

|                                    |                     |                 |                                     |                 |
|------------------------------------|---------------------|-----------------|-------------------------------------|-----------------|
| Name & ARN Code / RIA Code# / PMRN | Sub-Broker ARN Code | Sub-Broker Code | Employee Unique Identification No.* | TIME STAMP HERE |
|------------------------------------|---------------------|-----------------|-------------------------------------|-----------------|

\*Purpose of EUIN is to capture the identification of the sales person/employee/relationship manager of the distributor interacting with the investor, irrespective of whether the transaction is "Execution only" or "Advisory". However, in case of any exceptional cases where there is no such interaction, the investor can keep EUIN box blank and sign the following declaration; I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker. #// We hereby give my/ our consent to share/ provide transaction data feed/ unit holding in respect of my/ our investments under Direct Plan to the above mentioned RIA.

1st Holder/Guardian/POA Holder  
Authorised Signatory

**1. INVESTOR DETAILS**

Investor Name

PAN/PEKRN  Folio No.

**2. FATCA & CRS DETAILS FOR INDIVIDUALS (Including Sole Proprietor)**

|                                                            | 1st Applicant / Guardian                                 | 2nd Applicant                                            | 3rd Applicant                                            |
|------------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------|
| Place / City of Birth                                      | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Country of Birth                                           | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Nationality                                                | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Are you a tax resident in any other country outside India? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

If 'YES' please fill for ALL countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries

|                          | Country of Tax Residency | Tax Identification Number or Functional Equivalent | Identification Type (TIN or other please specify) | If TIN is not available please tick (✓) the reason A, B or C (as defined below)          |
|--------------------------|--------------------------|----------------------------------------------------|---------------------------------------------------|------------------------------------------------------------------------------------------|
| 1st Applicant / Guardian | <input type="text"/>     | <input type="text"/>                               | <input type="text"/>                              | Reason: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C |
| Second Applicant         | <input type="text"/>     | <input type="text"/>                               | <input type="text"/>                              | Reason: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C |
| Third Applicant          | <input type="text"/>     | <input type="text"/>                               | <input type="text"/>                              | Reason: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C |

Reason A - The country where the Account Holder is liable to pay tax does not issue Tax Identification Numbers to its residents.

Reason B - No TIN required (Select this reason Only if the authorities of the respective country of tax residence do not require the TIN to be collected)

Reason C - Others, please state the reason thereof:

**3. OTHER INFORMATION Please tick (✓)**

|                                                 | 1st Applicant / Guardian                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2nd Applicant                                                                                                                                                                                                                                                                                                                                                                                                                                             | 3rd Applicant                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Politically Exposed Person [PEP]</b>         | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Related to PEP                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Related to PEP                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Related to PEP                                                                                                                                                                                                                                                                                                                                                          |
| <b>Occupation (Please ✓)</b>                    | <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Student<br><input type="checkbox"/> Public Sector Service <input type="checkbox"/> Agriculturist<br><input type="checkbox"/> Government Service <input type="checkbox"/> Retired<br><input type="checkbox"/> Business <input type="checkbox"/> Housewife<br><input type="checkbox"/> Professional <input type="checkbox"/> Forex Dealer<br><input type="checkbox"/> Others _____ | <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Student<br><input type="checkbox"/> Public Sector Service <input type="checkbox"/> Agriculturist<br><input type="checkbox"/> Government Service <input type="checkbox"/> Retired<br><input type="checkbox"/> Business <input type="checkbox"/> Housewife<br><input type="checkbox"/> Professional <input type="checkbox"/> Forex Dealer<br><input type="checkbox"/> Others _____ | <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Student<br><input type="checkbox"/> Public Sector Service <input type="checkbox"/> Agriculturist<br><input type="checkbox"/> Government Service <input type="checkbox"/> Retired<br><input type="checkbox"/> Business <input type="checkbox"/> Housewife<br><input type="checkbox"/> Professional <input type="checkbox"/> Forex Dealer<br><input type="checkbox"/> Others _____ |
| <b>Gross Annual Income in ₹ (Please ✓)</b>      | <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 10-25 Lacs<br><input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 25 Lacs - 1 Cr.<br><input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> > 1 Cr.                                                                                                                                                                                                                             | <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 10-25 Lacs<br><input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 25 Lacs - 1 Cr.<br><input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> > 1 Cr.                                                                                                                                                                                                                             | <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 10-25 Lacs<br><input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 25 Lacs - 1 Cr.<br><input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> > 1 Cr.                                                                                                                                                                                                                             |
| <b>Networth in ₹ (For Non-Individuals only)</b> | <input type="text"/>                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Networth as of date (Not older than 1 year)</b>                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="text"/>                                                                                                                                                                                                                                                                                                                                                                                                                                      |

Folio No.

Name of Investor

TIME STAMP HERE

#### 4. DECLARATION & SIGNATURES

I/We have read and understood and agree to abide with terms and conditions of the Investment Strategy Information Document (ISID), Key Information Memorandum (KIM) and Statement of Additional Information (SAI) of Prism SIF provided by Jio BlackRock (Prism SIF) and the addendums issued thereto till date. I/We acknowledge and confirm that the information provided above is true and correct. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/ am aware that I may be liable for it. I/ We hereby authorize you [CAMS/Prism SIF/ Jio BlackRock Asset Management Private Limited ('AMC')] 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 SIF, its Sponsors, 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 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 promptly keep you informed in writing about any changes / modification to the above information in future. I/We authorize Prism SIF/AMC/RTA to provide relevant information to upstream payors to enable withholding to occur

1st Applicant/Guardian

2nd Applicant

3rd Applicant

POA Holder

#### INSTRUCTIONS

##### General

1. This form can be used by those investors who have earlier not provided the requirements on Additional KYC details, FATCA and CRS details.
2. This form can also be used and attached by those investors who are using OLD Application Forms / Transaction Forms / Slips which do not contain new requirements on FATCA, CRS and KYC details.
3. Non individual investors can mention additional KYC details in this form and should additionally submit the following forms:
  - a. FATCA and CRS details and declaration form.
  - b. Ultimate Beneficial Ownership (UBO) details forms, if applicable.
4. All the information is mandatory. Applications are liable to be rejected without any intimation to the applicants, if all details are not provided by all the investors / unit holders.
5. Investors should retain the acknowledgement evidencing submission of the transaction till they receive a confirmation of acceptance or rejection of transaction. In case of difference of details in acknowledgement vis-à-vis actual transaction document, the details as mentioned on transaction document will prevail.

##### Additional KYC Requirements and Details

1. Additional KYC details like Occupation details, Gross Annual Income / Net worth and other details as mentioned in the relevant sections of the form are mandatory for all investors / unit holders as applicable, including joint holders.
2. Details of net worth are mandatory for Non Individual applicants and optional for Individual applicants in lieu of gross annual income. While providing details of net worth, the same should be of a date which is within one year of the application.
3. However, if the investor has provided these details already in response to any request from the Fund, then they may choose to ignore this section.
4. Non Individual applicants, not being a company that is listed on any recognized stock exchange or is a subsidiary of such listed company or is controlled by such listed Company, are also required to submit a declaration of ultimate beneficial ownership in the mandated format as available on the website of the fund.

##### FATCA and CRS related details

1. Applicants / Unit holders are required to mandatorily provide the relevant information for FATCA and CRS, including Ultimate Beneficial Ownership (UBO) details. In case of any change in any information provided, Unit holders should ensure to advise the Fund / RTA promptly i.e within a period of 30 days.
2. All Applicants / Unit holders, individuals and non individuals, must be aware that the failure to providing all relevant details in relevant section and / or relevant forms will result in rejection of their investment application form, refund of application money, reversal of units allotted and the Fund will not be liable for any consequent loss to the Applicants / Unit holders.
3. Applicants like Individuals (including in the name of sole proprietorship firm), joint applicants, HUF, are required to provide details, as mentioned in this section, like Place and Country of birth,

Country of Citizenship / Nationality mandatorily. If the applicant/s have any countries of tax residency other than India, details of all such countries and relevant tax identification number needs to be provided. If the space in the form is not adequate, applicants are required to attach additional sheets with information duly signed.

4. All Non Individuals should fill and submit a separate form for FATCA and CRS declaration. Non-Individual entities, including partnerships, (other than those listed on a recognized stock exchange in India or is a subsidiary or related or controlled by such listed company) should also fill and submit a form for Ultimate Beneficial Ownership (UBO) details.
5. If you have any questions about your tax residency or other definitions or terms used, please contact your tax advisor. If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number.
6. It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach to the form.
7. Applicant / unit holder should note that they also specifically authorize to disclose, share, remit in any form, mode or manner, all or any of the information provided by, including all changes, updates to such information as and when provided, to the Prism SIF, its Sponsor, Asset Management Company, trustees, their employees / associated parties / 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 and other investigation agencies without any obligation of advising me / us of the same. Further, applicant / unit holder also authorizes to share the given information to other SEBI Registered Intermediaries to facilitate single submission / updation and for other relevant purposes.
8. Applicant / unit holder also undertakes to keep the Prism SIF informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information / documentary proof as may be required.
9. Please note that applicants / unit holders may receive more than one request for information if you have multiple relationships / accounts / folios with us. Therefore, it is important that you respond to each of our request, even if you believe you have already supplied any previously requested information.
10. In case any of the specified information provided by the applicant / unit holder is found to be false or untrue or misleading or misrepresenting, applicant / unit holder will be solely liable and will indemnify the Prism SIF, its Sponsor, Asset Management Company, Trustees, their employees / associated parties and the RTAs.
11. In case applicant / unit holder has any of the Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant details as may be asked for.
12. However, if the investor has provided these details already in response to any request from the Fund, then they may choose to ignore this section.