

Declaration Form of Ultimate Beneficial Ownership [UBO]/Controlling Persons

[MANDATORY for Non-Individual Investors]

INVESTOR DETAILS			
Investor Name			
Folio No./Application No.			
PAN*		* If PAN is not available, specify Fol	io No.(s)
CATEGORY			
no need to provide UBO de		ndia/Subsidiary of a or Controlled by a Li	isted Company [If this category is selected,
Name of the Stock Exchange w	here it is listed [#]		
Security ISIN#			
Name of the Listed Company (a	applicable if the investor is subsidiary/associa	te):	
	company or subsidiary of the Listed Compa	·	
	nership Firm/LLP Unincorporated assoc reated by a Will. Others [please specify]	iation/body of individuals Public Ch	aritable Trust Private Trust
UBO/CONTROLLING PE	RSON(S) DETAILS		
limit. Details of such individual If 'NO' - declare that no individual	at the following individual person holds directs are given below. Jual person (directly/indirectly) holds control on of Senior Managing Official (SMO) are pro-	lling ownership in our entity above the pre	
	UBO-1/Senior Managing Official (SMO)	UBO-2	UBO-3
Name of the UBO/SMO#			
UBO/SMO PAN# [For Foreign National, TIN to be provided]			
% of beneficial interest# >10% controlling interest	>10% controlling interest >15% controlling interest >25% controlling interest NA. (for SMO)	>10% controlling interest >15% controlling interest >25% controlling interest NA. (for SMO)	>10% controlling interest >15% controlling interest >25% controlling interest NA. (for SMO)
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	Place of Birth	Place of Birth
UBO/SMO Nationality		,	
UBO/SMO Date of Birth #		D D M M Y Y Y Y	
UBO/SMO PEP#	Yes – PEP Yes – Related to PEP N – Not a PEP.	Yes – PEP Yes – Related to PEP N – Not a PEP.	Yes – PEP Yes – Related to PEP N – Not a PEP.
UBO/SMO Address [include	Address	Address	Address
City, Pincode, State, Country]	City:	City:	City:
	State	State	State
	Pincode	Pincode	Pincode
UBO/SMO Address Type	Country	Country	Country
OBO/ Sivio Address Type	Residence Business	Residence Business	Residence Business
LIDO/SMO E 3	Registered Office	Registered Office	Registered Office
UBO/SMO Email			
UBO/SMO Mobile UBO/SMO Gender			
OBO/ SIVIO Gender	Male Female Others	Male Female Others	Male Female Others
UBO/SMO Father's Name	_ Odicis	_ Odicis	odieis

	UBO-1/Senior Managing Official (SMO	UBO-2	UBO-3	
UBO/SMO Occupation	Public Service Private Service Business Others	Public Service Private Service Business Others	Public Service Private Service Business Others	
SMO Designation#				
UBO/SMO KYC Complied?	Yes/ No.	Yes/ No.	Yes/ No.	
	If 'Yes,' please attach the KYC acknowledgement. If 'No,' complete the KYC and confirm the status.			
clear/incomplete/correct and you	ating Mutual Fund(s)/RTA may call for addi may provide the same as and when solicited. sufficient, required information in the given for		er required or if the given information is not uly signed by Authorized Signatory.	
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 [CAMS/The Fund/The 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:				
X Authorized Signa	tory 1 X Authori	ized Signatory 2	Authorized Signatory 3	
Name:	Name:	Name:		
Designation:	Designation:	Designa	ation:	
Date D D M M Y Y	Y Y Place	-		

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).

CALL US AT

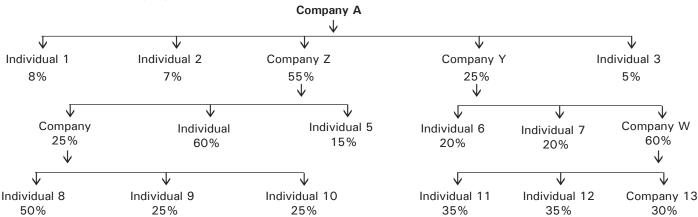
Please visit our website www.assetmanagement.hsbc.co.in for an updated list of Official Points of Acceptance of HSBC Mutual Fund. Please visit www.camsonline.com for an updated list of Official Points of Acceptance of our Registrar/Transfer Agent: Computer Age Management System.

TOLL FREE NUMBERS

Description	Investor related queries	Distributor related queries	Online related queries	Investor (Dialing from abroad)
Toll Free Number	1800-4190-200/1800-200-2434	1800-419-9800	1800-4190-200/1800-200-2434	+91 44 39923900
Email ID	investor.line@mutualfunds.hsbc.co.in	partner.line@mutualfunds.hsbc.co.in	onlinemf@mutualfunds.hsbc.co.in	investor.line@mutualfunds.hsbc.co.in

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 33% 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 - Partnership Firm ABC



For Partnership Firm ABC, all partners are considered as UBO as each of them holds > 10% of capital. KYC proof for these partners needs to be submitted including shareholding.

Illustration No. 3 - Trustee ZYX



For Trust ZYX, Beneficiaries A, B and D 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.



Declaration Form of Non-Profit Organization (NPO)

(MANDATORY FOR TRUSTS/SOCIETY)

INVESTOR'S DETAILS			
Investor Name	First Name	Middle Name	Last Name
PAN		Mobile No. + 9 1	
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	of DARPAN portal		
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 [CAMS/The Fund/The 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.			
OLONIA TUDE VAUTU	DELEVANT OF AL		

SIGNATURE WITH RELEVANT SEAL:

x	×	x
Authorized Signatory	Authorized Signatory	Authorized Signatory
Date/	Place:	