ME
MIR CADITAL DVT LTD

FATCA & CRS Declaration - Non-Individual

PAN DP Code												
Name												
Plac	e of Incorporation			Country o	of Incorp	oratio	n					
Address Type Residential Business Residential / Business												
Gross Annual Below Rs. I Lac Rs. I Lac to 5 Lac Rs. 5 Lac to 10 Lac												
	ome Rs. 10 Lac to 25 La	.c 🗀	Rs. 25 Lac					Crore	0 10 2			
Net Worth Amount Rs												
	se tick the applicable tax resident declaration -											
	s "Entity" a tax resident of any country other than	India	Yes N	lo								
	yes, please provide country/ies in which the er	ntity is a r	esident for ta	x purpose	s and the	e assoc	iated 7					
Sr. No.	Country		Tax Ident	ification	Numbe	r	Identification Type (TIN or Other*, please specify)					ify)
ı.												
2.												
3.												
In	case Tax Identification Number is not available	, kindly pr	rovide its fund	tional equ	ıivalent.							
In ca	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												
PAI	RT A (to be filled by Financial Institutions or Direct Report	ing NFEs)										
I.	. We are a, Financial institution (Refer 1 Part of C) or Direct reporting NFE (Refer 3(vii) Part of C) (please tick as appropriate) GIIN Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's name below Name of sponsoring entity Name of sponsoring entity								onsor's			
	GIIN not available (please tick as applicable)	Applie	d for		Not obtair	ned – N	Non-par	ticipating	g FI			
	Not required to apply for - please specify 2 digits sub-category (Refer 1A Part of C)											
PAI	RT B (blease fill any one as abbrobriate "to be filled by NF		<u> </u>	NFEs")								
1.	PART B (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs") 1. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2A Part of C) Yes No (If yes, please specify any one stock exchange on which the stock is regularly traded on the stock								ırly traded)			
2.	Is the Entity a related entity of a publicly traded of a company whose shares are regularly traded on an established securities market) (Refer 2B of Part C)	Yes No (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of listed company Nature of relation: Subsidiary of the Listed Company or Controlled by a Listed Company Name of stock exchange										
3.	Is the Entity an Active NFE ?	Yes No Nature of Business										
				Please specify the sub-category code (Refer 2C Part of C)								
4. Is the Entity a Passive NFE ? (Refer 3(ii) Part of C) Yes No Nature of Business												
UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)												
Cat	egory (Please tick applicable category):	=	Company		artnership			=		ity Partner	ship Co	mpany
F	Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust											
Dlas	Others (please specifyse list below the details of controlling person(s), confirmin	σ ΔΙΙ court	ries of tay reside	nov / norma	nent reside	ncu / s:4	izonchin	and All	Tay Idané	fication NI.	impore t	or EACU
cont	rolling person(s), (Please attach additional sheets if neces per-documented FFI's should provide FFI Owner Report	ssary)				,						

Details	UBO1	UBO2	UBO3						
Name of UBO									
UBO Code (Refer 3(iv) (A) Part of 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 (%) \$									
* 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									
	CERTIFI								
I/We have understood the information requirements of this form (read along with the FATCA & CRS instructions & definations) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We also confirm that I/We have read and understood the FATCA & CRS Terms and conditions below and hereby accept the same.									
Name									
Designation									
Client Signature		Date : D D M M Y Y Y Y							
For Investor convenience, MLB Capital Pvt. Ltd. collecting this mandatory information for updating across all Group Companies of MLB Capital Pvt. Ltd. whether you are already an investor or would become an investor in future.									

Please submit the form fully filled, signed, for all the holders, separately, and submit or dispatch the hard copy to

MLB Capital Pvt. Ltd.

information field along with the US Tax Identification Number.

301, Pratap Chambers, Gurudwara Road, Karol Bagh, New Delhi-110005, Ph.: 011-45060600

FATCA & CRS Terms & Conditions

Towards compliance with tax information sharing laws such as FATCA, we would required to seek additional personal ,tax and beneficiary owner information and certain certification and documentation from our account holders. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances we may be obliged to share information on your account with relevant tax authorities .If you have any question about your tax residency please contact your tax advisor. Towards compliance with such laws, 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. As may be required by domestic or overseas regulators/tax authorities, we may also be constrained to withhold and pay out any sum from your account or close or suspend your account(s) .Should there be any change in any information provided by you, please ensure you advise us promptly i.e, within 30 days. 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