



To,
Shah Investor's Home Ltd.
"SIHL House", Opp. Ambawadi Jain
Temple, Nr. Nehrunagar Cross Road,
Ahmedabad 380015 Gujarat, India.

Registered Address:
810, X-Change Plaza,
DSCCSL (53E), Road 5E, Block 53,
Zone 5, Gift City, Gandhinagar 382050

FATCA FORM NON -INDIVIDUAL

CLIENT ID

UCC Code

Date

Details of Ultimate Beneficial Owner Including Additional FATCA & CRS Information - Non Individual

Name of the entity

Type of address ☐ Residential or Business ☐ 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"

Customer ID / Folio Number

PAN

Date of incorporation

City of incorporation

Country of incorporation

Entity Constitution Type ☐ Partnership Firm ☐ HUF ☐ Private Limited Company ☐ Public Limited Company ☐ Society ☐ AOP/BOI

Please tick as appropriate ☐ Trust H Liquidator ☐ Limited Liability Partnership ☐ Artificial Juridical Person ☐ FI ☐ FI ☐ FBI-I ☐ FBI-II ☐ FBI-III

☐ Bank ☐ Government Body ☐ Non Government Organization ☐ Defense ☐ Society ☐ 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 country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below)

Country

Tax Identification Number*

Identification Type
(TIN or Other, Please specify)

- In case Tax Identification Number is not available, Kindly provide its function equivalent.
- In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number Or GHN, 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

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 institution⁶ or
Direct reporting NFE⁷

☐ Note: If you 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

(please tick as appropriate) ☐

Name of sponsoring entity

GIIN not available (please tick as applicable) ☐ Applied for

If the entity is a financial institution ☐ Not required to apply for - please specify 2 digits sub-category¹⁰

☐ Not obtained - Non-participating FI

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 ¹ (that is, a company whose shares are regularly traded on an established securities market)	Yes <input type="checkbox"/> (If yes, please specify any one stock exchange on which the stock is regularly traded) Name of stock exchange _____
2. Is the Entity a related entity ² of a publicly traded company (a company whose shares are regularly traded on an established securities market)	Yes <input type="checkbox"/> (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of listed company _____ Nature of relation: <input checked="" type="checkbox"/> Subsidiary of the Listed Company or <input checked="" type="checkbox"/> Controlled by a Listed Company Name of Stock exchange _____
3. Is the Entity an active ³ NFE	Yes <input type="checkbox"/> (If yes, please fill UBO declaration in the next section) Nature of Business _____ Please specify the sub-category of Active NFE <input type="text"/> <input type="text"/> Mention code-refer 2c of part D)
4. Is the Entity a Passive ⁴ NFE	Yes <input type="checkbox"/> (If yes, please fill UBO declaration in the next section) Nature of Business _____







Place _____
 Date / /