                                     | As on DD/MM/YYYY                                                                                                     | As on DD/MM/YYYY                                                                                                     |
| Politically Exposed Person (PEP)                                                    | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                             | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                             | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                             | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                             |
|                                                                                     | <input type="checkbox"/> Related to PEP                                                                              | <input type="checkbox"/> Related to PEP                                                                              | <input type="checkbox"/> Related to PEP                                                                              | <input type="checkbox"/> Related to PEP                                                                              |
| Type of Address given at KRA                                                        | <input type="checkbox"/> Residential <input type="checkbox"/> Business<br><input type="checkbox"/> Registered Office | <input type="checkbox"/> Residential <input type="checkbox"/> Business<br><input type="checkbox"/> Registered Office | <input type="checkbox"/> Residential <input type="checkbox"/> Business<br><input type="checkbox"/> Registered Office | <input type="checkbox"/> Residential <input type="checkbox"/> Business<br><input type="checkbox"/> Registered Office |

Contd...



## ACKNOWLEDGMENT SLIP

Application No.:

|                      |                                                           |         |                                                                        |                                                                       |
|----------------------|-----------------------------------------------------------|---------|------------------------------------------------------------------------|-----------------------------------------------------------------------|
| Name of the Investor | ARN No.:                                                  |         | EUIN No.:                                                              |                                                                       |
|                      | Scheme Name: SBI DYNAMIC ASSTS ALLOCATION FUND ACTIVE FOF |         |                                                                        |                                                                       |
| Investment Details   | Date: DD/MM/YYYY                                          | Amount: | Plan: <input type="checkbox"/> Regular <input type="checkbox"/> Direct | Option: <input type="checkbox"/> Growth <input type="checkbox"/> IDCW |
|                      | Cheque/UTR No.:                                           |         | Signature, Date & Stamp                                                |                                                                       |
|                      | Bank & Branch Name:                                       |         |                                                                        |                                                                       |

## SECTION VII - NOMINATION

|                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                              |                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Nomination<br/>(Applicable for individual Investors except Minor)</b>                                                                                        | <input type="checkbox"/> I/We wish to Nominate the following person(s). (ALL THE BELOW FIELDS ARE MANDATORY)<br><div style="text-align: center;">OR</div> <input type="checkbox"/> I/We do not wish to Nominate - Nominee OPT Out (Please sign Declaration for No Nomination) #                                                                                                                                                                       |                                                                                                                                                                              |                                                                                                                                                                              |
| <b>Nominee Details</b>                                                                                                                                          | <b>Nominee 1</b>                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Nominee 2</b>                                                                                                                                                             | <b>Nominee 3</b>                                                                                                                                                             |
| Name of the Nominee                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                              |                                                                                                                                                                              |
| PAN of Nominee (Optional)                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                              |                                                                                                                                                                              |
| Allocation% (Total of allocation% should be 100%)                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                              |                                                                                                                                                                              |
| Relationship of Nominee with investor                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                              |                                                                                                                                                                              |
| Nominee Date of Birth (Mandatory if Nominee is Minor)                                                                                                           | DD / MM / YYYY                                                                                                                                                                                                                                                                                                                                                                                                                                        | DD / MM / YYYY                                                                                                                                                               | DD / MM / YYYY                                                                                                                                                               |
| Guardian Name (In case Nominee is Minor)                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                              |                                                                                                                                                                              |
| Nominee/Guardian Address                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                              |                                                                                                                                                                              |
| Nominee/Guardian Contact Details                                                                                                                                | Mobile No.                                                                                                                                                                                                                                                                                                                                                                                                                                            | Mobile No.                                                                                                                                                                   | Mobile No.                                                                                                                                                                   |
|                                                                                                                                                                 | Email Id                                                                                                                                                                                                                                                                                                                                                                                                                                              | Email Id                                                                                                                                                                     | Email Id                                                                                                                                                                     |
| Identification Details of Nominee/Guardian (in case of Minor)- Please tick any one Option                                                                       | <input type="checkbox"/> PAN Card <input type="checkbox"/> Aadhar (last 4 Digits)<br><input type="checkbox"/> Passport(NRI/PIO/OCI) <input type="checkbox"/> Driving Licence                                                                                                                                                                                                                                                                          | <input type="checkbox"/> PAN Card <input type="checkbox"/> Aadhar (last 4 Digits)<br><input type="checkbox"/> Passport(NRI/PIO/OCI) <input type="checkbox"/> Driving Licence | <input type="checkbox"/> PAN Card <input type="checkbox"/> Aadhar (last 4 Digits)<br><input type="checkbox"/> Passport(NRI/PIO/OCI) <input type="checkbox"/> Driving Licence |
| Please mention ID Number of the opted Option                                                                                                                    | Identification Number                                                                                                                                                                                                                                                                                                                                                                                                                                 | Identification Number                                                                                                                                                        | Identification Number                                                                                                                                                        |
| <b># Declaration for No Nomination:</b>                                                                                                                         | I/we hereby confirm that I/We do not wish to appoint any nominee(s) for my/our mutual fund units held in my/our folio and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my/our legal heirs would need to submit all the requisite documents issued by court or other competent authority, based on the values of assets held in my/our mutual fund folio. |                                                                                                                                                                              |                                                                                                                                                                              |
| <b>*Signature(s)</b><br>(All Applicants must Sign)                                                                                                              | 1 <sup>st</sup> Applicant                                                                                                                                                                                                                                                                                                                                                                                                                             | 2 <sup>nd</sup> Applicant                                                                                                                                                    | 3 <sup>rd</sup> Applicant                                                                                                                                                    |
| <b>*If the account holder affixes thumb impression instead of signature, Please use separate nomination form.</b>                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                              |                                                                                                                                                                              |
| I / We want the details of my / our nominee to be printed in the Statement of Account, provided to me / us by the AMC as follows; (please tick, as appropriate) |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                              |                                                                                                                                                                              |
| <input type="checkbox"/> Name of Nominee(s) with Details and Percentage                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Nomination without Details and Percentage (Default Option)                                                                                          |                                                                                                                                                                              |

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <p><b>All communications related to your investment, Scheme wise Annual Report or Abridged Summary will be sent to your registered email id. However, if you don't have Email ID, you could view and download Scheme wise Annual Report or Abridged Summary from our Website, <a href="http://www.sbimf.com">www.sbimf.com</a>.</b></p> <p><b>In case you still wish to receive the above in physical form, please tick box given below.</b></p> <p><input type="checkbox"/> I wish to receive scheme wise annual report or abridged summary through physical mode.</p> |
|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**DECLARATION :** I/We confirm that the information provided in this form is true & accurate. I/We have read and understood the contents of all the scheme related documents and I/We hereby confirm and declare that (i) I/We have not received or been induced by any rebate or gifts, directly or indirectly, in making this investment. (ii) The amount invested/to be invested by me/us in the scheme(s) of SBI Mutual Fund ("the Fund") is derived through legitimate sources and is not held or designed for the purpose of contravention of any act, rules, regulations or any statute or legislation or any other applicable laws or any notifications, directions issued by any governmental or statutory authority from time to time. (iii) The monies invested by me/us in the schemes of the Fund do not attract the provisions of Foreign Contribution Regulations Act ("FCRA"). (iv) I/We am/are aware that a U.S. person (within the definition of the term 'US Person' under the US Securities laws) / resident of Canada are not eligible for investments with the Fund and I/We am/are not a U.S. person/resident of Canada. (v) The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/her for the different competing schemes of various mutual funds from amongst which a scheme of the Fund is being recommended to me/us. (vi) As per the Memorandum and Articles of Association of the Company, Bye laws, Trust Deed or Partnership Deed and resolutions passed by the Company / Firm / Trust, I/We am/are authorised to enter into the transactions for and on behalf of the Company/Firm/Trust. (vii) I/We am/are Non Resident of Indian Nationality/Origin and that funds for the subscriptions have been remitted from abroad through approved banking channels or from my/our Non Resident External/Ordinary account/ FCNR Account. (viii) I/We do not hold a Permanent Account Number and hold only a single PAN Exempt KYC Reference No. (PEKRN) issued by KYC Registration Agency and also confirm that the aggregate of lump sum and SIP installments in a rolling 12 months period or financial year does not exceed Rs. 50,000/- (Rupees Fifty Thousand) per Financial year per AMC (Applicable for "Micro Investments" only). (ix) All information provided in this application form together with its annexures is/are true and correct to the best of my/our knowledge and belief and I/We shall be liable in case any of the specified information is found to be false or untrue or misleading or misrepresenting. (x) That we authorize you to disclose, share, remit in any form, mode or manner, all / any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/ us to the Fund, its Sponsor, AMC, trustees, their employees/RTAs or any Indian or foreign governmental or statutory or judicial authorities/agencies including but not limited to SEBI, the Financial Intelligence Unit-India, the tax/revenue authorities in India or outside India wherever it is legally required and other such regulatory/investigation agencies or such other third party, on a need to know basis, without any obligation of advising me/us of the same. (xi) I/We shall keep you forthwith informed in writing about any changes/modification to the information provided or any other additional information as may be required by you from time to time. (xii) Towards compliance with tax information sharing laws, such as FATCA and CRS: (a) The Fund may be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from investors. I/We ensure to advise you within 30 days should there be any change in any information provided. (b) In certain circumstances (including if the Fund does not receive a valid self-certification from me) the Fund may be obliged to share information on my account with relevant tax authorities. (c) I/We am aware that the Fund may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. (d) As may be required by domestic or overseas regulators/ tax authorities, the Fund may also be constrained to withhold and pay out any sums from my/ our account or close or suspend my account(s) and (e) I/We understand that I am / we are required to contact my tax advisor for any questions about my/our tax residency. (f) I have understood the information requirements of this form (read along with the FATCA/CRS instructions) and hereby confirm that the information provided by me/us on these form, including the tax payer identification number is true, correct and complete. I also confirm that I have read and understood the FATCA Terms and Conditions below and accept the same. (xiii) I/We understand that, a penalty shall be levied on every inaccurate reportable account as provided under the Income Tax Act, 1961. The MF/AMC has the right to recover this penalty from the unit holder(s) or retain out of any money in its possession, due to inaccurate information or false self-certifications provided by unit holders. (xiv) If the name/date of birth/date of incorporation given in the Application is not matching with PAN, Application may liable to get rejected or further transactions may be liable to get rejected. By using this application, I/We agree to issue a cheque in favour of the scheme which will be invested as per the option selected/mentioned under clause (Section IV) of the form. **\$Applicable to other than Individuals/HUF; @Applicable to NRI**

|                                                                                                                                                                                                                                                                                 |                                                                                  |                                                                        |                                                                        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------|
| <b>I/We have read, understood &amp; agree to the terms &amp; conditions mentioned in the SID &amp; KIM of the respective Scheme(s) along with the above declaration. I/We hereby confirm that the information provided by me/us on this form is true, correct and complete.</b> |                                                                                  |                                                                        |                                                                        |
| <b>Signature(s)</b><br>(All Applicants must Sign)                                                                                                                                                                                                                               | 1 <sup>st</sup> Applicant/Guardian/<br>Authorised Signatory - Affix Rubber Stamp | 2 <sup>nd</sup> Applicant<br>Authorised Signatory - Affix Rubber Stamp | 3 <sup>rd</sup> Applicant<br>Authorised Signatory - Affix Rubber Stamp |

Date:      /      /      Place:     

|                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Any communication in connection with this application should be addressed to the Registrar or the Investment Manager</b></p> <p><b>Investment Manager :</b><br/> <b>SBI Funds Management Ltd.</b><br/>         (A Joint Venture between SBI &amp; AMUNDI)<br/>         9th Floor, Crescenzo, C-38 &amp; 39,G Block, Bandra Kurla Complex,<br/>         Bandra (East), Mumbai - 400 051.</p> | <p><b>Registrar:</b><br/> <b>Computer Age Management Services Ltd.,</b><br/>         (SEBI Registration No. : INR000002813)<br/>         Rayala Towers, 158, Anna Salai, Chennai - 600 002.<br/>         Email: <a href="mailto:enq_sbimf@camsonline.com">enq_sbimf@camsonline.com</a> • Website: <a href="http://www.camsonline.com">www.camsonline.com</a></p> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                  |                                                                                                                     |                                                                                          |
|------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| <b>Toll Free</b><br>1800 425 5425 / 1800 209 3333<br>+91-22-62511600/+91-80-25512131<br>(for overseas investors) | <b>Email ID</b><br><a href="mailto:customer.delight@sbimf.com" style="color: white;">customer.delight@sbimf.com</a> | <b>Website</b><br><a href="http://www.sbimf.com" style="color: white;">www.sbimf.com</a> |
|------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|

\*Investors should consult their financial advisers if in doubt about whether the product is suitable

SIP ENROLMENT CUM ONE TIME DEBIT MANDATE FORM

New investors subscribing to the scheme through SIP must submit this Form alongwith Common Application Form

| ARN & Name of Distributor | Branch Code<br>(only for SBG) | Sub-Broker ARN Code | Sub-Broker Code | EUIN*<br>(Employee Unique Identification Number) | Reference No. |
|---------------------------|-------------------------------|---------------------|-----------------|--------------------------------------------------|---------------|
|                           |                               |                     |                 |                                                  |               |

Declaration for "execution-only" transaction (only where EUIN box is left blank) :- I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

|              |                                                             |                                                  |                                                  |
|--------------|-------------------------------------------------------------|--------------------------------------------------|--------------------------------------------------|
| SIGNATURE(S) |                                                             |                                                  |                                                  |
|              | 1 <sup>st</sup> Applicant / Guardian / Authorised Signatory | 2 <sup>nd</sup> Applicant / Authorised Signatory | 3 <sup>rd</sup> Applicant / Authorised Signatory |

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor

INVESTOR DETAILS

Folio No./Application No.

Name of 1<sup>st</sup> Applicant

SIP Cheque No/s :

|                                                            |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                            |
|------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                            | 1                                                                                                                                                                                                                                                                                                                                                                                                          | 2                                                                                                                                                                                                                                                                                                                                                                                                          | 3                                                                                                                                                                                                                                                                                                                                                                                                          |
| Scheme Name                                                |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                            |
| Plan                                                       | <input type="checkbox"/> Regular <input type="checkbox"/> Direct                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Regular <input type="checkbox"/> Direct                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Regular <input type="checkbox"/> Direct                                                                                                                                                                                                                                                                                                                                           |
| Option                                                     | <input type="checkbox"/> Growth <input type="checkbox"/> IDCW <div>Frequency</div>                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Growth <input type="checkbox"/> IDCW <div>Frequency</div>                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Growth <input type="checkbox"/> IDCW <div>Frequency</div>                                                                                                                                                                                                                                                                                                                         |
| Income Distribution cum Capital Withdrawal (IDCW) Facility | <input type="checkbox"/> Reinvest <input type="checkbox"/> Payout                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Reinvest <input type="checkbox"/> Payout                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Reinvest <input type="checkbox"/> Payout                                                                                                                                                                                                                                                                                                                                          |
| Each SIP Instalment Amount (₹)                             |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                            |
| SIP Frequency                                              | <input type="checkbox"/> Monthly (Default) <input type="checkbox"/> Quarterly <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Half - Yearly <input type="checkbox"/> Annual                                                                                                                                                                                        | <input type="checkbox"/> Monthly (Default) <input type="checkbox"/> Quarterly <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Half - Yearly <input type="checkbox"/> Annual                                                                                                                                                                                        | <input type="checkbox"/> Monthly (Default) <input type="checkbox"/> Quarterly <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Half - Yearly <input type="checkbox"/> Annual                                                                                                                                                                                        |
| SIP Date<br>(for Monthly, Quarterly, Half-Yearly & Annual) | <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 15 <sup>th</sup> <input type="checkbox"/> 30 <sup>th</sup> (For February, last business day) <input type="checkbox"/> 5 <sup>th</sup> <input type="checkbox"/> 20 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> (Default) <input type="checkbox"/> 25 <sup>th</sup> (Any other date from 1 <sup>st</sup> to 30 <sup>th</sup> ) | <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 15 <sup>th</sup> <input type="checkbox"/> 30 <sup>th</sup> (For February, last business day) <input type="checkbox"/> 5 <sup>th</sup> <input type="checkbox"/> 20 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> (Default) <input type="checkbox"/> 25 <sup>th</sup> (Any other date from 1 <sup>st</sup> to 30 <sup>th</sup> ) | <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 15 <sup>th</sup> <input type="checkbox"/> 30 <sup>th</sup> (For February, last business day) <input type="checkbox"/> 5 <sup>th</sup> <input type="checkbox"/> 20 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> (Default) <input type="checkbox"/> 25 <sup>th</sup> (Any other date from 1 <sup>st</sup> to 30 <sup>th</sup> ) |
| (for Weekly Fixed Date or Day)                             | <input type="checkbox"/> Fixed dates (1,8,15,22) OR <input type="checkbox"/> Any Day (Default) (Monday to Friday)                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Fixed dates (1,8,15,22) OR <input type="checkbox"/> Any Day (Default) (Monday to Friday)                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Fixed dates (1,8,15,22) OR <input type="checkbox"/> Any Day (Default) (Monday to Friday)                                                                                                                                                                                                                                                                                          |
| SIP Period                                                 | From <div></div> To <div></div> OR <input type="checkbox"/> 3 yrs <input type="checkbox"/> 5 yrs <input type="checkbox"/> 10 yrs <input type="checkbox"/> 15 yrs <input type="checkbox"/> 20 yrs <input type="checkbox"/> 40 yrs (Select any one)                                                                                                                                                          | From <div></div> To <div></div> OR <input type="checkbox"/> 3 yrs <input type="checkbox"/> 5 yrs <input type="checkbox"/> 10 yrs <input type="checkbox"/> 15 yrs <input type="checkbox"/> 20 yrs <input type="checkbox"/> 40 yrs (Select any one)                                                                                                                                                          | From <div></div> To <div></div> OR <input type="checkbox"/> 3 yrs <input type="checkbox"/> 5 yrs <input type="checkbox"/> 10 yrs <input type="checkbox"/> 15 yrs <input type="checkbox"/> 20 yrs <input type="checkbox"/> 40 yrs (Select any one)                                                                                                                                                          |

☐ Use Existing One Time Debit Mandate (if already registered in the Folio)

Bank Name

Bank A/c No

TOP-UP SIP (Select anyone % or Amount)

|                                                                                                             |                                                                                                                                        |                                                                                                                                        |                                                                                                                                        |
|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                             | 1                                                                                                                                      | 2                                                                                                                                      | 3                                                                                                                                      |
| Top-Up Percentage<br>(in multiples of 5% only)<br>OR<br>Top-Up Amount Rs.<br>(in multiples of Rs. 500 only) | <input type="checkbox"/> 5% <input type="checkbox"/> 10% OR <input type="checkbox"/> Other <div></div><br>OR<br>Amount Rs. <div></div> | <input type="checkbox"/> 5% <input type="checkbox"/> 10% OR <input type="checkbox"/> Other <div></div><br>OR<br>Amount Rs. <div></div> | <input type="checkbox"/> 5% <input type="checkbox"/> 10% OR <input type="checkbox"/> Other <div></div><br>OR<br>Amount Rs. <div></div> |
| Top-Up Frequency                                                                                            | <input type="checkbox"/> Half - Yearly <input type="checkbox"/> Annual                                                                 | <input type="checkbox"/> Half - Yearly <input type="checkbox"/> Annual                                                                 | <input type="checkbox"/> Half - Yearly <input type="checkbox"/> Annual                                                                 |

TOP-UP SIP CAP (Investor has to choose only one option)

|                                                                                                                 |                            |                            |                            |
|-----------------------------------------------------------------------------------------------------------------|----------------------------|----------------------------|----------------------------|
| Top-Up SIP CAP Amount ₹<br>(maximum SIP installment including Top-Up amount)<br>OR<br>Top-Up SIP CAP Month-Year | <div></div><br><div></div> | <div></div><br><div></div> | <div></div><br><div></div> |
|-----------------------------------------------------------------------------------------------------------------|----------------------------|----------------------------|----------------------------|

DECLARATION : I/We hereby declare that the particulars given in this mandate form are correct and express my/our willingness to make payments towards investment in the schemes of SBI Mutual Fund. I/We hereby confirm and declare that the monies invested by me in the schemes of SBI Mutual Fund do not attract the provisions of Foreign Contribution Regulations Act ("FCRA"). I/We are aware that SBI Mutual Fund and its service providers and bank are authorized to process transactions by debiting my/our bank account through Direct Debit / NACH facility. If the transaction is delayed or not effected for reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We will also inform SBI Mutual Fund/RTA about any changes in my/our bank account. I/We confirm that the aggregate of the lump sum investment (fresh purchase & additional purchase) and SIP installments in rolling 12 months period or financial year i.e. April to March does not exceed Rs. 50,000/- (Rupees Fifty Thousand) (applicable for "Micro investments" only). The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We have read, understood and agreed to the terms and conditions and contents of the SID, SAI, KIM and Addendum issued from time to time of the respective Scheme(s) of SBI Mutual Fund. I/We hereby authorize the bank to honour such payments for which I/We have signed and endorsed the Mandate Form.

ONE TIME DEBIT MANDATE FORM (OTM)



SBI MUTUAL FUND

A PARTNER FOR LIFE

UMRN

Date

Sponsor Bank Code

Utility Code

CREATE ☒

MODIFY

CANCEL

I/We, hereby authorize **SBI Mutual Fund** To debit (Please ☒) 

SB / CA / CC / SB-NRE / SB-NRO / Other

Bank A/c No.

with Bank

Bank Name

IFSC

OR MICR

an amount of Rupees

₹

FREQUENCY: ☒ Weekly ☒ Monthly ☒ Quarterly ☒ As & when presented

DEBIT TYPE : ☒ Fixed Amount ☒ Maximum Amount

Folio No.:

Moblie No.:

Appln No. :

Email ID:

I Agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.

PERIOD

From

To

Signature of 1<sup>st</sup> Bank Account Holder

Signature of 2<sup>nd</sup> Bank Account Holder

Signature of 3<sup>rd</sup> Bank Account Holder

Name as in Bank records

Name as in Bank records

Name as in Bank records

This is to confirm that the declaration has been carefully read, understood & made by me/us. I/We are authorizing the User entity/Corporate to debit my account, based on the instruction as agreed and signed by me/us. I/We have understood that I/ we are authorized to cancel/amend this mandate by appropriately communicating the cancellation / amendment request to the User entity /Corporate or the bank where I/We have authorized the debit.

INSTRUCTIONS TO FILL ONE TIME DEBIT MANDATE (OTM)

- Investors who have already submitted One Time Debit Mandate (OTM) form or already registered for OTM facility should not submit OTM form again as OTM registration is a one-time process only for each bank account in the Folio. However, if such investors wish to add a new bank account towards OTM facility may submit the new OTM form.
- Investors, who have not registered for OTM facility, may fill the OTM form and submit duly signed with their name mentioned (as per bank records).
- Along with OTM, investors should enclose an original CANCELLED cheque (or a copy) with name and account number pre-printed of the bank account to be registered failing which registration may not be accepted.
- First applicant / unitholder must be one of the account holder in the bank account. Investor's cheque / bank account details are subject to third party validation.
- Investors are deemed to have read and understood the terms and conditions of Systematic Investment Plan mentioned in SID, SAI & KIM of the respective Scheme(s) of SBI Mutual Fund.
- UMRN, Sponsor Bank Code and Utility Code are meant for Office use only and need not be filled by investors.
- Please mention OTM date and OTM "From date" in DDDMMYYYY format.
- For the convenience of the investors the frequency of the mandate mentioned as "As and When Presented".
- From date & to date is mandatory. However, the maximum duration for enrollment is 40 years.
- Please provide all the information / details in the OTM.

Mandatory information to be provided in One Time Debit Mandate (OTM):

- Date of Mandate
- Bank A/c Type
- Bank A/c No. (please enclose CANCELLED cheque leaf)
- Bank Name
- IFSC and/or MICR Code
- Maximum Amount (Rupees and Words)
- Mandate From date
- Mandate To date
- Signature/s of account holders in bank records
- Name/s of account holders as in bank records

Instructions for Top-Up SIP

- Investors can either opt for fixed amount SIP Top-up or percentage SIP Top-Up option. In case investors selects both the options, percentage SIP Top-Up would be made applicable. In case the investor selects multiple % SIP Top-up options under percentage-based SIP Top-Up option, the lower percentage would be considered.
- The minimum SIP Top-up amount under fixed amount SIP Top-up is Rs. 500 and in multiples of Rs. 500. The minimum Top-up percentage would be 5% of the SIP amount and in multiples of 5% thereof.
- If the Top-up % is not in multiples of 5, it will be rounded down to nearest multiple of 5. The Top-up amount would be rounded off to the nearest Rs. 10.
- Percentage SIP Top-up would be computed on the immediately preceding SIP instalment value as on the SIP Top-Up trigger date.
- The Top-up details cannot be modified once enrolled. In order to make any changes, the investor must cancel the existing SIP and enrol for a fresh SIP with Top-up option.
- In case of Monthly SIP, Half-yearly as well as Yearly frequency are available for Top-up. If the investor does not specify the frequency, the default frequency for Top-up will be considered as Half-yearly.
- In case of Quarterly SIP, only the Yearly frequency is available for Top-up.
- Top up facility will not be applicable for SIP frequencies other than Monthly & Quarterly. SIP Top-up facility will be allowed in all schemes in which SIP facility is being offered.
- All other terms & conditions applicable for regular SIP will also be applicable to Top-up SIP.
- The AMC/Trustee reserves the right to terminate or modify the conditions of the Facility at its discretion.

Instructions for Top-up SIP Cap

Under this option, post selecting SIP Top-up option, the investor can define the maximum SIP Top-up Cap, beyond which the SIP instalment will not increase in future. The investor shall have the flexibility to choose either Top-up SIP Cap amount or Top-up SIP Cap Month-Year. In case of multiple selection, Top-up SIP Cap amount will be considered as default selection.

Terms and conditions of Top-up SIP Cap facility are as follows:

- Top-up SIP Cap Amount: Investor has an option to fix the Top-up SIP amount i.e. maximum SIP instalment including Top-up amount. The pre-defined amount should be equal to or lesser than the maximum amount mentioned by the investor in One Time Mandate Form (OTM). The instalment amount after Top-up shall not exceed the amount mentioned in OTM at any given time.
- In case of difference between the Top-up SIP Cap amount & OTM Debit Mandate, then amount which is lower of the two shall be considered as the Top-up SIP Cap amount.
- If SIP amount (including SIP Top-up amount) reaches the Top-up Cap before the end of SIP tenure, the SIP Top up will cease and SIP instalment amount will remain constant for remaining SIP Tenure.
- Top-up SIP Cap Month-Year: It is the month from which SIP Top-up amount will cease and last SIP instalment including Top-up amount will remain constant till the end of SIP tenure.

- If none of the above options is selected by the investor, the SIP Top-up will continue as per the SIP end date subject to the maximum amount mentioned in OTM form.
- The AMC/Trustee reserves the right to terminate or modify the conditions of the Facility at its discretion.

Illustration for Top us SIP

Fixed amount Top-up SIP:

|                  |                            |
|------------------|----------------------------|
| SIP Tenure       | 01-Mar- 2017 to 1-Mar-2022 |
| SIP Amount (Rs)  | 5000                       |
| SIP Frequency    | Monthly                    |
| Top-up Amount    | 1000                       |
| Top-up Frequency | Yearly                     |

| SIP From Date | SIP To Date | SIP Amount (Rs) | SIP Top-up Amount (Rs) | SIP Amount post Top-up (Rs) |
|---------------|-------------|-----------------|------------------------|-----------------------------|
| 01-Mar-17     | 01-Feb-18   | 5000            | N.A.                   | 5000                        |
| 01-Mar-18     | 01-Feb-19   | 5000            | 1000                   | 6000                        |
| 01-Mar-19     | 01-Feb-20   | 6000            | 1000                   | 7000                        |
| 01-Mar-20     | 01-Feb-21   | 7000            | 1000                   | 8000                        |
| 01-Mar-21     | 01-Feb-22   | 8000            | 1000                   | 9000                        |

In the above scenario, if the investor specifies an SIP Top-up cap amount of Rs. 7000. The calculation would be as shown below:

| SIP From Date: | SIP To Date | SIP Amount (Rs) | SIP Top-up Amount (Rs)* | SIP Amount post Top-up (Rs) |
|----------------|-------------|-----------------|-------------------------|-----------------------------|
| 01-Mar-17      | 01-Feb-18   | 5000            | N.A.                    | 5000                        |
| 01-Mar-18      | 01-Feb-19   | 5000            | 1000                    | 6000                        |
| 01-Mar-19      | 01-Feb-20   | 6000            | 1000                    | 7000                        |
| 01-Mar-20      | 01-Feb-21   | 7000            | N.A                     | 7000                        |
| 01-Mar-21      | 01-Feb-22   | 7000            | N.A                     | 7000                        |

In the above scenario, if the investor specifies SIP Top-up Cap month and Year as Dec 2019. The calculation would be as show below:

| SIP From Date | SIP To Date | SIP Amount (Rs) | SIP Top Amount (Rs)* | SIP Amount post Top-up (Rs) |
|---------------|-------------|-----------------|----------------------|-----------------------------|
| 01-Mar-17     | 01-Feb-18   | 5000            | N.A.                 | 5000                        |
| 01-Mar-18     | 01-Feb-19   | 5000            | 1000                 | 6000                        |
| 01-Mar-19     | 01-Feb-20   | 6000            | 1000                 | 7000                        |
| 01-Mar-20     | 01-Feb-21   | 7000            | N.A.                 | 7000                        |
| 01-Mar-21     | 01-Feb-22   | 7000            | N.A.                 | 7000                        |

Percentage Top-up SIP:

|                   |                            |
|-------------------|----------------------------|
| SIP Tenure        | 01-Mar- 2017 to 1-Mar-2022 |
| SIP Amount (Rs)   | 5000                       |
| SIP Frequency     | Monthly                    |
| Top-up Percentage | 10%                        |
| Top-up Frequency  | Yearly                     |

| SIP From Date | SIP To Date | SIP Amount (Rs) | SIP Top-up Amount (Rs)* | SIP Amount post Top-up (Rs) |
|---------------|-------------|-----------------|-------------------------|-----------------------------|
| 01-Mar-17     | 01-Feb-18   | 5000            | N.A.                    | 5000                        |
| 01-Mar-18     | 01-Feb-19   | 5000            | 500                     | 5500                        |
| 01-Mar-19     | 01-Feb-20   | 5500            | 550                     | 6050                        |
| 01-Mar-20     | 01-Feb-21   | 6050            | 610                     | 6660                        |
| 01-Mar-21     | 01-Feb-22   | 6660            | 670                     | 7330                        |

\* SIP Top-up amount is rounded off to nearest Rs. 10

In the above scenario, if the investor specifies an SIP Top-up cap amount of Rs. 6500. The calculation would be as shown below:

| SIP From Date: | SIP To Date | SIP Amount (Rs) | SIP Top-up Amount (Rs)* | SIP Amount post Top-up (Rs) |
|----------------|-------------|-----------------|-------------------------|-----------------------------|
| 01-Mar-17      | 01-Feb-18   | 5000            | N.A.                    | 5000                        |
| 01-Mar-18      | 01-Feb-19   | 5000            | 500                     | 5500                        |
| 01-Mar-19      | 01-Feb-20   | 5500            | 550                     | 6050                        |
| 01-Mar-20      | 01-Feb-21   | 6050            | 610                     | 6500                        |
| 01-Mar-21      | 01-Feb-22   | 6500            | N.A                     | 6500                        |

\* SIP Top-up amount is rounded off to nearest Rs. 10

In the above scenario, if the investor specifies SIP Top-up Cap month and Year as Dec 2019. The calculation would be as show below:

| SIP From Date | SIP To Date | SIP Amount (Rs) | SIP Top Amount (Rs)* | SIP Amount post Top-up (Rs) |
|---------------|-------------|-----------------|----------------------|-----------------------------|
| 01-Mar-17     | 01-Feb-18   | 5000            | N.A.                 | 5000                        |
| 01-Mar-18     | 01-Feb-19   | 5000            | 500                  | 5500                        |
| 01-Mar-19     | 01-Feb-20   | 5500            | 550                  | 6050                        |
| 01-Mar-20     | 01-Feb-21   | 6050            | N.A                  | 6050                        |
| 01-Mar-21     | 01-Feb-22   | 6050            | N.A                  | 6050                        |

\* SIP Top-up amount is rounded off to nearest Rs. 10

MITRA SIP ENROLMENT CUM ONE TIME DEBIT MANDATE FORM

(New investors subscribing to this option must submit this Form alongwith Common Application Form)

ARN & Name of Distributor

Branch Code  
(only for SBG)

Sub-Broker ARN Code

Sub-Broker Code

EUIN\*  
(Employee Unique Identification Number)

Reference No.

SIGNATURE(S)

1<sup>st</sup> Applicant / Guardian / Authorised Signatory

2<sup>nd</sup> Applicant / Authorised Signatory

3<sup>rd</sup> Applicant / Authorised Signatory

Declaration for “execution-only” transaction (only where EUIN box is left blank) : \* I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an “execution-only” transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors’ assessment of various factors including the service rendered by the distributor

INVESTOR DETAILS

Folio No./Application No.

Name of 1<sup>st</sup> Applicant

SIP Cheque No/s

Scheme Name

SIP Amount (Rs.)

SIP Start Date

SIP Tenure

Switch-In/SWP Scheme Name (Post completion of SIP Tenure)

SWP Date: Same as SIP Date

SWP Frequency : Monthly (Default)

SWP Amount (tick any one of the option below from A Or B)

SIP Tenure

8 Years

8 Years

10 Years

12 Years

15 Years

20 Years

25 Years

30 Years

SWP Amount

1 x SIP Instalment Amount

1.5 x SIP Instalment Amount

2 x SIP Instalment Amount

3 x SIP Instalment Amount

5 x SIP Instalment Amount

8 x SIP Instalment Amount

12 x SIP Instalment Amount

OR

B. Any other Amount (Rs.)

(This amount should be less than or equal to SWP amount mentioned as per the matrix above)

Use Existing One Time Debit Mandate (if already registered in the Folio)

Bank Name

Bank A/c No

TOP-UP SIP

Top-Up Percentage  
(in multiples of 5% only)

OR

Top-Up Amount Rs.  
(in multiples of Rs. 500 only)

Top-Up Frequency

TOP-UP SIP CAP (Investor has to choose only one option)

Top-Up SIP CAPAmount ₹  
(maximum SIP installment including Top-Up amount)

OR

Top-Up SIP CAP Month-Year

DECLARATION : I/We hereby declare that the particulars given in this mandate form are correct and express my/our willingness to make payments towards investment in the schemes of SBI Mutual Fund. I/We hereby confirm and declare that the monies invested by me in the schemes of SBI Mutual Fund do not attract the provisions of Foreign Contribution Regulations Act (“FCRA”). I/We are aware that SBI Mutual Fund and its service providers and bank are authorized to process transactions by debiting my/our bank account through Direct Debit / NACH facility. If the transaction is delayed or not effected for reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We will also inform SBI Mutual Fund/RTA about any changes in my/our bank account. I/We confirm that the aggregate of the lump sum investment (fresh purchase & additional purchase) and SIP installments in rolling 12 months period or financial year i.e. April to March does not exceed Rs. 50,000/- (Rupees Fifty Thousand) (applicable for “Micro investments” only). The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We have read, understood and agreed to the terms and conditions and contents of the SID, SAI, KIM and Addendum issued from time to time of the respective Scheme(s) of SBI Mutual Fund. I/We hereby authorize the bank to honour such payments for which I/We have signed and endorsed the Mandate Form.

SBI MUTUAL FUND

A PARTNER FOR LIFE

ONE TIME DEBIT MANDATE FORM (OTM)

UMRN

Date

Sponsor Bank Code

Utility Code

CREATE

MODIFY

CANCEL

I/We, hereby authorize

SBI Mutual Fund

To debit (Please ✓)

SB / CA / CC / SB-NRE / SB-NRO / Other

Bank A/c No.

with Bank

Bank Name

IFSC

OR MICR

an amount of Rupees

₹

FREQUENCY: ☒ Weekly ☒ Monthly ☒ Quarterly ☒ As & when presented

DEBIT TYPE : ☒ Fixed Amount ☒ Maximum Amount

Folio No.:

Appln No. :

Email ID:

I Agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.

PERIOD

From

To

Signature of 1<sup>st</sup> Bank Account Holder

Signature of 2<sup>nd</sup> Bank Account Holder

Signature of 3<sup>rd</sup> Bank Account Holder

Name as in Bank records

Name as in Bank records

Name as in Bank records

This is to confirm that the declaration has been carefully read, understood & made by me/us. I/We are authorizing the User entity/Corporate to debit my account, based on the instruction as agreed me/us and signed by me. I/We have understood that I/We are authorized to cancel/amend this mandate by appropriately communicating the cancellation / amendment request to the User entity /Corporate or the bank where I/We have authorized the debit.

## TERMS AND CONDITIONS FOR MITRA SIP AND OTM

### What is MITRA SIP?

MITRA SIP is a facility that allows investor to make initial investment through SIP and after completion of specific tenure, Switch the units to another scheme or continue to remain in the same scheme as per the option selected by the investor and Systematic Withdrawal (SWP) from the target scheme post switch.

### TERMS AND CONDITIONS FOR MITRA SIP

- MITRA SIP facility is available under select schemes of SBI Mutual Fund (mentioned below) for a fixed SIP tenure of either 8 years, 10 years, 12 years, 15 years, 20 years, 25 years or 30 years.
- This facility is allowed under 'Monthly' frequency for Growth option of the eligible SIP / SWP schemes.
- Schemes eligible for SIP, Switch-in and SWP:** The target scheme can either be the source scheme (i.e. SIP scheme) or any one of the pre-defined schemes mentioned below.

| Name of Schemes (for SIP)                  | Name of Schemes (for Switch and SWP) |
|--------------------------------------------|--------------------------------------|
| SBI Magnum Equity ESG Fund                 | SBI Conservative Hybrid Fund         |
| SBI Large & Midcap Fund                    | SBI Multi Asset Allocation Fund      |
| SBI Magnum Global Fund                     | SBI BlueChip Fund                    |
| SBI Equity Hybrid Fund                     | SBI Arbitrage Opportunities Fund     |
| SBI Consumption Opportunities Fund         | SBI Short Term Debt Fund             |
| SBI Technology Opportunities Fund          | SBI Banking & PSU Fund               |
| SBI Healthcare Opportunities Fund          | SBI Equity Savings Fund              |
| SBI Contra Fund                            | SBI Balanced Advantage Fund          |
| SBI Nifty Index Fund                       | SBI Equity Hybrid Fund               |
| SBI Focused Equity Fund                    |                                      |
| SBI Conservative Hybrid Fund               |                                      |
| SBI Magnum MidCap Fund                     |                                      |
| SBI Magnum COMMA Fund                      |                                      |
| SBI Flexicap Fund                          |                                      |
| SBI Multi Asset Allocation Fund            |                                      |
| SBI BlueChip Fund                          |                                      |
| SBI Infrastructure Fund                    |                                      |
| SBI PSU Fund                               |                                      |
| SBI Small Cap Fund                         |                                      |
| SBI Banking & Financial Services Fund      |                                      |
| SBI Equity Minimum Variance Fund           |                                      |
| SBI International Access-US Equity FoF     |                                      |
| SBI Nifty Next 50 Index Fund               |                                      |
| SBI Balanced Advantage Fund                |                                      |
| SBI Multicap Fund                          |                                      |
| SBI Nifty Midcap 150 Index Fund            |                                      |
| SBI Nifty Smallcap 250 Index Fund          |                                      |
| SBI Dividend Yield Fund                    |                                      |
| SBI S&P BSE Sensex Index Fund              |                                      |
| SBI Nifty50 Equal Weight Index Fund        |                                      |
| SBI Energy Opportunities Fund              |                                      |
| SBI Automotive Opportunities Fund          |                                      |
| SBI Innovative Opportunities Fund          |                                      |
| SBI Nifty 500 Index Fund                   |                                      |
| SBI Nifty India Consumption Index Fund     |                                      |
| SBI Nifty Bank Index Fund                  |                                      |
| SBI BSE PSU Bank Index Fund                |                                      |
| SBI Income Plus Arbitrage Active FOF       |                                      |
| SBI Nifty200 Momentum 30 Index Fund        |                                      |
| SBI Nifty 100 Low Volatility 30 Index Fund |                                      |
| SBI Nifty200 Quality 30 Index Fund         |                                      |
| SBI Dynamic Asset Allocation Fund          |                                      |
| Active FOF                                 |                                      |

- Minimum installment amount under this facility for SIP / SWP would be the same as prescribed under Monthly frequencies in the respective schemes. All other terms and conditions pertaining to SIP and SWP shall be applicable for MITRA SIP / SWP.
- On completion of the SIP period, the entire accumulated clear unit balance shall be switched on T+15 calendar days to a pre-defined target scheme (T is the last SIP transaction date of the facility) or continue to remain in the same scheme as per option selected by the investor. In case the source and target scheme is different, then switch out from the source scheme would be subject to applicable exit load and taxes if any.
- SWP shall commence from the target scheme from the next month onwards on the same SIP instalment date. The SWP transaction shall be subject to applicable exit load and taxes if any.
- Investor can opt for SWP instalment amount as per the matrix below or specific amount to be mentioned, provided that the amount mentioned by the investor is less than or equal to amount mentioned as per the matrix and shall be subject to minimum SWP amount of the respective schemes.

| SIP Tenure | Monthly SWP Instalment       |
|------------|------------------------------|
| 8 years    | 1 x monthly SIP instalment   |
| 10 years   | 1.5 x monthly SIP instalment |
| 12 years   | 2 x monthly SIP instalment   |
| 15 years   | 3 x monthly SIP instalment   |
| 20 years   | 5 x monthly SIP instalment   |
| 25 years   | 8 x monthly SIP instalment   |
| 30 Years   | 12 x monthly SIP instalment  |

For example, for a 10 years SIP with instalment amount of Rs 10,000, SWP amount must be less than or equal to Rs 15,000 (i.e 1.5 times of monthly SIP instalment). If SWP amount mentioned on application form is greater than the applicable slab, then it shall lead to rejection of the application. In case investor does not fill in any SWP amount, the default amount shall be as per the applicable slab given above.

- In case no SIP tenure is selected, the default tenure shall be 12 years. In case no SIP date is selected, the default date shall be 10.
- In case, no scheme is mentioned in the target scheme section in Switch-In/ SWP, the SWP shall be triggered from existing source SIP scheme itself.

- SWP Date will be same as the SIP date. The Start date of SWP will be the month following the last SIP instalment date and the SWP End Date will be perpetual i.e. the SWP under this facility shall be processed till units are available in the respective target scheme. In case, the SWP trigger date is a non- business day, the next business day shall be considered as trigger date.
- This facility shall get discontinued in the following events:
  - On cancellation of SIP before the end of tenure, the switch trigger and SWP will cease.
  - In case, redemption / switch-out processed in Source Scheme during the SIP tenure, the Switch trigger and SWP will cease, however SIP shall continue under the source scheme as normal SIP.
  - In case redemption / switch-out is processed in Source Scheme after the SIP tenure till the execution of switch trigger, the switch trigger and the SWP will cease.
- SIP Top-Up and SIP Pause is allowed under this facility. However, SWP would get registered based on the initial SIP instalment amount / slab mentioned in the application form.
- Under a single folio, an investor can have multiple registrations under this facility. However, if investor wishes to invest in multiple schemes, investor shall have to submit separate MITRA SIP registration forms.
- This facility will not be available under DEMAT mode and for Minor investors.

### INSTRUCTIONS TO FILL ONE TIME DEBIT MANDATE (OTM)

- Investors who have already submitted One Time Debit Mandate (OTM) form or already registered for OTM facility should not submit OTM form again as OTM registration is a one-time process only for each bank account in the Folio. However, if such investors wish to add a new bank account towards OTM facility may submit the new OTM form.
- Investors, who have not registered for OTM facility, may fill the OTM form and submit duly signed with their name mentioned (as per bank records).
- Along with OTM, investors should enclose an original CANCELLED cheque (or a copy) with name and account number pre-printed of the bank account to be registered failing which registration may not be accepted.
- First applicant / unitholder must be one of the account holder in the bank account. Investor's cheque / bank account details are subject to third party validation.
- Investors are deemed to have read and understood the terms and conditions of Systematic Investment Plan mentioned in SID, SAI & KIM of the respective Scheme(s) of SBI Mutual Fund.
- UMRN, Sponsor Bank Code and Utility Code are meant for Office use only and need not be filled by investors.
- Please mention OTM date and OTM "From date" in DDMMYYYY format.
- For the convenience of the investors the frequency of the mandate mentioned as "As and When Presented".
- From date & To date is mandatory. However, the maximum duration for enrollment is 30 years.
- Please provide all the information / details in the OTM.

### MANDATORY INFORMATION TO BE PROVIDED IN ONE TIME DEBIT MANDATE (OTM):

- Date of Mandate
- Bank A/c Type
- Bank A/c No. (please enclose CANCELLED cheque leaf)
- Bank Name
- IFSC and/or MICR Code
- Maximum Amount (Rupees and Words)
- Mandate From date
- Mandate To date
- Signature/s of account holders in bank records
- Name/s of account holders as in bank records

### INSTRUCTIONS FOR TOP-UP SIP CAP

- Investor can choose either Top-Up SIP Cap amount (i.e. maximum SIP instalment including Top-Up amount) or Top-Up SIP Cap Month-Year. In case of multiple selection, Top-Up SIP Cap amount will be considered as default selection.
- If none of the above option is selected by the investor, then the Top-Up SIP will continue as per the SIP end date and Top-Up SIP amount specified by the investor and the maximum amount mentioned in OTM Form shall be considered as Top-Up SIP Cap Amount.
- Top-Up SIP CAP (Amount): Investor has an option to freeze the Top-Up SIP CAP amount (i.e. maximum SIP instalment including Top-Up amount) once SIP instalment amount reaches a fixed predefined amount. Maximum Top-Up SIP cap amount should not exceed the maximum amount mentioned in OTM Debit Mandate Form. In case of difference between the Top-Up SIP CAP Amount & the OTM Debit Mandate maximum amount, then amount which is lower of the two shall be considered as the default amount of Top-Up SIP Cap Amount.
- If SIP Top-Up amount reaches the SIP Top-Up Cap amount before the end of SIP tenure, the Top-Up SIP will cease and last SIP instalment amount will remain constant for remaining installments.
- Top-Up SIP Cap (Month-year) : This is the date from which Top-Up SIP Cap amount will cease and last SIP instalment amount will remain constant for remaining installments.

**ANNEXURE I - DETAILS OF ULTIMATE BENEFICIAL OWNER/ CONTROLLING PERSON INCLUDING ADDITIONAL FATCA & CRS INFORMATION**

|                              |             |  |  |  |  |  |  |  |  |  |                       |   |   |   |   |   |   |   |   |   |                   |  |  |  |  |  |  |
|------------------------------|-------------|--|--|--|--|--|--|--|--|--|-----------------------|---|---|---|---|---|---|---|---|---|-------------------|--|--|--|--|--|--|
| Name of the Entity           |             |  |  |  |  |  |  |  |  |  |                       |   |   |   |   |   |   |   |   |   |                   |  |  |  |  |  |  |
| Customer ID / Folio Number   |             |  |  |  |  |  |  |  |  |  |                       |   |   |   |   |   |   |   |   |   |                   |  |  |  |  |  |  |
| PAN                          |             |  |  |  |  |  |  |  |  |  | Date of incorporation | D | D | / | M | M | / | Y | Y | Y | Y                 |  |  |  |  |  |  |
| Type of address given at KRA | Residential |  |  |  |  |  |  |  |  |  | Business              |   |   |   |   |   |   |   |   |   | Registered Office |  |  |  |  |  |  |

\*Address of tax residence would be taken as available in KRA database. In case of any change, please approach KRA & notify the changes"

|                                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|----------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Type of Identification Document given at KRA |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Identification Document No.                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Document Issuing Country                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|                        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Place of incorporation |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

|                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Country of incorporation |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

|                          |                                                                                                                                                                                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Entity Constitution Type | <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<br><i>Please tick as appropriate</i> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                          | <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 _____                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Please tick the applicable tax resident declaration -**

1. Is "Entity" a tax resident of any country other than India ☐ Yes ☐ No

(If yes, please provide all countries in which the entity is a resident for tax purposes and the associated Tax ID number below.)

| Country | Tax Identification Number <sup>%</sup> | Identification Type<br>(TIN or Other, please specify) |
|---------|----------------------------------------|-------------------------------------------------------|
|         |                                        |                                                       |
|         |                                        |                                                       |
|         |                                        |                                                       |

<sup>%</sup> In case Tax Identification Number is not available, kindly provide its functional equivalent. 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 TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.

In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code<sup>3</sup> here

**FATCA & CRS Declaration**

(Please consult your professional tax advisor for further guidance on FATCA & CRS classification)

**PART A (to be filled by Financial Institutions or Direct Reporting NFEs)**

|                                                |                          |                                                                                                                                                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 1. We are a:                                   | GIIN                     |                                                                                                                                                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Financial institution <sup>1</sup>             | <input type="checkbox"/> | 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 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| or                                             |                          |                                                                                                                                                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Direct reporting NFE <sup>2</sup>              | <input type="checkbox"/> | Name of sponsoring entity                                                                                                                                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| (please tick as appropriate)                   |                          |                                                                                                                                                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                |                          |                                                                                                                                                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| GIIN not available (please tick as applicable) | <input type="checkbox"/> | Applied for                                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| (Applicable only for Financial Institutions)   | <input type="checkbox"/> | Not required to apply for - please specify 2 digits sub-category <sup>3</sup>                                                                            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                | <input type="checkbox"/> | Not obtained – Non-participating FI                                                                                                                      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

<sup>1</sup>Refer 1 of Part D | <sup>2</sup>Refer 3(vii) of Part D | <sup>3</sup>Refer 1A of Part D | <sup>4</sup>Refer 3(viii) of Part D

**PART B Ultimate Beneficial Ownership [UBO] / Controlling Persons Declaration****Category**

☐ Our company is a Listed Company on a recognized stock exchange in India / Subsidiary of a or Controlled by a Listed Company [If this category is selected, no need to provide UBO details].

Name of the Stock Exchange where it is listed#.

Security ISIN#

Name of the Listed Company (applicable if the investor is subsidiary/associate):

#mandatory in case of Listed company or subsidiary of the Listed Company

|                                           |                                                 |                                                                           |                                                        |
|-------------------------------------------|-------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Unlisted Company | <input type="checkbox"/> Partnership Firm / LLP | <input type="checkbox"/> Unincorporated association / body of individuals | <input type="checkbox"/> Public Charitable Trust       |
| <input type="checkbox"/> Private Trust    | <input type="checkbox"/> Religious Trust        | <input type="checkbox"/> Trust created by a Will                          | <input type="checkbox"/> Others [please specify] _____ |

**PART C UBO / Controlling Person(s) details****Does your company/entity have any individual person(s) who holds direct / indirect controlling ownership above the prescribed threshold limit?**☐ Yes ☐ No

If '**YES**' - We hereby declare that the following individual person holds directly / indirectly controlling ownership in our entity above the prescribed threshold limit. Details of such individual(s) are given below. **BEN2 form as downloaded from MCA portal is attached as documentary evidence of the UBO information or any other applicable supporting documents like shareholding pattern of the entity and its associates. Further, we hereby consent to submitting the appropriate documentary evidence substantiating this as and when required at AMC/RTA end.**

If '**NO**' - declare that no individual person (directly / indirectly) holds controlling ownership in our entity above the prescribed threshold limit. Details of the individual who holds the position of Senior Managing Official (SMO) are provided below.

|                                                                      | UBO-1 / Senior Managing Official (SMO)                                                                                                                                                                    | UBO-2                                                                                                                                                                                                     | UBO-3                                                                                                                                                                                                     |
|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of the UBO/SMO#.                                                |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| UBO / SMO PAN#<br>For Foreign National, TIN to be provided]          |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| % of beneficial interest#.                                           | >10% controlling interest <input type="checkbox"/><br>>15% controlling interest <input type="checkbox"/><br>>25% controlling interest. <input type="checkbox"/><br>NA. (for SMO) <input type="checkbox"/> | >10% controlling interest <input type="checkbox"/><br>>15% controlling interest <input type="checkbox"/><br>>25% controlling interest. <input type="checkbox"/><br>NA. (for SMO) <input type="checkbox"/> | >10% controlling interest <input type="checkbox"/><br>>15% controlling interest <input type="checkbox"/><br>>25% controlling interest. <input type="checkbox"/><br>NA. (for SMO) <input type="checkbox"/> |
| UBO / SMO Country of Tax Residency#.                                 |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| UBO / SMO Taxpayer Identification Number / Equivalent ID Number#.    |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| UBO / SMO Identity Type                                              |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| UBO / SMO Place & Country of Birth#                                  | Place of Birth _____<br>Country of Birth _____                                                                                                                                                            | Place of Birth _____<br>Country of Birth _____                                                                                                                                                            | Place of Birth _____<br>Country of Birth _____                                                                                                                                                            |
| UBO / SMO Nationality                                                |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| UBO / SMO Date of Birth [dd-mmm-yyyy] #                              |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| UBO / SMO PEP#                                                       | Yes – PEP. <input type="checkbox"/><br>Yes – Related to PEP. <input type="checkbox"/><br>N – Not a PEP. <input type="checkbox"/>                                                                          | Yes – PEP. <input type="checkbox"/><br>Yes – Related to PEP. <input type="checkbox"/><br>N – Not a PEP. <input type="checkbox"/>                                                                          | Yes – PEP. <input type="checkbox"/><br>Yes – Related to PEP. <input type="checkbox"/><br>N – Not a PEP. <input type="checkbox"/>                                                                          |
| UBO / SMO Address<br>[include City, Pincode, State, Country]         | Address:<br><br>City:<br>Pincode:<br>State:<br>Country:                                                                                                                                                   | Address:<br><br>City:<br>Pincode:<br>State:<br>Country:                                                                                                                                                   | Address:<br><br>City:<br>Pincode:<br>State:<br>Country:                                                                                                                                                   |
| UBO / SMO Address Type                                               | Residence <input type="checkbox"/><br>Business <input type="checkbox"/><br>Registered Office <input type="checkbox"/>                                                                                     | Residence <input type="checkbox"/><br>Business <input type="checkbox"/><br>Registered Office <input type="checkbox"/>                                                                                     | Residence <input type="checkbox"/><br>Business <input type="checkbox"/><br>Registered Office <input type="checkbox"/>                                                                                     |
| UBO / SMO Email                                                      |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| UBO / SMO Mobile                                                     |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| UBO / SMO Gender                                                     | Male <input type="checkbox"/><br>Female <input type="checkbox"/><br>Others <input type="checkbox"/>                                                                                                       | Male <input type="checkbox"/><br>Female <input type="checkbox"/><br>Others <input type="checkbox"/>                                                                                                       | Male <input type="checkbox"/><br>Female <input type="checkbox"/><br>Others <input type="checkbox"/>                                                                                                       |
| UBO / SMO Father's Name                                              |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| UBO / SMO Occupation                                                 | Public Service <input type="checkbox"/><br>Private Service <input type="checkbox"/><br>Business <input type="checkbox"/><br>Others <input type="checkbox"/>                                               | Public Service <input type="checkbox"/><br>Private Service <input type="checkbox"/><br>Business <input type="checkbox"/><br>Others <input type="checkbox"/>                                               | Public Service <input type="checkbox"/><br>Private Service <input type="checkbox"/><br>Business <input type="checkbox"/><br>Others <input type="checkbox"/>                                               |
| SMO Designation#                                                     |                                                                                                                                                                                                           |                                                                                                                                                                                                           |                                                                                                                                                                                                           |
| UBO / SMO KYC Complied?                                              | Yes / No.<br>If 'Yes,' please attach the KYC acknowledgement.<br>If 'No,' complete the KYC and confirm the status                                                                                         | Yes / No.<br>If 'Yes,' please attach the KYC acknowledgement.<br>If 'No,' complete the KYC and confirm the status.                                                                                        | Yes / No.<br>If 'Yes,' please attach the KYC acknowledgement.<br>If 'No,' complete the KYC and confirm the status.                                                                                        |
| BEN2 Form or any other relevant supporting documents as applicable** | Attached <input type="checkbox"/>                                                                                                                                                                         | Attached <input type="checkbox"/>                                                                                                                                                                         | Attached <input type="checkbox"/>                                                                                                                                                                         |

# Mandatory column.

Note: If the given columns are not sufficient, required information in the given format can be enclosed as additional sheet(s) duly signed by Authorized Signatory.

\* Participating Mutual Fund(s) / RTA may call for additional information/documentation wherever required or if the given information is not clear / incomplete / correct and you may provide the same as and when solicited.

\*\* Documentary proof for UBO.

### FATCA - CRS Terms and Conditions

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/Mutual Fund to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

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 SBI Mutual Fund 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.

If you have any questions about your tax residency, please contact your tax advisor. If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the US Tax Identification Number.

#### Declaration

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false, untrue, misleading, or misrepresenting, I/We am/are aware that I/We may be liable for it including any penalty levied by the statutory/legal/regulatory authority. I/We hereby confirm the above beneficial interest after perusing all applicable shareholding pattern and MF/RTA/other registered intermediaries can make reliance on the same. I/We hereby authorize you [RTA/Fund/AMC/Other participating entities] 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/us of the same. Further, I/We 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/We also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of such changes and undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/ tax authorities.

Signature with relevant seal

| Authorized Signatory | Authorized Signatory | Authorized Signatory |
|----------------------|----------------------|----------------------|
| Name:                | Name:                | Name:                |
| Designation:         | Designation:         | Designation:         |

Place: \_\_\_\_\_

Date: \_\_/ \_\_/ \_\_

## PART D FATCA and CRS Instructions & Definitions

### 1 Financial Institution (FI) - The term FI means any financial institution that is a Depository Institution, Custodial Institution, Investment Entity or Specified Insurance company, as defined.

- Depository institution: is an entity that accepts deposits in the ordinary course of banking or similar business.
- Custodial institution is an entity that holds as a substantial portion of its business, holds financial assets for the account of others and where its income attributable to holding financial assets and related financial services equals or exceeds 20 percent of the entity's gross income during the shorter of:
  - (i) The three financial years preceding the year in which determination is made; or
  - (ii) The period during which the entity has been in existence, whichever is less.
- Investment entity is any entity:
  - That primarily conducts a business or operates for or on behalf of a customer for any of the following activities or operations for or on behalf of a customer
    - (I) Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rate and index instruments; transferable securities; or commodity futures trading; or
    - (ii) Individual and collective portfolio management; or
    - (iii) Investing, administering or managing funds, money or financial asset or money on behalf of other persons;
  - or
  - The gross income of which is primarily attributable to investing, reinvesting, or trading in financial assets, if the entity is managed by another entity that is a depository institution, a custodial institution, a specified insurance company, or an investment entity described above.

An entity is treated as primarily conducting as a business one or more of the 3 activities described above, or an entity's gross income is primarily attributable to investing, reinvesting, or trading in financial assets of the entity's gross income attributable to the relevant activities equals or exceeds 50 percent of the entity's gross income during the shorter of :

- (i) The three-year period ending on 31 March of the year preceding the year in which the determination is made; or
- (ii) The period during which the entity has been in existence.

The term "Investment Entity" does not include an entity that is an active non-financial entity as per codes 03, 04, 05 and 06 - refer point 2c.)

- Specified Insurance Company: Entity that is an insurance company (or the holding company of an insurance company) that issues, or is obligated to make payments with respect to, a Cash Value Insurance Contract or an Annuity Contract.

|                                                |                                                                                                                                                                                                         |
|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A. FI not required to apply for GIIN:          |                                                                                                                                                                                                         |
| Reasons why FI not required to apply for GIIN: |                                                                                                                                                                                                         |
| <i>Code</i>                                    | <i>Sub-category</i>                                                                                                                                                                                     |
| 01                                             | Governmental Entity, International Organization or Central Bank                                                                                                                                         |
| 02                                             | Treaty Qualified Retirement Fund; a Broad Participation Retirement Fund; a Narrow Participation Retirement Fund; or a Pension Fund of a Governmental Entity, International Organization or Central Bank |
| 03                                             | Non-public fund of the armed forces, an employees' state insurance fund, a gratuity fund or a provident fund                                                                                            |
| 04                                             | Entity is an Indian FI solely because it is an investment entity                                                                                                                                        |
| 05                                             | Qualified credit card issuer                                                                                                                                                                            |
| 06                                             | Investment Advisors, Investment Managers& Executing Brokers                                                                                                                                             |
| 07                                             | Exempt collective investment vehicle                                                                                                                                                                    |
| 08                                             | Trustee of an Indian Trust                                                                                                                                                                              |
| 09                                             | FI with a local client base                                                                                                                                                                             |
| 10                                             | Non-registering local banks                                                                                                                                                                             |
| 11                                             | FFI with only Low-ValueAccounts                                                                                                                                                                         |
| 12                                             | Sponsored investment entity and controlled foreign corporation                                                                                                                                          |
| 13                                             | Sponsored, Closely Held Investment Vehicle                                                                                                                                                              |
| 14                                             | Owner Documented FFI (Please provide Owner Reporting Statement or Auditor's Letter with required details as mentioned in Form W8 BEN E)                                                                 |

### 2. Non-financial entity (NFE) - Any entity that is not a financial institution

Types of NFEs that are regarded as excluded NFE are:

- a. *Publicly traded company (listed company)*  
A company is publicly traded if its stock are regularly traded on one or more established securities markets (Established securities market means an exchange that is officially recognized and supervised by a governmental authority in which the securities market is located and that has a meaningful annual value of shares traded on the exchange)
- b. *Related entity of a publicly traded company*  
The NFE is a related entity of an entity of which is regularly traded on an established securities market;

| C. Active NFE : (is any one of the following): |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Code                                           | Sub-category                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 01                                             | Less than 50 percent of the NFE's gross income for the preceding financial year is passive income and less than 50 percent of the assets held by the NFE during the preceding financial year are assets that produce or are held for the production of passive income;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 02                                             | The NFE is a Governmental Entity, an International Organization, a Central Bank , or an entity wholly owned by one or more of the foregoing;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 03                                             | Substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an entity shall not qualify for this status if the entity functions as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 04                                             | The NFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFE shall not qualify for this exception after the date that is 24 months after the date of the initial organization of the NFE;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 05                                             | The NFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganizing with the intent to continue or recommence operations in a business other than that of a Financial Institution;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 06                                             | The NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 07                                             | <p>Any NFE that fulfills all of the following requirements:</p> <ul style="list-style-type: none"> <li>It is established and operated in India exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in India and it is a professional organization, business league, chamber of commerce, labor organization, agricultural or horticultural organization, civic league or an organization operated exclusively for the promotion of social welfare;</li> <li>It is exempt from income tax in India;</li> <li>It has no shareholders or members who have a proprietary or beneficial interest in its income or assets;</li> </ul> <p>The applicable laws of the NFE's country or territory of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity other than pursuant to the conduct of the NFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFE has purchased; and</p> <p>The applicable laws of the NFE's country or territory of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all of its assets be distributed to a governmental entity or other non-profit organization, or escheat to the government of the NFE's country or territory of residence or any political subdivision thereof.</p> <p>Explanation.- For the purpose of this sub-clause, the following shall be treated as fulfilling the criteria provided in the said sub-clause, namely:-</p> <p>(I) an Investor Protection Fund referred to in clause (23EA);</p> <p>(II) a Credit Guarantee Fund Trust for Small Industries referred to in clause 23EB; and</p> <p>(III) an Investor Protection Fund referred to in clause (23EC), of section 10 of the Act;</p> |

### 3. Other definitions

|                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (i) <i>Related entity</i>   | An entity is a 'related entity' of another entity if either entity controls the other entity, or the two entities are under common control. For this purpose, control includes direct or indirect ownership of more than 50% of the votes and value in an entity.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| (ii) <i>Passive NFE</i>     | <p>The term passive NFE means</p> <ul style="list-style-type: none"> <li>(i) any non-financial entity which is not an active non-financial entity including a publicly traded corporation or related entity of a publicly traded company; or</li> <li>(ii) an investment entity defined in clause 1 of part D of these instructions</li> <li>(iii) a withholding foreign partnership or withholding foreign trust;</li> </ul> <p>(Note: Foreign persons having controlling interest in a passive NFE are liable to be reported for tax information compliance purposes)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| (iii) <i>Passive income</i> | <p>The term passive income includes income by way of:</p> <ul style="list-style-type: none"> <li>(1) Dividends,</li> <li>(2) Interest</li> <li>(3) Income equivalent to interest,</li> <li>(4) Rents and royalties, other than rents and royalties derived in the active conduct of a business conducted, at least in part, by employees of the NFE</li> <li>(5) Annuities</li> <li>(6) The excess of gains over losses from the sale or exchange of financial assets that gives rise to passive income</li> <li>(7) The excess of gains over losses from transactions (including futures, forwards, options and similar transactions) in any financial assets,</li> <li>(8) The excess of foreign currency gains over foreign currency losses</li> <li>(9) Net income from swaps</li> <li>(10) Amounts received under cash value insurance contracts</li> </ul> <p>But passive income will not include, in case of a non-financial entity that regularly acts as a dealer in financial assets, any income from any transaction entered into in the ordinary course of such dealer's business as such a dealer</p> |

(iv) *Controlling persons*

Controlling persons are natural persons who exercise control over an entity and includes a beneficial owner under sub-rule (3) of rule 9 of the Prevention of Money-Laundering (Maintenance of Records) Rules, 2005. In the case of a trust, the controlling person means the settlor, the trustees, the protector (if any), the beneficiaries or class of beneficiaries, and any other natural person exercising ultimate effective control over the trust. In the case of a legal arrangement other than a trust, controlling person means persons in equivalent or similar positions.

Pursuant to guidelines on identification of Beneficial Ownership issued vide Prevention of Money-laundering (Maintenance of Records) Amendment Rules, 2023 dated March 7, 2023, persons (other than Individuals) are required to provide details of Beneficial Owner(s) ('BO'). Accordingly, the Beneficial Owner means 'Natural Person', who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest of / entitlements to:

- i. More than 10% of shares or capital or profits of the juridical person, where the juridical person is a company;
- ii. More than 15% of the capital or profits of the juridical person, where the juridical person is a partnership; or
- iii. More than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.

Where the client is a trust, the financial institution shall identify the beneficial owners of the client and take reasonable measures to verify the identity of such persons, through the identity of the settlor of the trust, the trustee, the protector, the beneficiaries with 10% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

Where no natural person is identified the identity of the relevant natural person who holds the position of senior managing official.

| (A) Controlling Person Type: |                                                      |
|------------------------------|------------------------------------------------------|
| Code                         | Sub-category                                         |
| 01                           | CP of legal person-ownership                         |
| 02                           | CP of legal person-other means                       |
| 03                           | CP of legal person-senior managing official          |
| 04                           | CP of legal arrangement-trust-settlor                |
| 05                           | CP of legal arrangement--trust-trustee               |
| 06                           | CP of legal arrangement--trust-protector             |
| 07                           | CP of legal arrangement--trust-beneficiary           |
| 08                           | CP of legal arrangement--trust-other                 |
| 09                           | CP of legal arrangement—Other-settlor equivalent     |
| 10                           | CP of legal arrangement—Other-trustee equivalent     |
| 11                           | CP of legal arrangement—Other-protector equivalent   |
| 12                           | CP of legal arrangement—Other-beneficiary equivalent |
| 13                           | CP of legal arrangement—Other-other equivalent       |
| 14                           | Unknown                                              |

(v) *Specified U.S. person – A U.S. person other than the following:*

- (i) a corporation the stock of which is regularly traded on one or more established securities markets;
- (ii) any corporation that is a member of the same expanded affiliated group, as defined in section 1471(e)(2) of the U.S. Internal Revenue Code, as a corporation described in clause (i);
- (iii) the United States or any wholly owned agency or instrumentality thereof;
- (iv) any State of the United States, any U.S. Territory, any political subdivision of any of the foregoing, or any wholly owned agency or instrumentality of any one or more of the foregoing;
- (v) any organization exempt from taxation under section 501(a) of the U.S. Internal Revenue Code or an individual retirement plan as defined in section 7701(a)(37) of the U.S. Internal Revenue Code;
- (vi) any bank as defined in section 581 of the U.S. Internal Revenue Code;
- (vii) any real estate investment trust as defined in section 856 of the U.S. Internal Revenue Code;
- (viii) any regulated investment company as defined in section 851 of the U.S. Internal Revenue Code or any entity registered with the U.S. Securities and Exchange Commission under the Investment Company Act of 1940 (15 U.S.C. 80a-64);
- (ix) any common trust fund as defined in section 584(a) of the U.S. Internal Revenue Code;
- (x) any trust that is exempt from tax under section 664(c) of the U.S. Internal Revenue Code or that is described in section 4947(a)(1) of the U.S. Internal Revenue Code;
- (xi) a dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any State;
- (xii) a broker as defined in section 6045(c) of the U.S. Internal Revenue Code; or
- (xiii) any tax-exempt trust under a plan that is described in section 403(b) or section 457(g) of the U.S. Internal Revenue Code.

(vi) *Owner documented FFI*

An FFI meets the following requirements:

- (a) The FFI is an FFI solely because it is an investment entity;
- (b) The FFI is not owned by or related to any FFI that is a depository institution, custodial institution, or specified insurance company;
- (c) The FFI does not maintain a financial account for any non participating FFI;
- (d) The FFI provides the designated withholding agent with all of the documentation and agrees to notify the withholding agent if there is a change in circumstances; and
- (e) The designated withholding agent agrees to report to the IRS (or, in the case of a reporting Model 1 IGA, to the relevant foreign government or agency thereof) all of the information described in or (as appropriate) with respect to any specified U.S. persons and (2). Notwithstanding the previous sentence, the designated withholding agent is not required to report information with respect to an indirect owner of the FFI that holds its interest through a participating FFI, a deemed-compliant FFI (other than an owner-documented FFI), an entity that is a U.S. person, an exempt beneficial owner, or an excepted NFE.

(vii) *Direct reporting NFE*

A direct reporting NFE means a NFE that elects to report information about its direct or indirect substantial U.S. owners to the IRS.

(viii) *Exemption code for U.S. persons*

| Code | Sub-category                                                                                                                                                                                                                  |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A    | An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)                                                                                                      |
| B    | The United States or any of its agencies or instrumentalities                                                                                                                                                                 |
| C    | A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities                                                                                             |
| D    | A corporation the stock of which is regularly traded on one or more established securities markets, as described in Reg. section 1.1472-1(c)(1)(i)                                                                            |
| E    | A corporation that is a member of the same expanded affiliated group as a corporation described in Reg. section 1.1472-1(c)(1)(i)                                                                                             |
| F    | A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state |
| G    | A real estate investment trust                                                                                                                                                                                                |
| H    | A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940                                                                    |
| I    | A common trust fund as defined in section 584(a)                                                                                                                                                                              |
| J    | A bank as defined in section 581                                                                                                                                                                                              |
| K    | A broker                                                                                                                                                                                                                      |
| L    | A trust exempt from tax under section 664 or described in section 4947(a)(1)                                                                                                                                                  |
| M    | A tax exempt trust under a section 403(b) plan or section 457(g) plan                                                                                                                                                         |

## INSTRUCTIONS ON CONTROLLING PERSONS / ULTIMATE BENEFICIAL OWNER

As per PMLA guidelines and relevant SEBI circulars issued from time to time, non-individuals and trusts are required to provide details of controlling persons [CP] / ultimate beneficiary owner [UBO] and submit appropriate proof of identity of such CPs/ UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own, control or influence a client and/or persons on whose behalf a transaction is being conducted and includes a person who exercises ultimate effective control over a legal person or arrangement.

### A. For Investors other than individuals or trusts:

- (i) The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of/entitlement to:
  - more than 10% of shares or capital or profits of the juridical person, where the juridical person is a company.
  - more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership.
  - more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.
- (ii) In cases where there exists doubt under clause (i) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means like through voting rights, agreement, arrangements or in any other manner.
- (iii) Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official.

### B. For Investors which is a trust:

The identity of the settler of the trust, the trustee, the protector, the beneficiaries with 10% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

### C. Exemption in case of listed companies / foreign investors

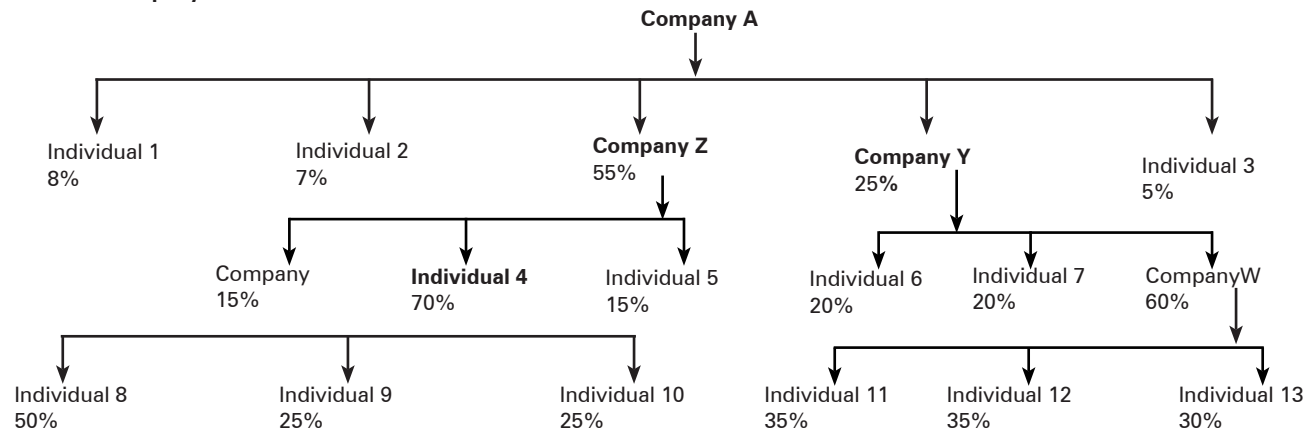
The client or the owner of the controlling interest is a company listed on a stock exchange or is a majority-owned subsidiary of such a company, there is no need for identification and verification of the identity of any shareholder or beneficial owner of such companies and hence exempted from UBO declaration provided other requisite information is provided. Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/MIRSD/11/2012 dated September 5, 2012 and other circulars issued from time to time, for the purpose of identification of beneficial ownership of the client.

### D. KYC requirements

Beneficial Owner(s) / Senior Managing Official (SMO) is/are required to comply with the prescribed KYC process as stipulated by SEBI from time to time with any one of the KRA & submit the same to AMC. KYC acknowledgement proof is to be submitted for all the UBO(s) / SMO(s).

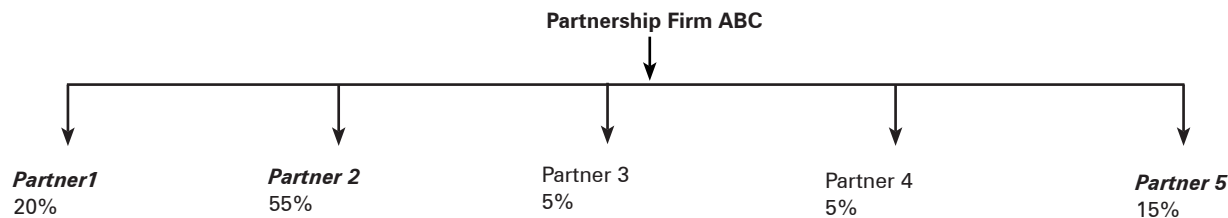
Sample Illustrations for ascertaining beneficial ownership:

Illustration No. 1 – Company A



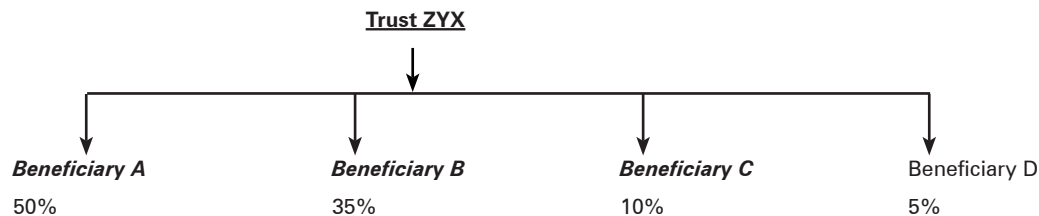
For Applicant A, Individual 4 is considered as UBO as it holds effective ownership of 38.50% in Company A. Hence details of Individual 4 must be provided with KYC proof, Shareholding pattern of Company A, Z & Y to be provided along with details of persons of Company Y who are senior managing officials and those exercising control.

Illustration No. 2 – Partner ABC



For Partnership Firm ABC, Partners 1, 2 and 5 are considered as UBO as each of them holds  $\geq 15\%$  of capital. KYC proof of these partners needs to be submitted including shareholding.

Illustration No. 3 – Trustee ZYX



For Trust ZYX, Beneficiaries A, B and C are considered as UBO as they are entitled to get benefitted for  $> 10\%$  of funds used. KYC proof for these beneficiaries needs to be submitted. Additionally, if they have nominated any person or group of persons as Settlor of Trust / Protector of Trust, relevant information to be provided along with the proof indicated.

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**ANNEXURE II - Additional KYC-FATCA & CRS Form for Individuals**

 (To be enclosed with purchase application which do not have provision for additional KYC/FATCA/CRS information)  
 (Please fill in BLOCK Letters)

**1. APPLICANT DETAILS**

|                                              | First Applicant / Guardian                                                |                                            |  |  | Second Applicant                                                          |                                            |  |  | Third Applicant                                                           |                                            |  |  |
|----------------------------------------------|---------------------------------------------------------------------------|--------------------------------------------|--|--|---------------------------------------------------------------------------|--------------------------------------------|--|--|---------------------------------------------------------------------------|--------------------------------------------|--|--|
| Applicant's Name                             |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Applicant's PAN                              |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Gender                                       |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Date of Birth                                |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Father's Name                                |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Spouse's Name                                |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Nationality                                  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Place of Birth                               |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Country of Birth                             |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Type of address given at KRA                 | <input type="checkbox"/> Residential<br><input type="checkbox"/> Business | <input type="checkbox"/> Registered Office |  |  | <input type="checkbox"/> Residential<br><input type="checkbox"/> Business | <input type="checkbox"/> Registered Office |  |  | <input type="checkbox"/> Residential<br><input type="checkbox"/> Business | <input type="checkbox"/> Registered Office |  |  |
| Type of Identification Document given at KRA |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Identification Document No.                  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |
| Document Issuing Country                     |                                                                           |                                            |  |  |                                                                           |                                            |  |  |                                                                           |                                            |  |  |

Address of tax residences would be taken as available in KRA database. In case of any change please approach KRA &amp; notify the changes.

**2. ADDITIONAL KYC INFORMATION**

| Category                                            | First Applicant / Guardian                      |                                         |                                                  |   | Second Applicant                                |                                         |                                                  |   | Third Applicant                                 |                                         |                                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------------------------------------|-------------------------------------------------|-----------------------------------------|--------------------------------------------------|---|-------------------------------------------------|-----------------------------------------|--------------------------------------------------|---|-------------------------------------------------|-----------------------------------------|--------------------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Gross Annual Income in Rs.                          | <input type="checkbox"/> Below 1 Lakh           | <input type="checkbox"/> 10-25 Lacs     |                                                  |   | <input type="checkbox"/> Below 1 Lakh           | <input type="checkbox"/> 10-25 Lacs     |                                                  |   | <input type="checkbox"/> Below 1 Lakh           | <input type="checkbox"/> 10-25 Lacs     |                                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <b>OR</b>                                           | <input type="checkbox"/> 1-5 Lacs               | <input type="checkbox"/> 25 Lacs - 1 Cr |                                                  |   | <input type="checkbox"/> 1-5 Lacs               | <input type="checkbox"/> 25 Lacs - 1 Cr |                                                  |   | <input type="checkbox"/> 1-5 Lacs               | <input type="checkbox"/> 25 Lacs - 1 Cr |                                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                                                     | <input type="checkbox"/> 5-10 Lacs              | <input type="checkbox"/> > 1 Crore      |                                                  |   | <input type="checkbox"/> 5-10 Lacs              | <input type="checkbox"/> > 1 Crore      |                                                  |   | <input type="checkbox"/> 5-10 Lacs              | <input type="checkbox"/> > 1 Crore      |                                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Net Worth in Rs.                                    |                                                 |                                         |                                                  |   |                                                 |                                         |                                                  |   |                                                 |                                         |                                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Net Worth as of                                     | D                                               | D                                       | M                                                | M | Y                                               | Y                                       | Y                                                | Y | D                                               | D                                       | M                                                | M | Y | Y | Y | Y | D | D | M | M | Y | Y | Y | Y |
| Occupation [Please tick any one (✓)]                | <input type="checkbox"/> Professional           |                                         | <input type="checkbox"/> Retired                 |   | <input type="checkbox"/> Professional           |                                         | <input type="checkbox"/> Retired                 |   | <input type="checkbox"/> Professional           |                                         | <input type="checkbox"/> Retired                 |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                                                     | <input type="checkbox"/> Business               |                                         | <input type="checkbox"/> Housewife               |   | <input type="checkbox"/> Business               |                                         | <input type="checkbox"/> Housewife               |   | <input type="checkbox"/> Business               |                                         | <input type="checkbox"/> Housewife               |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                                                     | <input type="checkbox"/> Government Service     |                                         | <input type="checkbox"/> Student                 |   | <input type="checkbox"/> Government Service     |                                         | <input type="checkbox"/> Student                 |   | <input type="checkbox"/> Government Service     |                                         | <input type="checkbox"/> Student                 |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                                                     | <input type="checkbox"/> Private Sector Service |                                         | <input type="checkbox"/> Forex Dealer            |   | <input type="checkbox"/> Private Sector Service |                                         | <input type="checkbox"/> Forex Dealer            |   | <input type="checkbox"/> Private Sector Service |                                         | <input type="checkbox"/> Forex Dealer            |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                                                     | <input type="checkbox"/> Public Sector Service  |                                         | <input type="checkbox"/> Doctor                  |   | <input type="checkbox"/> Public Sector Service  |                                         | <input type="checkbox"/> Doctor                  |   | <input type="checkbox"/> Public Sector Service  |                                         | <input type="checkbox"/> Doctor                  |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                                                     | <input type="checkbox"/> Agriculturist          |                                         | <input type="checkbox"/> Others [Please specify] |   | <input type="checkbox"/> Agriculturist          |                                         | <input type="checkbox"/> Others [Please specify] |   | <input type="checkbox"/> Agriculturist          |                                         | <input type="checkbox"/> Others [Please specify] |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Politically Exposed Person [PEP]                    | <input type="checkbox"/> Yes                    | <input type="checkbox"/> No             | <input type="checkbox"/> Related to PEP          |   | <input type="checkbox"/> Yes                    | <input type="checkbox"/> No             | <input type="checkbox"/> Related to PEP          |   | <input type="checkbox"/> Yes                    | <input type="checkbox"/> No             | <input type="checkbox"/> Related to PEP          |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Any other information relating to KYC if applicable | [Please specify]                                |                                         |                                                  |   | [Please specify]                                |                                         |                                                  |   | [Please specify]                                |                                         |                                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |

**3. FATCA INFORMATION**

 Is your Country of Birth / Citizenship / Nationality / Tax Residency other than India? – ☐ Yes ☐ No  
 If Yes, please provide the following information [mandatory]

| Category                                           | First Applicant / Guardian | Second Applicant | Third Applicant |
|----------------------------------------------------|----------------------------|------------------|-----------------|
| Country of Tax Residency 1*                        |                            |                  |                 |
| Tax Identification Number#                         |                            |                  |                 |
| Identification Type (TIN or Other, please specify) |                            |                  |                 |
| Country of Tax Residency 2*                        |                            |                  |                 |
| Tax Identification Number#                         |                            |                  |                 |
| Identification Type (TIN or Other, please specify) |                            |                  |                 |
| Country of Tax Residency 3*                        |                            |                  |                 |
| Tax Identification Number#                         |                            |                  |                 |
| Identification Type (TIN or Other, please specify) |                            |                  |                 |

(Please attach additional sheets if necessary and mention all countries in which applicant is a tax resident &amp; provide relevant details)

\*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

\* To also included USA, where the individual is a citizen/green card holder of the USA

**4. DECLARATION**

I/We confirm that the information provided in this form is true & accurate. In the event any of the above information is / are found to be false / incorrect and /or the declaration is not provided, then the AMC/Trustee/Mutual Fund shall reserve the right to reject the application and / or reverse the allotment of units and the AMC / Trustee / Mutual Fund shall not be liable for the same / I/We will be liable for the consequences arising therefrom. I/We shall keep you forthwith informed in writing about any changes/modification to the information provided or any other additional information as may be required by you from time to time; Towards compliance with tax information sharing laws, such as FATCA and CRS: (a) the Fund may be required to seek additional personal, tax and certain certifications and documentation from investors. I/We ensure to advise you within 30 days should there be any change in any information provided; (b) In certain circumstances (including if the Fund does not receive a valid self-certification from me) the Fund may be obliged to share information on my account with relevant tax authorities; (c) I/We am/are aware that the Fund may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto; (d) as may be required by domestic or overseas regulators/ tax authorities, the Fund may also be constrained to withhold and pay out any sums from my/our account or close or suspend my account(s) and (e) I/We understand that I am / we are required to contact my tax advisor for any questions about my/our tax residency.

|                                                   |                        |               |               |
|---------------------------------------------------|------------------------|---------------|---------------|
| <b>SIGNATURE(S)</b><br>(ALL Applicants must sign) | ⊗                      | ⊗             | ⊗             |
|                                                   | 1st Applicant/Guardian | 2nd Applicant | 3rd Applicant |
| Date                                              |                        |               | Place         |

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**Annexure - III Declaration Form of Non-Profit Organization (NPO) (Mandatory for Trusts/Society)**

|               |  |  |  |  |  |  |  |  |  |  |
|---------------|--|--|--|--|--|--|--|--|--|--|
| Investor Name |  |  |  |  |  |  |  |  |  |  |
|               |  |  |  |  |  |  |  |  |  |  |
| PAN           |  |  |  |  |  |  |  |  |  |  |

☐ I/We hereby confirm that above stated entity / organization is falling under **"Non-profit organization"** [NPO] which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013).

☐ Enclosed relevant documentary proof evidencing the above definition.

We further confirm that we have registered with DARPAN Portal of NITI Aayog as NPO and registration details are as follows:

|                                      |                                                          |
|--------------------------------------|----------------------------------------------------------|
| Registration Number of DARPAN portal | <Unique ID provided by DARPAN portal should be provided> |
|--------------------------------------|----------------------------------------------------------|

If not, please register immediately and confirm with the above information. In absence of receipt of the Darpan portal registration details, MF/AMC/RTA will be required to register your entity on the said portal and/or report to the relevant authorities as applicable.

☐ I/We hereby confirm that the above stated entity / organization is **NOT** falling under Non-profit organization as defined above or in PMLA Act/Rules thereof.

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may be liable for it for any fines or consequences as required under the respective statutory requirements and authorize you to deduct such fines/charges under intimation to me/us or collect such fines/charges in any other manner as might be applicable. I/We hereby authorize you [RTA/Fund/AMC/Other participating entities] 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 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/us of the same. Further, I/We authorize to share the given information to other SEBI Registered Intermediaries or any other statutory authorities to facilitate single submission / update & for regulatory purposes. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of such changes and undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/ tax authorities.

Signature with relevant seal:

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| Authorized Signatory | Authorized Signatory | Authorized Signatory |
|----------------------|----------------------|----------------------|

Place: \_\_\_\_\_

Date: \_\_/\_\_/\_\_\_\_

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**ANNEXURE IV - Additional KYC Form for Power of Attorney [POA] Holder(s)**

(Mandatory for POA Holder(s))

(Please fill in BLOCK Letters)

**1. APPLICANT & POA HOLDER DETAILS**

|                    | First Applicant / Guardian | Second Applicant | Third Applicant |
|--------------------|----------------------------|------------------|-----------------|
| Applicant Name     |                            |                  |                 |
| Applicant PAN      |                            |                  |                 |
| POA Holder Name    |                            |                  |                 |
| POA Holder PAN     |                            |                  |                 |
| POA Holder Address |                            |                  |                 |

**2. ADDITIONAL KYC INFORMATION**

| Category                                            | PoA Holder 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | PoA Holder 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | PoA Holder 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Gross Annual Income in Rs.<br><br><b>OR</b>         | <input type="checkbox"/> Below 1 Lakh<br><input type="checkbox"/> 1-5 Lacs<br><input type="checkbox"/> 5-10 Lacs<br><input type="checkbox"/> 10-25 Lacs<br><input type="checkbox"/> 25 Lacs - 1 Cr<br><input type="checkbox"/> > 1 Crore                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Below 1 Lakh<br><input type="checkbox"/> 1-5 Lacs<br><input type="checkbox"/> 5-10 Lacs<br><input type="checkbox"/> 10-25 Lacs<br><input type="checkbox"/> 25 Lacs - 1 Cr<br><input type="checkbox"/> > 1 Crore                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Below 1 Lakh<br><input type="checkbox"/> 1-5 Lacs<br><input type="checkbox"/> 5-10 Lacs<br><input type="checkbox"/> 10-25 Lacs<br><input type="checkbox"/> 25 Lacs - 1 Cr<br><input type="checkbox"/> > 1 Crore                                                                                                                                                                                                                                                                                        |
| Net Worth in Rs.                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Net Worth as of                                     | D D M M Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | D D M M Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | D D M M Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Occupation [Please tick any one (√)]                | <input type="checkbox"/> Professional<br><input type="checkbox"/> Business<br><input type="checkbox"/> Government Service<br><input type="checkbox"/> Private Sector Service<br><input type="checkbox"/> Public Sector Service<br><input type="checkbox"/> Agriculturist<br><input type="checkbox"/> Retired<br><input type="checkbox"/> Housewife<br><input type="checkbox"/> Student<br><input type="checkbox"/> Forex Dealer<br><input type="checkbox"/> Doctor<br><input type="checkbox"/> Others [Please specify]<br>_____ | <input type="checkbox"/> Professional<br><input type="checkbox"/> Business<br><input type="checkbox"/> Government Service<br><input type="checkbox"/> Private Sector Service<br><input type="checkbox"/> Public Sector Service<br><input type="checkbox"/> Agriculturist<br><input type="checkbox"/> Retired<br><input type="checkbox"/> Housewife<br><input type="checkbox"/> Student<br><input type="checkbox"/> Forex Dealer<br><input type="checkbox"/> Doctor<br><input type="checkbox"/> Others [Please specify]<br>_____ | <input type="checkbox"/> Professional<br><input type="checkbox"/> Business<br><input type="checkbox"/> Government Service<br><input type="checkbox"/> Private Sector Service<br><input type="checkbox"/> Public Sector Service<br><input type="checkbox"/> Agriculturist<br><input type="checkbox"/> Retired<br><input type="checkbox"/> Housewife<br><input type="checkbox"/> Student<br><input type="checkbox"/> Forex Dealer<br><input type="checkbox"/> Doctor<br><input type="checkbox"/> Others [Please specify]<br>_____ |
| Politically Exposed Person [PEP]                    | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Related to PEP                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Related to PEP                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Related to PEP                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Any other information relating to KYC if applicable | [Please specify]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | [Please specify]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | [Please specify]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

**3. DECLARATION**

I/We confirm that the information provided in this form is true & accurate. In the event any of the above information is / are found to be false / incorrect and /or the declaration in not provided, then the AMC/Trustee/Mutual Fund shall reserve the right to reject the application and / or reverse the allotment of units and the AMC / Trustee / Mutual Fund shall not be liable for the same / I/We will be liable for the consequences arising therefrom. I/We shall keep you forthwith informed in writing about any changes/modification to the information provided or any other additional information as may be required by you from time to time; Towards compliance as may be required by domestic or overseas regulators/ tax authorities, the Fund may also be constrained to withhold and pay out any sums from my/our account or close or suspend my account(s) and I/We understand that I am / we are required to contact my tax advisor for any questions about my/our tax residency.

|                                                                        |              |              |              |
|------------------------------------------------------------------------|--------------|--------------|--------------|
| <b>SIGNATURE(S)</b><br><br>Applicants must sign as per mode of holding | ⊗            | ⊗            | ⊗            |
|                                                                        | POA Holder 1 | POA Holder 2 | POA Holder 3 |
| Date                                                                   | Place        |              |              |

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ASBA Application No. \_\_\_\_\_

 Date 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

INVESTORS MUST READ THE SCHEME INFORMATION DOCUMENT/KEY INFORMATION MEMORANDUM AND INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## APPLICATION SUPPORTED BY BLOCKED AMOUNT (ASBA) FORM

| BROKER/AGENT INFORMATION |                        |                     |                                                | FOR OFFICE USE ONLY |                 |                       |        |
|--------------------------|------------------------|---------------------|------------------------------------------------|---------------------|-----------------|-----------------------|--------|
| Name and AMFI Regn. No.  | Sub Broker Name & Code | Sub-Broker ARN Code | EUIIN* (Employee Unique Identification Number) | SCSB                | SCSB IFSC Code  | Syndicate Member Code | SL No. |
| ARN                      |                        |                     |                                                | [Name & Code]       | [11 digit code] | [Name & Code]         |        |

Declaration for "execution-only" transaction (only where EUIIN box is left blank)

\* I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

|                                                 |                                      |                                      |
|-------------------------------------------------|--------------------------------------|--------------------------------------|
| SIGNATURE(S)                                    |                                      |                                      |
| 1st Applicant / Guardian / Authorised Signatory | 2nd Applicant / Authorised Signatory | 3rd Applicant / Authorised Signatory |

### 1. PARTICULARS OF FIRST APPLICANT (Name should be as available in Demat Account)

|              |  |
|--------------|--|
| Name         |  |
| Mr./Ms./M/s. |  |
| PAN          |  |

### 2. PARTICULARS OF SECOND APPLICANT

|              |  |
|--------------|--|
| Name         |  |
| Mr./Ms./M/s. |  |
| PAN          |  |

### 3. PARTICULARS OF THIRD APPLICANT

|              |  |
|--------------|--|
| Name         |  |
| Mr./Ms./M/s. |  |
| PAN          |  |

### 4. EXISTING FOLIO No. (If you have an existing folio number, please mention here)

|           |  |
|-----------|--|
| Folio No. |  |
|-----------|--|

### 5. DEMAT ACCOUNT DETAILS

|                             |                                                                 |                                                                      |
|-----------------------------|-----------------------------------------------------------------|----------------------------------------------------------------------|
| Depository (Please ✓)       | <input type="checkbox"/> National Securities Depository Limited | <input type="checkbox"/> Central Depository Services [India] Limited |
| Depository Participant Name |                                                                 |                                                                      |
| DP - ID                     |                                                                 |                                                                      |
| Beneficiary Account Number  |                                                                 |                                                                      |

### 6. INVESTMENT DETAILS

|                 |                                  |                                 |                                                                                 |
|-----------------|----------------------------------|---------------------------------|---------------------------------------------------------------------------------|
| Scheme Name     |                                  |                                 |                                                                                 |
| Plan (Please ✓) | <input type="checkbox"/> Regular | <input type="checkbox"/> Direct | Option (Please ✓) <input type="checkbox"/> IDCW <input type="checkbox"/> Growth |

### 7. DETAILS OF BANK ACCOUNT FOR BLOCKING OF FUNDS

|                                             |  |
|---------------------------------------------|--|
| Bank Account Number                         |  |
| Bank Name                                   |  |
| Branch Name                                 |  |
| IFS Code                                    |  |
| Total Amount to be blocked (Rs. In figures) |  |
| Rs. in words                                |  |

Note : AMC, reserves the right to use any mode of payment as deemed appropriate. AMC shall not be responsible if transaction through ECS / Direct Credit could not be carried out because of incomplete or incorrect information provided by investor.

ASBA Application Number \_\_\_\_\_

Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

|                              |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                  |                                                               |                   |                                                               |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------------------------------|---------------------------------------------------------------|-------------------|---------------------------------------------------------------|
|                              | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Plan (Please ✓)</td> <td style="width: 20%;"> <input type="checkbox"/> Regular       </td> <td style="width: 20%;"> <input type="checkbox"/> Direct       </td> <td style="width: 20%;">Option (Please ✓)</td> <td style="width: 20%;"> <input type="checkbox"/> IDCW         <input type="checkbox"/> Growth       </td> </tr> </table> | Plan (Please ✓)                 | <input type="checkbox"/> Regular | <input type="checkbox"/> Direct                               | Option (Please ✓) | <input type="checkbox"/> IDCW <input type="checkbox"/> Growth |
| Plan (Please ✓)              | <input type="checkbox"/> Regular                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Direct | Option (Please ✓)                | <input type="checkbox"/> IDCW <input type="checkbox"/> Growth |                   |                                                               |
| Received from : _____        |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                  |                                                               |                   |                                                               |
| Address _____                |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                  |                                                               |                   |                                                               |
| SCSB Account details:        |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                  |                                                               |                   |                                                               |
| A/c No. _____                | Bank Name _____ Branch Name _____                                                                                                                                                                                                                                                                                                                                                                                                        |                                 |                                  |                                                               |                   |                                                               |
| Total Amount to be Blocked:  |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                  |                                                               |                   |                                                               |
| Rs. In figures _____         | Rs. In words _____                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 |                                  |                                                               |                   |                                                               |
| Date & time of receipt _____ | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">SCSB Stamp, Signature</td> </tr> </table>                                                                                                                                                                                                                                                                                              | SCSB Stamp, Signature           |                                  |                                                               |                   |                                                               |
| SCSB Stamp, Signature        |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                  |                                                               |                   |                                                               |

## 8. DECLARATION & SIGNATURE

1) I/We hereby undertake that I/We am/are an ASBA Investor as per the applicable provisions of the SEBI (Issue of Capital and Disclosure Requirements), Regulations 2009 ("SEBI Regulations") as amended from time to time. 2) In accordance with ASBA process provided in the SEBI Regulations and as disclosed in this application, I/We authorize (a) the SCSB to do all necessary acts including blocking of application money towards the Subscription of Units of the Scheme, to the extent mentioned above in the "SCSB / ASBA Account details" or unblocking of funds in the bank account maintained with the SCSB specified in this application form, transfer of funds to the Bank account of the Scheme/SBI Mutual Fund on receipt of instructions from the Registrar and Transfer Agent after the allotment of the Units entitling me/us to receive Units on such transfer of funds, etc. (b) Registrar and Transfer Agent to issue instructions to the SCSB to remove the block on the funds in the bank account specified in the application, upon allotment of Units and to transfer the requisite money to the Scheme's account / Bank account of SBI Mutual Fund. 3) In case the amount available in the bank account specified in the application is insufficient for blocking the amount equivalent to the application money towards the Subscription of Units, the SCSB shall reject the application 4) If the DP ID, Beneficiary Account No. or PAN furnished by me/us in the application is incorrect or incomplete or not matching with the depository records, the application shall be rejected and the SBI Mutual Fund or SCSBs shall not be liable for losses, if any. All future communication in connection with NFO should be addressed to the SCSB/RTA/AMC quoting the full name of the Sole/First Applicant, NFO Application Number, ASBA Application Number, Depository Account details [if it has been provided], Amount applied for and the account number from where NFO amount was blocked.

"I/We have read and understood the contents of the Scheme Information Document and the details of the scheme and I/We have not received or been induced by any rebate or gifts, directly or indirectly, in making this investment." "I/We hereby declare that the amount invested/to be invested by me/us in the scheme(s) of SBI Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any act, rules, regulations or any statute or legislation or any other applicable laws or any notifications, directions issued by any governmental or statutory authority from time to time." \* I/We certify that as per the Memorandum and Articles of Association of the Company, Bye laws, Trust Deed or Partnership Deed and resolutions passed by the Company / Firm / Trust. I/We are authorised to enter into this transactions for and on behalf of the Company/Firm/Trust. \*\* I/We confirm that I am/we are Non Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for the subscriptions have been remitted from abroad through approved banking channels or from my/our Non Resident External/Ordinary account/FCNR Account. \* Applicable to other than Individuals / HUF; \*\* Applicable to NRI; The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. **I/We hereby confirm that I/We have not been offered/communicated any indicative portfolio and/or any indicative yield by SBI Mutual Fund/SBI Funds Management Limited/its distributor for this investment.**

|                                               |                                                 |                                      |                                      |
|-----------------------------------------------|-------------------------------------------------|--------------------------------------|--------------------------------------|
| SIGNATURE(S)<br>All applicants must sign here | ⊗                                               | ⊗                                    | ⊗                                    |
|                                               | 1st Applicant / Guardian / Authorised Signatory | 2nd Applicant / Authorised Signatory | 3rd Applicant / Authorised Signatory |
| Date                                          |                                                 |                                      | Place                                |

## INSTRUCTIONS FOR FILLING ASBA APPLICATION FORM

- An Application Supported by Blocked Amount (ASBA) investor shall submit a duly filled up **ASBA Application form, physically or electronically**, to the Self Certified Syndicate Bank (SCSB) with whom the bank account to be blocked, is maintained.
  - In case of ASBA application form in physical mode**, the investor shall submit the ASBA Application Form at the Bank branch of SCSB, which is designated for the purpose and the investor must be holding a bank account with such SCSB.
  - In case of ASBA application form in electronic form**, the investor shall submit the ASBA Application Form either through the internet banking facility available with the SCSB, or such other electronically enabled mechanism for subscribing to units of Mutual Fund scheme authorising SCSB to block the subscription money in a bank account.
- Investors shall correctly mention the Bank Account number in the ASBA Application Form and ensure that funds equal to the subscription amount are available in the bank account maintained with the SCSB before submitting the same to the designated branch.
- Upon submission of an ASBA Application Form with the SCSB, whether in physical or electronic mode, investor shall be deemed to have agreed to block the entire subscription amount specified and authorized the Designated Branch to block such amount in the Bank Account.
- On the basis of an authorisation given by the account holder in the ASBA Application Form, the SCSB shall block the subscription money in the Bank Account specified in the ASBA Application Form. The subscription money shall remain blocked in the Bank Account till allotment of units under the scheme or till rejection of the application, as the case may be.
- If the Bank Account specified in the ASBA Application Form does not have sufficient credit balance to meet the subscription money, the ASBA application shall be rejected by the SCSB.
- The ASBA Application Form should not be accompanied by cheque any mode of payment other than authorisation to block subscription amount in the Bank Account.
- All grievances relating to the ASBA facility may be addressed to the BANK/AMC / RTA to the Issue, with a copy to the SCSB, giving full details such as name, address of the applicant, subscription amount blocked on application, bank account number and the Designated Branch or the collection centre of the SCSB where the ASBA Application Form was submitted by the Investor.
- ASBA facility extended to investors shall operate in accordance with the SEBI guidelines in force from time to time.

## Know Your Customer (KYC) Application Form | Individual



### 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. CKYC 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

### For office use only

(To be filled by financial institution)

Application Type\* ☐ New ☐ Update

CKYC Number (KIN) 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"/>                         |                                              |                                           |                                                  |
| 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    | 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 PERMANENT ADDRESS\* (Please refer instruction B at the end)

I Certified copy of Officially valid document (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*

### PHOTO\*



Signature /Thumb Impression across photo without covering the face

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

|                        |                      |
|------------------------|----------------------|
| Line 1*                | <input type="text"/> |
| Line 2                 | <input type="text"/> |
| Line 3                 | <input type="text"/> |
| District*              | <input type="text"/> |
| Pin/Post Code*         | <input type="text"/> |
| City/Town/Village*     | <input type="text"/> |
| State/U.T Code*        | <input type="text"/> |
| ISO 3166 Country Code* | <input type="text"/> |

### 3. CURRENT/CORRESPONDENCE 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*                | <input type="text"/> |
| Line 2                 | <input type="text"/> |
| Line 3                 | <input type="text"/> |
| District*              | <input type="text"/> |
| Pin/Post Code*         | <input type="text"/> |
| City/Town/Village*     | <input type="text"/> |
| State/U.T Code*        | <input type="text"/> |
| ISO 3166 Country Code* | <input type="text"/> |

☐ **4. Contact Details** (All communications will be sent to Mobile number/Email-ID provided) (Please refer instruction **C** at the end)

[illegible]

☐ 5. Remarks (If any)

## 6. 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 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 and to download the information from CKYCR.
- I am providing the consent to MF/RTA/SEBI registered intermediary to share this KYC data/ applicable Aadhaar XML data with KRA and share the data to other Participating intermediaries as mandated by PMLA Act/ Rules/ SEBI guidelines.

[Signature/Thumb Impression]

Signature/Thumb Impression of Applicant

[illegible]

## 7. Attestation / For Office Use only

Documents Received ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification ☐ Digital KYC Process ☐ Equivalent e-document ☐ Video Based KYC

## KYC documents verification carried out by (Refer instruction E)

Date: 

|   |   |
|---|---|
| D | D |
|---|---|

 - 

|   |   |
|---|---|
| M | M |
|---|---|

 - 

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
|---|---|---|---|

[illegible][illegible][illegible][illegible]

[Employee Signature]

## Institution details

Name \_\_\_\_\_

[illegible]

[Institution Stamp]

In-Person Verification (IPV) carried out by (Refer instruction F)

Date: 

|   |   |
|---|---|
| D | D |
|---|---|

 - 

|   |   |
|---|---|
| M | M |
|---|---|

 - 

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
|---|---|---|---|

[illegible]

Emp. Code

[illegible][illegible]

[Employee Signature]

## Institution details

[illegible]

[Institution Stamp]

## Instruction / Check list / Guidelines for filling individual KYC Application Form

### General instructions:

1. Self-Certification of documents is mandatory.
2. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [E].
3. If any proof of identity or address is in a foreign language, then translation into English is required duly attested by the official as indicated above
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If current & permanent addresses are different, then proofs for both have to be submitted.
6. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport / PIO Card /OCI and overseas address proof is mandatory.
7. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
8. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board / Passport of Minor / Birth Certificate must be provided.

### A. Clarification / Guidelines on filling 'Personal Details' section

1. Name: The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
2. One of the following is mandatory: Mother's name, Spouse's name, Father's name.

### B. Clarification / Guidelines on filling 'Current Address details' section

1. In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR
2. PoA to be submitted only if the submitted Pol does not have current address or address as per Pol is invalid or not in force.
3. State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
4. In Section 2, one of I, II and III is to be selected. In case of online E-KYC authentication, II is to be selected.
5. In Section 3, one of I, II, III and IV is to be selected. In case of online E-KYC authentication, II is to be selected.
6. List of documents for 'Deemed Proof of Address'

| Document Code | Description                                                                                                                                                                                                                                                                                                                                                                               |
|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 01            | Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).                                                                                                                                                                                                                                       |
| 02            | Property or Municipal tax receipt.                                                                                                                                                                                                                                                                                                                                                        |
| 03            | Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.                                                                                                                                                                                                                         |
| 04            | Letter of allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.                                               |
| 7.            | Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.                                                                                                                                                                                                       |
| 8.            | "Equivalent e-document" means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016. |
| 9.            | "Digital KYC process" has to be carried out as stipulated in the PML Rules, 2005.                                                                                                                                                                                                                                                                                                         |

### C. Clarification / Guidelines on filling 'Contact details' section

1. Email/ Mobile is mandatory for upload into KRA system and please provide.
2. Please mention two-digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999)
3. Do not add '0' in the beginning of Mobile number.

### D. Clarification on Minor

1. Guardian details are optional for minors above 10 years of age for opening of bank account only
2. However, in case guardian details are available for minor 10 years of age, the same (or CKYCR number of guardian) is to be uploaded.

### E. List of people authorized to attest the documents after verification with the originals:

1. Authorised officials of Asset Management Companies (AMC).
2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
3. KYD compliant mutual fund distributors.
4. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.
6. Government authorised officials who are empowered to issue Apostille Certificates.

### F. List of people authorized to perform In Person Verification (IPV):

1. Authorised officials of Asset Management Companies (AMC).
2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
3. KYD compliant mutual fund distributors.
4. Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (for investors investing directly).
5. In case of NRI applicants, a person permitted to attest documents, may also conduct the In Person Verification and confirm this in the KYC Form.

### G. PAN Exempt Investor Category

1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
3. Investors residing in the state of Sikkim.
4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India

## List of two digit state / U.T codes as per Indian Motor Vehicle Act, 1988

| State/U.T              | Code | State/U.T        | Code | State/U.T     | Code |
|------------------------|------|------------------|------|---------------|------|
| Andaman & Nicobar      | AN   | Himachal Pradesh | HP   | Pondicherry   | PY   |
| Andhra Pradesh         | AP   | Jammu & Kashmir  | JK   | Punjab        | PB   |
| Arunachal Pradesh      | AR   | Jharkhand        | JH   | Rajasthan     | RJ   |
| Assam                  | AS   | Karnataka        | KA   | Sikkim        | SK   |
| Bihar                  | BR   | Kerala           | KL   | Tamil Nadu    | TN   |
| Chandigarh             | CH   | Lakshadweep      | LD   | Telangana     | TS   |
| Chhattisgarh           | CG   | Madhya Pradesh   | MP   | Tripura       | TR   |
| Dadra and Nagar Haveli | DN   | Maharashtra      | MH   | Uttar Pradesh | UP   |
| Daman & Diu            | DD   | Manipur          | MN   | Uttarkhand    | UA   |
| Delhi                  | DL   | Meghalaya        | ML   | West Bengal   | WB   |
| Goa                    | GA   | Mizoram          | MZ   | Other         | XX   |
| Gujarat                | GJ   | Nagaland         | NL   |               |      |
| Haryana                | HR   | Orissa           | OR   |               |      |

## List of ISO 3166 two digit Country Code

| Country                               | Country Code | Country                                | Country Code | Country                                      | Country Code | Country                                      | Country Code |
|---------------------------------------|--------------|----------------------------------------|--------------|----------------------------------------------|--------------|----------------------------------------------|--------------|
| Afghanistan                           | AF           | Dominican Republic                     | DO           | Libya                                        | LY           | Saint Pierre and Miquelon                    | PM           |
| Aland Islands                         | AX           | Ecuador                                | EC           | Liechtenstein                                | LI           | Saint Vincent and the Grenadines             | VC           |
| Albania                               | AL           | Egypt                                  | EG           | Lithuania                                    | LT           | Samoa                                        | WS           |
| Algeria                               | DZ           | El Salvador                            | SV           | Luxembourg                                   | LU           | San Marino                                   | SM           |
| American Samoa                        | AS           | Equatorial Guinea                      | GO           | Macao                                        | MO           | Sao Tome and Principe                        | ST           |
| Andorra                               | AD           | Eritrea                                | ER           | Macedonia, the former Yugoslav Republic of   | MK           | Saudi Arabia                                 | SA           |
| Angola                                | AO           | Estonia                                | EE           | Madagascar                                   | MG           | Senegal                                      | SN           |
| Anguilla                              | AI           | Ethiopia                               | ET           | Malawi                                       | MW           | Serbia                                       | RS           |
| Antarctica                            | AQ           | Falkland Islands (Malvinas)            | FK           | Malaysia                                     | MY           | Seychelles                                   | SC           |
| Antigua and Barbuda                   | AG           | Faroe Islands                          | FO           | Maldives                                     | MV           | Sierra Leone                                 | SL           |
| Argentina                             | AR           | Fiji                                   | FJ           | Mali                                         | ML           | Singapore                                    | SG           |
| Armenia                               | AM           | Finland                                | FI           | Malta                                        | MT           | Sint Maarten (Dutch part)                    | SX           |
| Aruba                                 | AW           | France                                 | FR           | Marshall Island                              | MH           | Slovakia                                     | SK           |
| Australia                             | AU           | French Guiana                          | GF           | Martinique                                   | MQ           | Slovenia                                     | SI           |
| Austria                               | AT           | French Polynesia                       | PF           | Mauritania                                   | MR           | Solomon Island                               | SB           |
| Azerbaijan                            | AZ           | French Southern Territories            | TF           | Mauritius                                    | MU           | Somalia                                      | SO           |
| Bahamas                               | BS           | Gabon                                  | GA           | Moyotte                                      | YT           | South Africa                                 | ZA           |
| Bahrain                               | BH           | Gambia                                 | GM           | Mexico                                       | MX           | South Georgia and the South Sandwich Islands | GS           |
| Bangladesh                            | BD           | Georgia                                | GE           | Micronesia, Federated States of              | FM           | South Sudan                                  | SS           |
| Barbados                              | BB           | Germany                                | DE           | Moldova, Republic of                         | MD           | Spain                                        | ES           |
| Belarus                               | BY           | Ghana                                  | GH           | Monaco                                       | MC           | Sri Lanka                                    | LK           |
| Belgium                               | BE           | Gibraltar                              | GI           | Mongolia                                     | MN           | Sudan                                        | SD           |
| Belize                                | BZ           | Greece                                 | GR           | Montenegro                                   | ME           | Suriname                                     | SR           |
| Benin                                 | BJ           | Greenland                              | GL           | Montserrat                                   | MS           | Svalbard and Jan Mayen                       | SI           |
| Bermuda                               | BM           | Grenada                                | GD           | Morocco                                      | MA           | Swaziland                                    | SZ           |
| Bhutan                                | BT           | Guadeloupe                             | GP           | Mozambique                                   | MZ           | Sweden                                       | SE           |
| Bolivia, Plurinational State of       | BO           | Guam                                   | GU           | Myanmar                                      | MM           | Switzerland                                  | CH           |
| Bonaire, Sint Eustatius and Saba      | BQ           | Guatemala                              | GT           | Namibia                                      | NA           | Syrian Arab Republic                         | SY           |
| Bosnia and Herzegovina                | BA           | Guernsey                               | GG           | Nauru                                        | NZ           | Taiwan province of China                     | TW           |
| Botswana                              | BW           | Guinea                                 | GN           | Nepal                                        | NP           | Tajikistan                                   | TJ           |
| Bouvet Island                         | BV           | Guinea-Bissau                          | GW           | Netherlands                                  | NL           | Tanzania, United Republic of                 | TZ           |
| Brazil                                | BR           | Guyana                                 | GY           | New Caledonia                                | NC           | Thailand                                     | TH           |
| British Indian Ocean Territory        | IO           | Haiti                                  | HT           | New Zealand                                  | NZ           | Timor-Leste                                  | TL           |
| Brunei Darussalam                     | BN           | Heard Island and McDonald Islands      | HM           | Nicaragua                                    | NI           | Togo                                         | TG           |
| Bulgaria                              | BG           | Holy See (Vatican City State)          | VA           | Niger                                        | NE           | Tokelau                                      | TK           |
| Burkina Faso                          | BF           | Honduras                               | HN           | Nigeria                                      | NG           | Tonga                                        | TO           |
| Burundi                               | BI           | Hong Kong                              | HK           | Niue                                         | NU           | Trinidad and Tobago                          | TT           |
| Cabo Verde                            | CV           | Hungary                                | HU           | Norfolk Island                               | NF           | Tunisia                                      | TN           |
| Cambodia                              | KH           | Iceland                                | IS           | Northern Mariana Islands                     | MP           | Turkey                                       | TR           |
| Cameroon                              | CM           | India                                  | IN           | Norway                                       | NO           | Turkmenistan                                 | TM           |
| Canada                                | CA           | Indonesia                              | ID           | Oman                                         | OM           | Turks and Caicos Islands                     | TC           |
| Cayman Islands                        | KY           | Iran, Islamic Republic of              | IR           | Pakistan                                     | PK           | Tuvalu                                       | TV           |
| Central African Republic              | CF           | Iraq                                   | IQ           | Palau                                        | PW           | Uganda                                       | UG           |
| Chad                                  | TD           | Ireland                                | IE           | Palestine, State of                          | PS           | Ukraine                                      | UA           |
| Chile                                 | CL           | Isle of Man                            | IM           | Panama                                       | PA           | United Arab Emirates                         | AE           |
| China                                 | CN           | Israel                                 | IL           | Papua New Guinea                             | PG           | United Kingdom                               | GB           |
| Christmas Island                      | CX           | Italy                                  | IT           | Paraguay                                     | PY           | United States                                | US           |
| Cocos (Keeling) Islands               | CC           | Jamaica                                | JM           | Peru                                         | PE           | United States Minor Outlying Islands         | UM           |
| Colombia                              | CO           | Japan                                  | JP           | Philippines                                  | PH           | Uruguay                                      | UY           |
| Comoros                               | KM           | Jersey                                 | JE           | Pitcairn                                     | PN           | Uzbekistan                                   | UZ           |
| Congo                                 | CG           | Jordan                                 | JO           | Poland                                       | PL           | Vanuatu                                      | VU           |
| Congo, the Democratic Republic of the | CD           | Kazakhstan                             | KZ           | Portugal                                     | PT           | Venezuela, Bolivarian Republic of            | VE           |
| Cook Islands                          | CK           | Kenya                                  | KE           | Puerto Rico                                  | PR           | Viet Nam                                     | VN           |
| Costa Rica                            | CR           | Kiribati                               | KI           | Qatar                                        | QA           | Virgin Islands, British                      | VG           |
| Cote d'Ivoire   Code d'Ivoire         | CI           | Korea, Democratic People's Republic of | KP           | Reunion   Reunion                            | RE           | Virgin Island, U.S.                          | VI           |
| Croatia                               | HR           | Korea, Republic                        | KR           | Romania                                      | RO           | Wallis and Futuna                            | WF           |
| Cuba                                  | CU           | Kuwait                                 | KW           | Russian Federation                           | RU           | Western Sahara                               | EH           |
| Curacao   Curacao                     | CW           | Kyrgyzstan                             | KG           | Rwanda                                       | RW           | Yemen                                        | YE           |
| Cyprus                                | CY           | Lao People's Democratic Republic       | LA           | Saint Barthelemy   Saint Barthelemy          | BL           | Zambia                                       | ZM           |
| Czech Republic                        | CZ           | Latvia                                 | LV           | Saint Helena, Ascension and Tristan da Cunha | SH           | Zimbabwe                                     | ZW           |
| Denmark                               | DK           | Lebanon                                | LB           | Saint Kitts and Nevis                        | KN           |                                              |              |
| Djibouti                              | DJ           | Lesotho                                | LS           | Saint Lucia                                  | LC           |                                              |              |
| Dominica                              | DM           | Liberia                                | LR           | Saint Martin (French Part)                   | MF           |                                              |              |

**Important Instructions:**

- A. Fields marked with '\*\*' are mandatory fields.  
B. Tick '✓' wherever applicable.  
C. Please fill the date in DD-MM-YYYY format.  
D. Please fill the form in English and in BLOCK letters.  
E. CKYC number(KIN) of applicant is mandatory for update application.  
F. List of State/U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.  
G. List of two-character ISO 3166 country codes is available at the end.  
H. Please read section wise detailed guidelines/instructions at the end.  
I. For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

**For office use only**

(To be filled by financial institution)

|                   |                              |                                 |
|-------------------|------------------------------|---------------------------------|
| Application Type* | <input type="checkbox"/> New | <input type="checkbox"/> Update |
| CKYC number(KIN)  | <input type="text"/>         |                                 |

(Mandatory for KYC update request)

☐ **1. Entity Details\*** (Please refer instruction A at the end)

|                                   |                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                  |
|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Name*    | <input type="text"/>                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                  |
| Entity Constitution Type*         | <input type="checkbox"/> Others (Specify) <input type="text"/> (Please refer instruction A at the end)                                                                                                                                                          |                                                                                                                                                                                                                                                                                                  |
| Date of Incorporation/Formation*  | <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | Date of Commencement of Business <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Place of Incorporation/Formation* | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>                                               | Country of Incorporation/Formation* <input type="text"/> <input type="text"/> TIN or Equivalent Issuing Country <input type="text"/> <input type="text"/>                                                                                                                                        |
| PAN*                              | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>                                               |                                                                                                                                                                                                                                                                                                  |
| TIN/GST Registration Number       | <input type="text"/>                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                  |

☐ **2. PROOF OF IDENTITY (POI)\*** (Please refer instruction B at the end)

|                                                                                                   |                                                                                                                    |
|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Officially valid document(s) in respect of person authorised to transact |                                                                                                                    |
| <input type="checkbox"/> Certificate of Incorporation/Formation <input type="text"/>              | <input type="checkbox"/> Registration Certificate <input type="text"/>                                             |
| <input type="checkbox"/> Memorandum and Articles of Association                                   | <input type="checkbox"/> Partnership Deed                                                                          |
| <input type="checkbox"/> Resolution of Board/Managing Committee                                   | <input type="checkbox"/> Trust Deed                                                                                |
| <input type="checkbox"/> Activity proof – 1 (For Sole Proprietorship Only)                        | <input type="checkbox"/> Power of Attorney granted to its manager, officers or employees to transact on its behalf |
| <input type="checkbox"/> Activity proof – 2 (For Sole Proprietorship Only)                        | <input type="checkbox"/> Activity proof – 2 (For Sole Proprietorship Only)                                         |

☐ **3. ADDRESS** (Please see instruction C at the end)☐ **3.1 Registered Office Address/Place of Business\***

|                   |                                                                 |                                                   |                                                              |
|-------------------|-----------------------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------|
| Proof of Address* | <input type="checkbox"/> Certificate of Incorporation/Formation | <input type="checkbox"/> Registration Certificate | <input type="checkbox"/> Other Document <input type="text"/> |
| Line 1*           | <input type="text"/>                                            |                                                   |                                                              |
| Line 2            | <input type="text"/>                                            |                                                   |                                                              |
| Line 3            | <input type="text"/>                                            | City/Town/Village*                                | <input type="text"/>                                         |
| District*         | <input type="text"/>                                            | Pin/Post Code*                                    | <input type="text"/>                                         |
|                   |                                                                 | State/U.T Code*                                   | <input type="text"/>                                         |
|                   |                                                                 | ISO 3166 Country Code*                            | <input type="text"/>                                         |

☐ **3.2 Local Address in India (If different from above)\*** (Proof to be enclosed) (Latest telephone bill/electricity bill/ bank statement/lease/sale agreement/any other proof)

|           |                      |                        |                      |
|-----------|----------------------|------------------------|----------------------|
| Line 1*   | <input type="text"/> |                        |                      |
| Line 2    | <input type="text"/> |                        |                      |
| Line 3    | <input type="text"/> | City/Town/Village*     | <input type="text"/> |
| District* | <input type="text"/> | Pin/Post Code*         | <input type="text"/> |
|           |                      | State/U.T Code*        | <input type="text"/> |
|           |                      | ISO 3166 Country Code* | <input type="text"/> |

☐ **4. Contact Details** (All communications will be sent to Mobile number/Email-ID provided may be used) (Please refer instruction D at the end)

|            |                      |   |                      |          |                      |   |                      |
|------------|----------------------|---|----------------------|----------|----------------------|---|----------------------|
| Tel. (Off) | <input type="text"/> | - | <input type="text"/> | Fax      | <input type="text"/> | - | <input type="text"/> |
| Mobile     | <input type="text"/> | - | <input type="text"/> | Email ID | <input type="text"/> |   |                      |
| Mobile     | <input type="text"/> | - | <input type="text"/> | Email ID | <input type="text"/> |   |                      |

☐ **5. Number of Related Persons**  (Please fill Annexure A-2 for each related persons & also refer instruction E at the end)

☐ **6. Remarks** (If any)

## 7. Applicant Declaration (Please refer instruction G at the end)

- 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. Incase 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 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. I am also providing consent to MF/AMC/KRA to share this KYC data with CKYCR/download the information from CKYCR and other participating intermediaries as mandated by PMLA Act/Rules/SEBI guidelines.

Date:   -   -    [illegible]

Signature/Thumb Impression of Authorised Person(s)

## 8. Attestation / For Office Use only

Documents Received

☐ Certified Copies☐ Equivalent e-document

KYC documents verification carried out by

Identity Verification ☐ Done      Date:   -   -

[illegible][illegible][illegible][illegible]

[Employee Signature]

## Institution details

[illegible][illegible]

[Institution Stamp]

Annexure A2 | Legal Entity | Other than Individuals  
Central KYC Registry | Know Your Customer (KYC) Application Form | Related Person



Important Instructions:

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

For office use only

Application Type\*

☐ New ☐ Update ☐ Delete

(To be filled by financial institution)

CKYC number(KIN)

(Mandatory for KYC update and delete request)

1. Details of Related Person\* (Please refer instruction E at the end)

☐ Addition of Related Person ☐ Deletion of Related Person ☐ Update Related Person Details

KIN of Related Person (if available\*)  (If KYC number is available, only 'Related Person Type' & 'Name' is mandatory)

Related Person Type\* ☐ Director ☐ Promoter ☐ Karta ☐ Trustee ☐ Partner ☐ Court Appointment Official ☐ Proprietor  
☐ Beneficiary ☐ Authorised Signatory ☐ Beneficial Owner ☐ Power of Attorney Holder ☐ Other (Please specify) \_\_\_\_\_

DIN (Director Identification Number)  (Mandatory if Related Person Type is Director)

1.1 Personal Details (Please refer instruction E at the end)

|                          | Prefix                              | First Name                                                                    | Middle Name                             | Last Name            |
|--------------------------|-------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------|----------------------|
| 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 |                      |
| Nationality*             | <input type="checkbox"/> IN- Indian | <input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> ) |                                         |                      |
| PAN*                     | <input type="text"/>                |                                                                               |                                         |                      |

1.2 Proof of Identity and Address\* (Please refer instruction E at the end)

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  Driving Licence Expiry Date   
☐ D-NREGA Job Card   
☐ E-National Population Register Letter   
☐ F-Proof of Possession of Aadhaar   
II ☐ E-KYC Authentication   
III ☐ Offline verification of Aadhaar

☐ PHOTO\*



Address

Line 1\*   
Line 2   
Line 3  City/Town/Village\*   
District\*  Pin/Post Code\*  State/U.T Code\*  ISO 3166 Country Code\*

1.3 Current Address Details (Please refer instruction E 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   
II ☐ E-KYC Authentication   
III ☐ Offline verification of Aadhaar   
IV ☐ Deemed PoA  
V ☐ Self-Declaration

**Address**

|           |  |  |  |  |  |  |  |  |                |  |  |  |  |  |                 |  |  |                        |  |  |  |  |  |  |  |  |  |
|-----------|--|--|--|--|--|--|--|--|----------------|--|--|--|--|--|-----------------|--|--|------------------------|--|--|--|--|--|--|--|--|--|
| Line 1*   |  |  |  |  |  |  |  |  |                |  |  |  |  |  |                 |  |  |                        |  |  |  |  |  |  |  |  |  |
| Line 2    |  |  |  |  |  |  |  |  |                |  |  |  |  |  |                 |  |  |                        |  |  |  |  |  |  |  |  |  |
| Line 3    |  |  |  |  |  |  |  |  |                |  |  |  |  |  |                 |  |  |                        |  |  |  |  |  |  |  |  |  |
| District* |  |  |  |  |  |  |  |  | Pin/Post Code* |  |  |  |  |  | State/U.T Code* |  |  | ISO 3166 Country Code* |  |  |  |  |  |  |  |  |  |

**1.4 Contact Details** (All communications will be sent on provided Mobile no. / Email-ID provided) (Please refer instruction **D** at the end)

|            |  |  |  |  |   |  |  |  |  |            |  |  |  |  |   |  |  |  |  |        |  |  |   |  |  |  |  |
|------------|--|--|--|--|---|--|--|--|--|------------|--|--|--|--|---|--|--|--|--|--------|--|--|---|--|--|--|--|
| Tel. (Off) |  |  |  |  | - |  |  |  |  | Tel. (Res) |  |  |  |  | - |  |  |  |  | Mobile |  |  | - |  |  |  |  |
| Email ID   |  |  |  |  |   |  |  |  |  |            |  |  |  |  |   |  |  |  |  |        |  |  |   |  |  |  |  |

**2. 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 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. I also providing consent to MF/AMC/KRA to share this KYC data with CKYCR, download the information from CKYCR, and other participating intermediaries as mandated by PMLA Act/Rules/SEBI guidelines

[Signature/Thumb Impression]

Date: 

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| D | D | - | M | M | - | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|---|---|

 Place: 

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|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

Signature/Thumb Impression of Applicant

**6. Attestation / For Office Use only**

Documents Received ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification  
☐ Digital KYC Process ☐ Equivalent e-document

**KYC documents verification carried out by**

Date: 

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| D | D | - | M | M | - | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|---|---|

Emp. Name 

|  |  |  |  |  |  |  |  |  |  |
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Emp. Code 

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Emp. Designation 

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Emp. Branch 

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[Employee Signature]

**Institution details**

Name 

|  |  |  |  |  |  |  |  |  |  |
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Code 

|  |  |  |  |  |  |  |  |  |  |
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[Institution Stamp]

## Central KYC Registry | Instructions / Check list / Guidelines for filling Legal Entity / Other than Individuals KYC Application Form

### A. Clarification / Guidelines on filling 'Entity Details' section

#### 1. Entity Constitution Type

|                                                            |                                                   |                                                 |
|------------------------------------------------------------|---------------------------------------------------|-------------------------------------------------|
| A – Sole Proprietorship                                    | H – Trust                                         | O – Artificial Juridical Person                 |
| B – Partnership Firm                                       | I – Liquidator                                    | P – International Organisation or               |
| C – HUF                                                    | J – Limited Liability Partnership                 | Agency/Foreign Embassy or Consular Office, etc. |
| D – Private Limited Company                                | K – Artificial Liability Partnership              | Q – Not Categorized                             |
| E – Public Limited Company                                 | L – Public Sector Banks                           | R – Others                                      |
| F – Society                                                | M – Central/State Government Department or Agency | S – Foreign Portfolio Investors                 |
| G – Association of Persons (AOP)/Body of Individuals (BOI) | N – Section 8 Companies (Companies Act, 2013)     |                                                 |

#### 2. In case of companies and partnerships, PAN of the entity is mandatory.

### B. Clarification / Guidelines on filling 'Proof of Identity [POI]' section

- Activity Proof – 1 and Activity Proof – 2 are applicable for accounts in case of proprietorship firms. Please refer to relevant instructions issued by the Reserve Bank of India in this regard.
- Please refer to the relevant instructions issued by the regulator regarding applicable documents for the legal entity.
- Certified copy of document or equivalent e-document or OVD obtained through Digital KYC process to be submitted.
- 'Equivalent e-document' means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
- 'Digital KYC process' has to be carried out as stipulated in the PML Rules, 2005.
- KYC requirements for Foreign Portfolio Investors (FPIs) will be as specified by the concerned regulator from time to time.

### C. Clarification/Guidelines for filling Proof of Address [PoA] section

- State/U.T Code and Pin/Post Code will not be mandatory for overseas addresses.
- Certified copy of document or equivalent e-document to be submitted.

### D. Clarification/Guidelines for filling 'Related Person Details' section

- Please mention two-digit 'country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
- Do not add '0' in the beginning of Mobile number.

### E. Clarification/Guidelines for filling 'Related Person Details' section

- Personal Details
  - The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- Proof of Address [PoA]
  - PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
  - State/U.T Code and Pin/Post Code will not be mandatory for Overseas addresses.
  - In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR
  - REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.
- If KYC number of Related Person is available, no other details except 'Person Type' and 'Name of the Related' are required.
- Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.
- One of the following is mandatory: Mother's name, Spouse's name, Father's name.

### F. Provision for capturing signature of multiple authorised persons is to be made by the RE.

### G. List of people authorized to attest the documents after verification with the originals:

- Authorised officials of Asset Management Companies (AMC).
- Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
- KYD compliant mutual fund distributors.
- Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
- In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.
- Government authorised officials who are empowered to issue Apostille Certificates.

#### General instructions:

- Self-Certification of documents is mandatory.
- Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [F].
- If any proof of identity or address is in a foreign language, then translation into English is required duly attested by the official as indicated above.
- Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- If current & permanent addresses are different, then proofs for both have to be submitted.
- Sole proprietor must make the application in his individual name & capacity.
- For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport / PIO Card /OCI and overseas address proof is mandatory.
- In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.

List of two digit state / U.T codes as per Indian Motor Vehicle Act, 1988

| State/U.T              | Code | State/U.T        | Code | State/U.T     | Code |
|------------------------|------|------------------|------|---------------|------|
| Andaman & Nicobar      | AN   | Himachal Pradesh | HP   | Pondicherry   | PY   |
| Andhra Pradesh         | AP   | Jammu & Kashmir  | JK   | Punjab        | PB   |
| Arunachal Pradesh      | AR   | Jharkhand        | JH   | Rajasthan     | RJ   |
| Assam                  | AS   | Karnataka        | KA   | Sikkim        | SK   |
| Bihar                  | BR   | Kerala           | KL   | Tamil Nadu    | TN   |
| Chandigarh             | CH   | Lakshadweep      | LD   | Telangana     | TS   |
| Chhattisgarh           | CG   | Madhya Pradesh   | MP   | Tripura       | TR   |
| Dadra and Nagar Haveli | DN   | Maharashtra      | MH   | Uttar Pradesh | UP   |
| Daman & Diu            | DD   | Manipur          | MN   | Uttarkhand    | UA   |
| Delhi                  | DL   | Meghalaya        | ML   | West Bengal   | WB   |
| Goa                    | GA   | Mizoram          | MZ   | Other         | XX   |
| Gujarat                | GJ   | Nagaland         | NL   |               |      |
| Haryana                | HR   | Orissa           | OR   |               |      |

List of ISO 3166 two digit Country Code

| Country                               | Country Code | Country                                | Country Code | Country                                      | Country Code | Country                                      | Country Code |
|---------------------------------------|--------------|----------------------------------------|--------------|----------------------------------------------|--------------|----------------------------------------------|--------------|
| Afghanistan                           | AF           | Dominican Republic                     | DO           | Libya                                        | LY           | Saint Pierre and Miquelon                    | PM           |
| Aland Islands                         | AX           | Ecuador                                | EC           | Liechtenstein                                | LI           | Saint Vincent and the Grenadines             | VC           |
| Albania                               | AL           | Egypt                                  | EG           | Lithuania                                    | LT           | Samoa                                        | WS           |
| Algeria                               | DZ           | El Salvador                            | SV           | Luxembourg                                   | LU           | San Marino                                   | SM           |
| American Samoa                        | AS           | Equatorial Guinea                      | GO           | Macao                                        | MO           | Sao Tome and Principe                        | ST           |
| Andorra                               | AD           | Eritrea                                | ER           | Macedonia, the former Yugoslav Republic of   | MK           | Saudi Arabia                                 | SA           |
| Angola                                | AO           | Estonia                                | EE           | Madagascar                                   | MG           | Senegal                                      | SN           |
| Anguilla                              | AI           | Ethiopia                               | ET           | Malawi                                       | MW           | Serbia                                       | RS           |
| Antarctica                            | AQ           | Falkland Islands (Malvinas)            | FK           | Malaysia                                     | MY           | Seychelles                                   | SC           |
| Antigua and Barbuda                   | AG           | Faroe Islands                          | FO           | Maldives                                     | MV           | Sierra Leone                                 | SL           |
| Argentina                             | AR           | Fiji                                   | FJ           | Mali                                         | ML           | Singapore                                    | SG           |
| Armenia                               | AM           | Finland                                | FI           | Malta                                        | MT           | Sint Maarten (Dutch part)                    | SX           |
| Aruba                                 | AW           | France                                 | FR           | Marshall Island                              | MH           | Slovakia                                     | SK           |
| Australia                             | AU           | French Guiana                          | GF           | Martinique                                   | MQ           | Slovenia                                     | SI           |
| Austria                               | AT           | French Polynesia                       | PF           | Mauritania                                   | MR           | Solomon Island                               | SB           |
| Azerbaijan                            | AZ           | French Southern Territories            | TF           | Mauritius                                    | MU           | Somalia                                      | SO           |
| Bahamas                               | BS           | Gabon                                  | GA           | Moyotte                                      | YT           | South Africa                                 | ZA           |
| Bahrain                               | BH           | Gambia                                 | GM           | Mexico                                       | M X          | South Georgia and the South Sandwich Islands | GS           |
| Bangladesh                            | BD           | Georgia                                | GE           | Micronesia, Federated States of              | FM           | South Sudan                                  | SS           |
| Barbados                              | BB           | Germany                                | DE           | Moldova, Republic of                         | MD           | Spain                                        | ES           |
| Belarus                               | BY           | Ghana                                  | GH           | Monaco                                       | MC           | Sri Lanka                                    | LK           |
| Belgium                               | BE           | Gibraltar                              | GI           | Mongolia                                     | MN           | Sudan                                        | SD           |
| Belize                                | BZ           | Greece                                 | GR           | Montenegro                                   | ME           | Suriname                                     | SR           |
| Benin                                 | BJ           | Greenland                              | GL           | Montserrat                                   | MS           | Svalbard and Jan Mayen                       | SI           |
| Bermuda                               | BM           | Grenada                                | GD           | Morocco                                      | MA           | Swaziland                                    | SZ           |
| Bhutan                                | BT           | Guadeloupe                             | GP           | Mozambique                                   | MZ           | Sweden                                       | SE           |
| Bolivia, Plurinational State of       | BO           | Guam                                   | GU           | Myanmar                                      | MM           | Switzerland                                  | CH           |
| Bonaire, Sint Eustatius and Saba      | BQ           | Guatemala                              | GT           | Namibia                                      | NA           | Syrian Arab Republic                         | SY           |
| Bosnia and Herzegovina                | BA           | Guernsey                               | GG           | Nauru                                        | MZ           | Taiwan province of China                     | TW           |
| Botswana                              | BW           | Guinea                                 | GN           | Nepal                                        | NP           | Tajikistan                                   | TJ           |
| Bouvet Island                         | BV           | Guinea-Bissau                          | GW           | Netherlands                                  | NL           | Tanzania, United Republic of                 | TZ           |
| Brazil                                | BR           | Guyana                                 | GY           | New Caledonia                                | NC           | Thailand                                     | TH           |
| British Indian Ocean Territory        | IO           | Haiti                                  | HT           | New Zealand                                  | NZ           | Timor-Leste                                  | TL           |
| Brunei Darussalam                     | BN           | Heard Island and McDonald Islands      | HM           | Nicaragua                                    | NI           | Togo                                         | TG           |
| Bulgaria                              | BG           | Holy See (Vatican City State)          | VA           | Niger                                        | NE           | Tokelau                                      | TK           |
| Burkina Faso                          | BF           | Honduras                               | HN           | Nigeria                                      | NG           | Tonga                                        | TO           |
| Burundi                               | BI           | Hong Kong                              | HK           | Niue                                         | NU           | Trinidad and Tobago                          | TT           |
| Cabo Verde                            | CV           | Hungary                                | HU           | Norfolk Island                               | NF           | Tunisia                                      | TN           |
| Cambodia                              | KH           | Iceland                                | IS           | Northern Mariana Islands                     | MP           | Turkey                                       | TR           |
| Cameroon                              | CM           | India                                  | IN           | Norway                                       | NO           | Turkmenistan                                 | TM           |
| Canada                                | CA           | Indonesia                              | ID           | Oman                                         | OM           | Turks and Caicos Islands                     | TC           |
| Cayman Islands                        | KY           | Iran, Islamic Republic of              | IR           | Pakistan                                     | PK           | Tuvalu                                       | TV           |
| Central African Republic              | CF           | Iraq                                   | IQ           | Palau                                        | PW           | Uganda                                       | UG           |
| Chad                                  | TD           | Ireland                                | IE           | Palestine, State of                          | PS           | Ukraine                                      | UA           |
| Chile                                 | CL           | Isle of Man                            | IM           | Panama                                       | PA           | United Arab Emirates                         | AE           |
| China                                 | CN           | Israel                                 | IL           | Papua New Guinea                             | PG           | United Kingdom                               | GB           |
| Christmas Island                      | CX           | Italy                                  | IT           | Paraguay                                     | PY           | United States                                | US           |
| Cocos (Keeling) Islands               | CC           | Jamaica                                | JM           | Peru                                         | PE           | United States Minor Outlying Islands         | UM           |
| Colombia                              | CO           | Japan                                  | JP           | Philippines                                  | PH           | Uruguay                                      | UY           |
| Comoros                               | KM           | Jersey                                 | JE           | Pitcairn                                     | PN           | Uzbekistan                                   | UZ           |
| Congo                                 | CG           | Jordan                                 | JO           | Poland                                       | PL           | Vanuatu                                      | VU           |
| Congo, the Democratic Republic of the | CD           | Kazakhstan                             | KZ           | Portugal                                     | PT           | Venezuela, Bolivarian Republic of            | VE           |
| Cook Islands                          | CK           | Kenya                                  | KE           | Puerto Rica                                  | PR           | Viet Nam                                     | VN           |
| Costa Rica                            | CR           | Kiribati                               | KI           | Qatar                                        | QA           | Virgin Islands, British                      | VG           |
| Cote d'Ivoire   Code d'Ivoire         | CI           | Korea, Democratic People's Republic of | KP           | Reunion  Reunion                             | RE           | Virgin Island, U.S.                          | VI           |
| Croatia                               | HR           | Korea, Republic                        | KR           | Romania                                      | RO           | Wallis and Futuna                            | WF           |
| Cuba                                  | CU           | Kuwait                                 | KW           | Russian Federation                           | RU           | Western Sahara                               | EH           |
| Curacao   Curacao                     | CW           | Kyrgyzstan                             | KG           | Rwanda                                       | RW           | Yemen                                        | YE           |
| Cyprus                                | CY           | Lao People's Democratic Republic       | LA           | Saint Barthelemy   Saint Barthelemy          | BL           | Zambia                                       | ZM           |
| Czech Republic                        | CZ           | Latvia                                 | LV           | Saint Helena, Ascensino and Tristan da Cunha | SH           | Zimbabwe                                     | ZW           |
| Denmark                               | DK           | Lebanon                                | LB           | Saint Kittsand Nevis                         | KN           |                                              |              |
| Djibouti                              | DJ           | Lesotho                                | LS           | Saint Lucia                                  | LC           |                                              |              |
| Dominica                              | DM           | Liberia                                | LR           | Saint Martin (French Part)                   | MF           |                                              |              |

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## Key Information Memorandum

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Building, opposite. NSS Karayogam, Sasthamangalam Village post office, Trivandrum, Kerala **Phone No:** 0471-4617690 **E-mail Id-** [camstvm@camsonline.com](mailto:camstvm@camsonline.com) **TUMKUR:** C695010, Co., Renuka Rashmi Nilaya, 1st Floor, Opposite Sridevi Diagnostics, 1st Cross, M G Road, Tumkur – 572101. **Email:** [camstkr@camsonline.com](mailto:camstkr@camsonline.com) **TUTICORIN:** Ground Floor, Mani Nagar, Tuticorin, Tuticorin, Tuticorin-628 008, Tel: 461-3209960. **TEZPUR:** Kanak Tower-1st Floor, Opposite IDBI Bank/ICICI Bank, C. K. Das Road, Tezpur Sonitpur, Assam – 784001, Phone No.: 3712 – 225252. **Tamluk:** Holding No - 58, 1st Floor, Padumbasan, Ward No 10, Tamluk Maniktala More, Beside HDFC Bank, Tamluk, Purba Medinipur, Tamluk- 721636, West Bengal. **E-mail Id-** [camstmz@camsonline.com](mailto:camstmz@camsonline.com) **Udaipur** 32, Ahinsapuri, Fatehpura circle, Udaipur – 313001 **Email:** [camsudp@camsonline.com](mailto:camsudp@camsonline.com). **Udhampur:** Guru Nanak Institute, NH-1A, Udhampur - 182101, Jammu, Tel no: 191-2432601, **UJJAIN :** 109, 1st Floor, Siddhi Vinayaka Trade Centre, Saheed Park, Ujjain -456 010, Tel: 734-3206291. **UNJHA (PARENT: MEHSANA):** 10/11, Maruti Complex, Opp. B R Marbles, Highway Road, Unjha, Unjha -384 170, Tel: -. **VADODARA:** 103 Aries Complex, BPC Road, Off R.C. Dutt Road, Alkapuri, Vadodara -390 007, Tel: 0265-301 8032, 301 8031. **VALSAD:** 3rd floor, Gita Nivas, opp Head Post Office, Halar Cross Lane, Valsad-396001, Tel: 02632-324623. **VAPI:** 208, 2nd Floor, Heena Arcade, Opp. Tirupati Tower, Near G.I.D.C, Char Rasta, Vapi, Vapi-396195, Tel: 0260 - 6540104. **VARANASI:** Varanasi- Office no. 1, Second floor, Bhawani Market, Building No. D-58/2-A1, Rathyatra, Beside Kuber Complex, Varanasi-221010, Uttar Pradesh, **VASCO(PARENT GOA):** No DU 8, Upper Ground Floor, Behind Techoclean Clinic, Suvidha Complex, Near ICICI Bank, Vasco da gama -403802, **VASHI:** BSEL Tech Park, B-505, Plot no 39/5 & 39/5A, Sector 30A, Opp. Vashi Railway Station, Vashi, Navi Mumbai – 400705, **Email id:** [camsvsh@camsonline.com](mailto:camsvsh@camsonline.com). **VELLORE:** No.1, Officer's Line, 2nd Floor, MNR Arcade, Opp. ICICI Bank, Krishna Nagar, Vellore-632 001, Tel: 0416-3209017. **VELLORE:** Door No. 86, BA Complex, 1st Floor, Shop No. 3, Anna Salai (Officer Line), Vellore – 632 001, Phone No.:0416 2900062, **Email:** [camsvel@camsonline.com](mailto:camsvel@camsonline.com) **VIJAYNAGARAM:** Portion 3, First Floor No:3-16, Behind NRI Hospital, NCS Road, Srinivasa Nagar, Vijaynagaram-535003. **Email:** [camsvzm@camsonline.com](mailto:camsvzm@camsonline.com) **VIJAYAWADA:** 40-1-68, Rao & Ratnam Complex, Near Chennupati Petrol Pump, M.G Road, Labbipet, Vijayawada-520 010, Tel: 0866-329 9181, 329 5202. **VISAKHAPATNAM:** CAMS Service Centre, Door No 48-3-2, Flat No 2, 1st Floor, Sidhi Plaza, Near Visakha Library, Srinagar, Visakhapatnam - 530 016 , Phone No.: 0891 6502010. **VIZAG:** Flat No.GF2, Door No.47-3-2/2, Vigneswara Plaza, 5th Lane, Dwarakanagar, Visakhapatnam - 530 016, Andhra Pradesh. 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