Mar-2016

C. R. KOTHARI & SONS SHARES & STOCK BROKERS PRIVATE LIMITED

CIN: U67120UP1998PTC038218

MEMBER: BSE LIMITED CLG. NO.059 SEBI REGD NO.: INB011042638, INF011042638
DEPOSITORY PARTICIPANT: CDSL DP ID No.19200 SEBI REGD NO.IN-DP-CDSL-95-2000
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FATCA/CRS DECLARATION FOR NON-INDIVIDUAL ACCOUNTS

Note – The information in this section is being collected because of enhancements to C. R. Kothari & Sons Shares & Stock Brokers Private Limited's account on-boarding procedures in order to fully comply with Foreign Account Tax Compliance Act (FATCA) requirements and the Common Reporting Standards (CRS) requirements.

For more information refer:

http://www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-

 $\underline{FATCAhttp://www.oecd.org/ctp/exchange-of-tax-information/automatic-exchange-financial-account-information-common-reporting-standard.pdf}$

FATCA / CRS declaration and details for entities

(We are unable to provide advice about your FATCA classification or interpretation of any terms. Please therefore seek advice from a tax professional on any FATCA aspects)

	Part A – Preliminary details (All fields n	nandatory)	
Sr No	Particulars	Details of Applicant	
1	Trading code		
	Client ID(To be provided only if demat		
	account is with CRKSSSBPL):		
2	Name of the Entity		
3	Address for Tax Residence		
	(including city, state, country and pin		
	code)		
4	Address Type (Business or registered		
	office)		
5	Entity Constitution Type. (Refer		
	Instruction6in annexure)		
6	Do you satisfy any of the criteria mentione		
	a. Is the entity a U.S. person	Yes No	
	(Please refer' other definitions' in the	(Please answer b) (Please go to c)	
	instructions)	Yes No Entity's exemption code:	
	b. Is the entity a Specified US Person	(Refer instruction 5 in annexure)	
	c. Is the entity formed/incorporated	Yes	
	outside India	< <if and="" city="" country="" incorporation<="" of="" p="" please="" specify="" yes,=""></if>	on /
		No formation>>	
	d. Is the entity having Tax Residency	<< If yes, please provide the following details>>	
	in any country (ies) other than India	Yes Country of Tax Identification Identification	on
		Tax No. /Functional Type#	
		No residency equivalent of the	
		foreign country	
		#In case Tax Identification Number is not available, kin	ndly
		provide functional equivalent or Company Identifica	
		Number or Global Entity Identification Number	
7	Is the entity a Financial Institution (FI)	Yes No No	
	{including an Foreign Financial Institution}	(Please fill Part B) (Go to next question)	
	(refer instruction 1 in annexure)		
	Or		
	A Direct Reporting NFFE		
	(Refer 'other definitions' in Annexure)		
8	Is the entity a publicly traded corporation /	Yes No	
	a related entity of a publicly traded	(Please fill Part C) (Please fill Part D)	
			C
	corporation/Active NFFE	Note: Part D needs to be filled for all accounts opened, irrespectiv	e or
	(For clarification, refer instruction 3 in	answer to this section.	e or

Part B – If your answer to question 7 in Part A is a YES, please provide details in relation to Financial Institutions/ Foreign Financial Institutions or Direct Reporting NFFEs

Particulars	Details of applicant				
The entity is:	Global Intermediary Identification Number (GIIN)				
1) Financial Institution					
2) Direct Reporting NFFE	Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN and name below: Name of sponsoring entity:				
	(For clarification, refer 'Other Definitions' in the Annexure)				
	Sponsoring Entity's GIIN:				
	(If GIIN provided, p <u>lease g</u> o directly to the decl <u>aratio</u> n and acknowledgment)				
If GIIN not available [tick any	a. Not obtained: b. Applied for				
one]:(Not applicable to Direct					
Reporting NFFE)	c. GIIN not required				
	Please specify reasons: [insert application date]				
	Please insert code:				
	(Mention Code – For clarification , refer instruction 2 in annexure)				
	(Please go to Declaration and Acknowledgment)				

	Part C – If your answer to question8 in Part A is a YES, please provide following details:				
Sr No	Particulars	Details of applicant			
1	a. Are you a publicly traded company?	Yes No			
	(Refer 'Instruction 3' in the annexure)	[Please fill C1(b)] (Please fill C2)			
	b. Are your shares regularly	Yes No			
	traded on a recognized stock				
	exchange	(Please fill C2)			
		If yes, please provide name of the stock exchange where the shares ar			
		regularly traded:			
		1			
		2. ————————————————————————————————————			
-		(Please go to Declaration and Acknowledgment)			
2	Are you a <i>related entity</i> *of a listed	Yes No			
	company mentioned in Part C (1)				
	above	Nature of relation with (Please fill C3)			
	# Related entity – An entity is a related	the related entity:			
	entity of another entity if either entity	Subsidiary of the listed			
	controls the other entity or the two entities are under common control	company. Controlled by a listed			
	entities are under common control	company			
		If yes, please provide name of the related entity that is listed:			
		if yes, please provide name of the related entity that is listed:			
		Name of the stock exchange where the shares of the related listed			
		entity are regularly traded:			
		1.			
		(Please go to Declaration and Acknowledgement)			
3	Entity is an Active NFFE	Please specify nature of business			
		Category: (Refer codes in Instruction 3)			
		(Provide UBO details in Part D and go to Declaration and Acknowledgment)			

Part D- If your an	swer to que	estion 8 in 1	Part A is a NO, p	olease provid	e following details:					
Entity is a Passive	NFFE:		Entity is Act	ive NFFE:						
(other than Direct of Please specify nature) Provide details of Annexure]) in the	re of busine f all UBO/s	ess: or Control	ling person/s,	[natural per	sons as per PMLA]	(including Owne	er Documented FFI	s [For clarification	on, refer 'Otl	her Definitions' in the
Are you an Owner	-document	ed FFI's -	Yes	No						
If 'Yes', <u>in additio</u> If 'No', Please prov				e a duly filled	form W8BEN E alo	ng with FFI Owne	r Reporting Statem	ent and Auditor	r's Letter.	
Name of UBO	Date of Birth	Gender	Country of Tax residency	Nationality	Residence address for tax purposes	Fathers name (If PAN not available)	Tax identification number or equivalent & Tax identification / functional equivalent document	Identification document: Passport/PA N etc	City and Country of Birth	UBO Code (For clarification, refer Instruction 7 in the Annexure)
Note: In case of a	multiple in	termediari	es, please provi	de the sharel	holding / controllin	g structure of eac	ch such intermediar	y/ies.		
number or equi B. Submit	valent / So documenta er of UBOs	cial Securi ary proof li are greate	ty Number [SS ke shareholdin r than 4 or the	SN] ng pattern du e space requi	ıly self-attested by	Authorized Sigr	n card holder of conatory / Company he given format ca	Secretary		

Declaration &	I being the beneficial owner of the account opened/ to be opened with					
Acknowledgement	C. R. Kothari & Sons Shares & Stock Brokers Private Limited and the income credited therein declare that the above information and information in the submitted documents to be true, correct and updated, and the submitted documents are genuine and duly executed I acknowledge that towards compliance with tax information sharing laws, such as FATCA/CRS, CRKSSSBPL may be required to seek additional personal, tax and					
	beneficial owner information and certain certifications and documentation from the account holder. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances (including if CRKSSSBPL does not receive a valid self-certification from me) the CRKSSSBPL may be obliged to share information on my account with relevant tax authorities. Should there be any change in any information provided by me, I ensure that I will advise CRKSSSBPL					
	promptly, i.e., within 30 days.					
	Towards compliance with such laws, CRKSSSBPL 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, CRKSSSBPL may also be constrained to withhold and pay out any sums from my account or close or suspend my account(s).					
Customer/Authorized						
person Signature						
& Designation						
Date						