

**The Unit Trust Management Company to Assetline Mutual Funds: Assetline Capital (Private) Limited**

No.120, 120A, Pannipitiya Road, Battaramulla, Sri Lanka. Tel.: 0114700100 Fax: 0114700114 Web.: www.assetline.lk Reg.No.: PV 121

**Note:** This Form is to be filled in by the Customer and retained with the Unit Trust Management Company to Assetline Mutual Funds, in accordance with FIU regulations. Please tick (✓) the appropriate cage(s) within this Form.

### **Assetline Mutual Funds - Know Your Customer (KYC) Form**

This information is sought under the Prevention of Money Laundering Act No. 5 of 2006, Financial Transaction Reporting Act No. 6 of 2006 and the Rules for the securities Industry issued by the Financial Intelligence Unit (FIU) of the Central Bank of Sri Lanka.

All information as applicable in sections A, B and C below is mandatory for the Customer.

<b>Title of the Customer:</b>	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other .....						
<b>Full Name of the Customer:</b>							
<b>National Identity Card No. / Passport No. / Other No.</b>							
<b>Citizenship:</b> <input type="checkbox"/> Sri Lankan <input type="checkbox"/> Sri Lankan with dual citizenship <input type="checkbox"/> Sri Lankan residing overseas <input type="checkbox"/> Foreign National  Sri Lankan with dual citizenship or foreign national, please specify : <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Nationality</td> <td></td> </tr> <tr> <td>Visa Type</td> <td></td> </tr> <tr> <td>Expiry Date</td> <td></td> </tr> </table>	Nationality		Visa Type		Expiry Date		<b>Name, Date of Birth and Nationality verification:</b> <input type="checkbox"/> National Identity Card <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please Specify): .....
Nationality							
Visa Type							
Expiry Date							
<b>SECTION A – BASIC ACCOUNT INFORMATION:</b>							
Customer Type: Please tick (✓) the appropriate cage.							
<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Private Limited Company <input type="checkbox"/> Club / Association	<input type="checkbox"/> Joint <input type="checkbox"/> Partnership <input type="checkbox"/> Public Limited Company <input type="checkbox"/> Trust						
<b>SECTION B – ADDRESS &amp; CONTACT INFORMATION OF THE CUSTOMER:</b>							
<b>1. Proof of Residency document provided by the Customer:</b>							
(Please submit anyone of the following documents and tick (✓) against the Document attached.)							
<input type="checkbox"/> National Identity Card. <input type="checkbox"/> Bank Account Statement/Credit card statement. <input type="checkbox"/> Valid Tenancy Agreement. <input type="checkbox"/> Employment Contract. <input type="checkbox"/> Other (Please Specify) .....	<input type="checkbox"/> Driving License. <input type="checkbox"/> Utility Bill. <input type="checkbox"/> Income Tax Receipt/Assessment Notice. <input type="checkbox"/> Letter from a public authority.						
➤ Where applicable, the date of the supporting document should be within three months of the date on which the application was submitted.							

**2. Status of Residency Address (Premises):** Please tick (✓) the appropriate cage.

<input type="checkbox"/> Owner	<input type="checkbox"/> Lease/Rent	<input type="checkbox"/> Friends/Relatives
<input type="checkbox"/> Parents	<input type="checkbox"/> Official	<input type="checkbox"/> Board/Lodging
<input type="checkbox"/> Other Place (Please Specify) : .....		

**3. Permanent Residential Address:** .....

**4. Contact Details:**

Telephone No. (Office) ..... Mobile Number .....

Telephone No.(Residential) ..... Fax Number .....

E-Mail Address .....

**SECTION C – OTHER INFORMATION REGARDING THE CUSTOMER:**

**1. For a Person under Employment:**

➤ Occupation : .....

➤ Name of the Employer : .....

➤ Employer's Registered Address : .....

**2. For Self Employed / Professionals / Corporates:**

➤ Nature of business/Profession : .....

➤ Registered Address : .....

**3. Annual Income (In LKR):**

<input type="checkbox"/> Up to 1,000,000	<input type="checkbox"/> 1,000,000 to 5,000,000	<input type="checkbox"/> 5,000,000 to 10,000,000
<input type="checkbox"/> Over 10,000,000		

**4. Expected Value of Investment per annum (In LKR):** Please tick (✓) the appropriate cage.

<input type="checkbox"/> Less than 100,000	<input type="checkbox"/> 100,000 to 500,000	<input type="checkbox"/> 500,000 to 1,000,000
<input type="checkbox"/> 1,000,000 to 5,000,000	<input type="checkbox"/> 5,000,000 to 10,000,000	<input type="checkbox"/> 10,000,000 to 50,000,000
<input type="checkbox"/> 50,000,000 to 100,000,000	<input type="checkbox"/> 100,000,000 to 500,000,000	<input type="checkbox"/> Above 500,000,000

**5. Source of Funds:** Please tick (✓) the appropriate cage.

<input type="checkbox"/> Sales and business turnover	<input type="checkbox"/> Contract Proceeds	<input type="checkbox"/> Investment Proceeds/Savings
<input type="checkbox"/> Sale of Property / Assets	<input type="checkbox"/> Gifts	<input type="checkbox"/> Membership Contribution
<input type="checkbox"/> Commission Income	<input type="checkbox"/> Family Remittances	<input type="checkbox"/> Export Proceeds
<input type="checkbox"/> Salary/Profit/Professional Income	<input type="checkbox"/> Donations / Charities (Local / Foreign)	
Other (Please Specify) : .....		

**6. Assets owned and their values in LKR (Only in the case of Business & Non-Personal Accounts):**

Properties / Premises: .....

Financial Assets/Investments: .....

Other (Please Specify): .....

**7. Major Customers / Major Suppliers / Professional Activities / Business Interests / Other Connected Businesses/ Other Connected Parties:**

.....

.....

.....

**8.FATCA Status**

**US Person\* :** ☐ Yes (attach declaration) ☐ No

\* As per the Foreign Account Tax Compliance Act ("FATCA") of the United States of America ("US" / "USA"), the below - mentioned criteria may classify a customer as a "US Person":

- A Citizen of the USA (Including an individual born in the US but resident in another country, who has not renounced US citizenship)
- A person residing in the USA
- A lawful resident of the USA (Including a US Green Card holder)
- A person spends approximately 180 days within 3 years (not continuously) in the USA
- US corporations, estates and trusts
- Any entity that has a linkage or ownership to the US or US territories

**9. Are you or any member of your immediate family, a politically Exposed Person (PEP)\* ?**

☐ Yes ☐ No

*\* Politically exposed person (PEP) means an individual who is entrusted with prominent public functions either domestically or by a foreign country, or in an international organization and includes a Head of a State or a Government, a politician, a senior government officer, judicial officer or military officer, a senior executive of a State owned Corporation, Government or autonomous body but does not include middle rank or junior rank individuals*

**If Yes, Please Specify:** .....

**10. Customer's Investment Objective(s):**

.....

.....

.....

**11. Other Details / Remarks / Notes (If any):**

.....

.....

.....

**12. How did the Customer initially get to know about Assetline Mutual Funds:**

(Please tick (✓) the appropriate cage)

Media ☐ Referral ☐ Call Centre ☐ Other (Please Specify): .....

**Note:** Any changes to the above stated information must be duly notified to Assetline Capital (Private) Limited.

I confirm that the information provided on pages 1, 2 and 3 are true and correct.

.....

**Signature of the Customer**

**Date:**