## FATCA & CRS Declaration - Non Individual

5		5000000	TOTAL TOTAL A SIGN TOTAL A	STOCKHOME INDIA LTD.  Member: National Stock Exchange of India Limited  Member: Bombay Stock Exchange Limited  SEBI Regn No.:INZ000182734				
PA	N	Trading	5		DP Code			
Name								
Please tick the applicable tax resident declaration -								
1. Is "Entity" a tax resident of any country other than India								
Sr. No.	Country		Tax Identification Number		ldentification Type (TIN or Other'; please specify)			
1.								
2.								
In	case Tax Identification Number is not avail-	able kindly prov	vide its functions	al equivalent				
In case Tax Identification Number is not available, kindly provide its functional equivalent.  In case TIN or its functional equivalent is not available, please provide Company Identification number or Global 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 here								
DADT A G. L. SH. LL. Fr LL. SL. S. L. S. S. L. S.								
1.	PART A (to be filled by Financial Institutions or Direct Reporting NFEs)  1. We are a.							
	Financial institution (Refer 1 of Part C)    GIIN     Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsored by another entity, please provide your sponsored by another entity.							
	or	or Direct reporting NFE (Refer 3(vii) of Part C) (please tick as appropriate)  GIIN above and indicate your sponsor's name below Name of sponsoring entity						
	(Refer 3(vii) of Part C)							
	GIIN not available (please tick as applicable)							
	OTH THOE available (picase tick as applicable)			please specify 2 digits	· · · · · · · · · · · · · · · · · · ·			
PAF	$oxed{RT~B}$ (please fill any one as appropriate "to $be$ filled $be$		***		, , , ,			
1.	Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)  Yes (If yes, please specify any one stock exchange on which the stock is regularly traded) Name of stock exchange							
2.					company and one stock exchange on which the stock is regularly traded)			
	(a company whose shares are regularly traded on an Name			Name of listed company				
	estavisnea securities market) (RCICI 20 011 al	Nature of relation: Subsidiary of the Listed Company or Controlled by a Listed Company Name of stock exchange						
3.	Is the Entity an active NFE (Refer 2c of Part C)		Yes Nature of Business					
	and any material and property of the control of		Please specify the sub-category of Active NFE (Mention code – refer 2c of Part C)					
4.	s the Entity a passiveNFE (Refer 3(ii) of Part C)		Yes Nature of Business					
UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)								
Cate	egory (Please tick applicable category):	Unlisted C	ompany	Partnership Firm	Limited Liability Partnership Company			
Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust								
Others (please specify)								
	se list below the details of controlling person(s), confirolling person(s). (Please attach additional sheets if n		s of tax residency / p	permanent residency / cir	tizenship and ALL Tax Identification Numbers for EACH			
Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of Part C)								

Details	UBO1	UBO2	UBO3					
Name of UBO								
UBO Code (Refer 3(iv) (A) of Part C)								
Country of Tax residency*								
PAN #								
Address								
	Zip	Zip	Zip					
	State:	State:	State:					
	Country:	Country:	Country:					
Address Type	☐ Residence ☐ Business ☐ Registered office	☐ Residence ☐ Business ☐ Registered office	☐ Residence ☐ Business ☐ Registered office					
Tax ID %								
Tax ID Type								
City of Birth								
Country of birth								
Occupation Type	☐ Service ☐ Business ☐ Others	☐ Service ☐ Business ☐ Others	☐ Service ☐ Business ☐ Others					
Nationality								
Father's Name								
Gender	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others					
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY					
Percentage of Holding (%) <sup>s</sup>								
* To include US, where controlling person is a US citizen or green card holder  "If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable.  * In case Tax Identification Number is not available, kindly provide functional equivalent  * Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary								
DECLARATION  These read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with								
I have read and understood the information requirements and the Terms & Conditions mentioned in this Form (read along with FATCA & CRS instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform <b>Stockhome India Limited</b> for any modification to this information promptly.								
I further agree to abide by the provisions of the scheme related documents inter alia provisions of FATCA & CRS on Automatic								
Exchange of Information (AEOI).  Name								
Designation								
Sign here: (1)		Date : D D M M Y Y Y Y  Place :						
For Investor convenience, <b>Stockhome India Limited</b> collecting this mandatory information.								
Please submit the form fully filled, signed, for all the holders, separately, and submit or dispatch the hard copy to-								
Stockhome India Limited								
J-6, 2nd Floor, RBI Enclave, Paschim Vihar, Delhi-110063								
• For Detail Terms & Conditions please visit www.stockhomeindia.com								