

(DD - MM - YY)

ABL AMC A/C No.

For Office Use Only

## Account Opening Form - Institutions

### **General Instructions**

### For Institutions

- l. Fill the form in block letters and in legible handwriting to avoid errors in application processing. If any alteration is made, a countersign is mandatory.
- Fill the form yourself or get it filled in your presence Do not sign and/or submit blank forms.
- Please tick in the appropriate box wherever applicable, in case any field is not relevant, please mark 'N/A' (Not Applicable).
- 4. It is the responsibility of the applicant to carefully read and understand the guidelines and instructions provided in this form and the terms and conditions, especially risk
- disclosure, disclaimer, warning statement, investment objective in the Offering Document of the Funds.
- Applications incomplete in any respect and/or not accompanied by required documents are liable to be held or rejected until complete requirements are fulfilled.

  Applications complete in all respects and carrying necessary documentary attachments should be submitted at any branch of Allied Bank, Authorized Distributor, or courier
- them at ABL AMCL's Office: 48, Block- L, DHA Phase VI, Near Defence Raya Golf Club, Lahore.
  For more information about our products and services, call us at 042-111-225-262 or email at contactus@ablfunds.com.

### **Guidelines**

- Cash/third party instrument will not be accepted.
- 2. Payment can be made in the form of RTGS, cross cheque, online transfer, pay order and demand draft etc.
- 3. Please refer to the Investment Form for the name and type of fund. Instrument should be crossed 'Account Payee Only'.
- 4. If payment instrument is returned, the unpaid application will be rejected.
- 5. It should be the responsibility of the applicant to pay all charges and taxes in relation to the units purchased by him/her.
- 6. Front-end load (charges) and all taxes will be applicable on investment and Fund to Fund as per the constitutive documents of the Fund/ Plan.
- Application will be processed as per cut-off timings of the Fund.
- 8. Units will be allocated after deduction of applicable load (charges) and all taxes.
- 9. Back-end load (charges) will be applicable on Fund to Fund / Conversion / Redemption as per the Constitutive documents of the Fund.

	DOCUMENT CHECKLIST					
Before submitting this form, Please make sure that the following apwith a delay.	oplicable documents are attached. If one or more of the documents are mi	ssing, your application may be declined or processed				
CTC of Memorandum and Articles of Association/ By Laws/ Trust Deed/ Partnership Deed/Agreement	CTC of Identity Document & Account opening requisi on business letter head (in case of sole proprietor)	tion Certificate of Incorporation / Registration				
CTC of Board Resolution (Account Opening/ Authori. Investment/ Person Authorized to Operate the Acco Authority Letter from all partners, in original, authori the person(s) to operate firm's/LLP account.  CTC List of Authorized Signatories With their Specimen Signatures  CTC of CNIC/ NICOP of Directors. (As per Form A/ Form B & Form - 29)  CTC of CNIC/ NICOP of all Authorized Signatories/ Trustees / Partners/ Natural Person/ Beneficial Owner	unti/ (In case of a resident company) & Foreign Inc.Form – II (Ir of a foreign company)  Registered Partnership Firm (Attested copy of Registr Certificate with Registrar of Firms)  Details of ultimate beneficial owner(s)  W-8BEN-E & FATCA Questionnaire	of Business				
1 INVESTOR DETAILS	_					
Company / Business Name		ITN				
(Messrs)		IIIN				
Registration No. / Incorporation No.	Tax exemption Yes	NO If yes kindly provide valid exemption certificate				
Date of Incorporation / Place of Ir Registration	· ·	Commencement of Business				
Industry/ Sector	(In case of US fill FATCA Form and other Country fill CRS)					
Registered Address		City				
Land Line	E-mail	Fax				
Name of Directors (As per Form A) / Partners / Trustees						
(please attached seprate sheet, if required)	Websit	е				
Detail of Contact Person of the Applicant (Should only be a	an official or an Attorney of the Applicant)					
Name Mr./Mrs./Ms:	Designation of the official					
Association of the Attorney with the Applicant						
Address:	Land Line & Mo	obile No.				
L-111aii	CNIC / SNIC / NICOP / ARC / POC No.					
In case of Foreign person, please provide Passport details	Date of issue     -     -     including passport no, issuance place & expiry date of passport:	Expiry Date				
9 1 1 1 1	of issue Date of issue	Expiry Date				
	nd pertinent as the same email address may be used by ABL Funds to contact you ent information and execute transaction including redemption, conversion & upo	for update investment information and for other customer				

2 PRIMARY BANK ACCOUNT DE	2 PRIMARY BANK ACCOUNT DETAILS					
IBAN/ Bank Account #						
Title of Account						
Bank/ Branch Details	Branch Code					
Note: This Bank account will be used for redemption  3 ACCOUNT OPERATING INSTRU	n proceeds and cash dividend disbursement (If any).  CTIONS					
Single Signatory	Joint Signatories (By Any Two)  Jointly by All					
Other (Please specify)	Joint Signatories (by Arry 1990)					
4 INVESTMENT DETAILS						
Growth Units:  The Unit value grows in line with the gras and when declared.  Distribution option:  Cash Di	owth in the NAV, and the Unit Holders shall have the option to receive distribution income in the form of cash or bonus units, vidend  Re-Investment  OR					
	performance of the fund).  Lirement of the investor), please specify amount Rs.  The income required exceeds income earned on the Fund, the principal invested may deplete over time).					
Periodic Payment: Periodic Payment on Income Units (Lau Please Tick one: Monthl	thorize ABL AMC to redeem my units to pay my income at regular intervals based on the above instructions).  Y Quarterly Half Yearly Annually					
5 KNOW YOUR CUSTOMER (KYC	- MANDATORY					
The Know Your Customer (KYC) section Terrorist Financing Regulation 2020. Type of customer Bank	s meant to enable an investor to comply with the client identification program laid down by the Anti Money Laundering & Counter  Insurance Private Company Public Company NGO					
NPO	Govt. Organization Trust Retirement Fund Club, Societies & Association etc.					
Agents Other (Please sp						
Source(s) of Funds  Business In						
Parent Company Name (If applicable)	Resident/ Non Resident:					
Geographical area of activity	Nature of Business					
Ultimate Beneficiary						
Expected Monthly No. of Transaction						
Declaration by Investor (Please mark the box <b>Yes</b> or <b>No</b> as applicable)	Is your organization associated with any entity run / owned by a politically affiliated person / party?  Yes No Yes No Yes No					
	Yes No  Has any financial institution refused to open your account?  Did you ever open an account on behalf of any other entity?					
	Yes No Does your entity belong to countries/jurisdiction classified as "High Risk" Yes No Does the entity fall under the category of NPO / NGO / Trust and					
	under the classification assigned by FATF such as "Iran & North Korea" etc.? Charities  Yes No Yes No					
	Does your entity deal in high value items.  (Jewelry or precious metals / stones, pictures, painting, books or other  If yes, please fill & comply the following:  Ultimate Control held by					
	works of art, luxury cars items antiques etc. and others as decided by management)?  Sources of Funds					
	Yes No  • Governing body or NGO / NPO / Trust / Charities commit to inform about any change of control or ownership during					
	Is your entity the Beneficial Owner (BO) of Funds generated from dealing in above-mentioned items  the operation of the account;  Governing body or NGO / NPO / Trust / Charities commit to					
	Yes No provide Fresh resolution in case of any change in person(s)					
If No, please provide the following:  Name of BO:						
	Relation with the Owner:					
Latest Financial Information	Net Asset: Rs. Upto 10 million Rs. 10 million to 250 million Rs. 250 million to 1 billion Rs. 1 billion and above					
	Net Income: Rs. Upto 5 million Rs. 5 million to 50 million Rs. 50 million to 500 million Rs. 5					
Expected Monthly turnover / Investment Amount	Upto Rs. 10 million Rs. 10 million to 250 Million Rs. 250 million to 1 billion Rs. 1 billion and above					
Risk Category	High Moderate Low					

AUTHORIZED SIGNATORIES DETAILS							
NAME(S)		CNIC/ NICOP/ PAS	SSPORT NO.	Pla	ce of Issue	Date of Issue	Date of Expiry
DETAILS OF DIRECTOR(S)/ PARTNER(S)/ TRUSTE	E(S)/1	I MEMBER(S) OF GOVERNIN	G BODY/ MEMBER(S	) OF EXECL	JTIVE COMMITE	EE/ CEO/ MANAGINF	DIRECTOR(S)/
PRESIDENT/ PRINCIPAL TRUSTEE							
NAME(S)		CNIC/ NICOP/ PAS	SSPORT NO.	Pla	ce of Issue	Date of Issue	Date of Expiry
(A). PLEASE PROVIDE THE FOLLOWING DETAIL	S OF II	NDIVIDUAL (NATURAL PER	RSON) SHAREHOLDE	RS HOLDIN	NG 25% OR ABC	) OVE STAKE IN YOUR II	nstitution
NAME OF LEGAL PERSON(S) SHAREHOLDER(S)		CNIC/ NICOP/ PASSPORT NO	). Place of Issue	Da	te of Issue	Date of Expiry	% OF SHAREHOLDING
(B). PLEASE PROVIDE THE FOLLOWING DETAIL	SOFT	HE LEGAL PERSONS HOLD	DING SHARES EQUAL	TO 25% C	R ABOVE IN YO	UR INSTITUTION	
NAME OF LEGAL PERSON(S)			RE OF BUSINESS			% OF SHAREHOLI	DING
(C). PLEASE PROVIDE THE FOLLOWING DET	All S (	OF THE INDIVIDUAL (NAT	TURAL PERSON) HO	I DING SH	ARES FOLIAL T	O 25% OR ABOVE (	OF THAT LEGAL
PERSON MENTIONED IN (B) ABOVE	/ (ILJ (		TOTAL TERSON, THE		TITES EQUITE I	0 23 /0 011 /100 / 2 0	or mixtracedite
NAME OF INDIVIDUAL (NATURAL PERSON) SHAREHOLDER(S)	CI	NIC/ NICOP/ PASSPORT NO.	Place of Issue	Date of	Issue Da	ite of Expiry	% OF SHAREHOLDING
(D). PLEASE PROVIDE THE DETAILS OF LEG AUTHORITY IN YOUR INSTITUTION OR AN							AS AN EXECUTIVE
NAME OF LEGAL PERSON(S)	CI	NIC/ NICOP/ PASSPORT NO.	Place of Issue	Date of	Issue Da	ite of Expiry	DETAILS OF BENEFICIAL OWNERSHIP
(E). PLEASE PROVIDE THE DETAILS OF BEN	FEICH	AL OWNER OF THE INSTIT	TUTION NOT DISCL	OSED IN A	NY OF THE AR	OVE	
NAME OF BENEFICIAL OWNER(S)	El ICI/	CNIC/ NICOP/ PASSP		Place of		ate of Issue	Date of Expiry
		CHIC/ MCOI/ 17/331	on no.	i idee oi	15544	.te or issue	

ENTITY SELF CERTIFICATION FOR FATCA PURPOSE

Signature of Authorized Signatory

Signature of Authorized Signatory Signature of Authorized Signatory Signature of Authorized Signatory

Instructions for completion:

tool be and full mote to used for any other purpose. In cases they are contained in the form in the form in fly on here were questions about how the complete this form you alroud conduct your last and complete the form you alroud conduct your last and complete the form you alroud conduct your last advise.    Provide the control and of ministry that the provide the form you alroud conduct your last advise.	The Foreign Account Tax Compliance A to evade taxes. Under U.S. federal tax I account (whether such persons are US t account (while not be used for any other).	aw, ABL Asset Manag axpayers or not). Infor	ement Compai mation collecte	ny Pvt Ltd is ed will be us	s required to request cented solely to fulfil the AB	rtain taxpayer information from ce L Asset Management Company's ro	rtain persons who maintain an equirements under U.S. federal
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A Financial Institution  1.2 Participating Foreign Financial Institution  1.3 Participating Foreign Financial Institution  1.4 Package Provide Form W8 BEN E  1.4 Package Provide Form W8 BEN E  1.5 Package Institution or a Particle furnishation  1.6 Package Complete Section 1  1.6 December Compliant Foreign Financial Institution or Institution  1.6 December Compliant Foreign Financial Institution of the State of the State of State o	SECTION 1: CLASSIFICATION FOR F	ATCA PURPOSE					
Pease provide form W888H3	Please tick one box only in this section.						
1.2 Participating Foreign Financial Institution 1.4 Relactant Financial Institution or a Partner Jurisdiction Financial Institution 1.4 Relactant Financial Institution or a Partner Jurisdiction Financial Institution 1.5 Remark Institution resident in the U.S. or in a U.S Termory 1.5 December Of Pease provide Form W8 881k and complete Section 2 1.6 December Of Pease provide Form W8 881k and complete Section 2 1.7 Acrise Non-Financial Institution decided those listed above) 1.8 December Of Pease provide Form W8 881k and complete Section 2 1.9 Report Form W8 881k and complete Section 2 1.0 Specified U.S. Person 1.0 Specified U.S. Person 1.1 Please provide Form W9 981k and complete Section 3 1.2 Please provide Form W9 981k and complete Section 3 1.3 Specified U.S. Person 1.4 Specified U.S. Person 1.5 Specified U.S. Person 1.6 Specified U.S. Person 1.7 Specified U.S. Person 1.8 Signature:  SECTION 2: FINANCIAL INSTITUTIONS 2.1 Please provide Form W9-9 and U.S- III Number 1 1.9 Specified U.S. Person 1.0 Gills in ord a Complete Section of the Book reasons: 1.0 The Institution of the Complete Section of the Book reasons: 1.0 The Institution of the Complete Section of the Book reasons: 1.0 The Institution of the Complete Section of the Book reasons: 1.1 Pease provide Form W9-9 and U.S- III Number 1 1.2 Section 3: Financial Institution of the Complete Section of					N	de Ferre MODEN F	
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1.5 Financial Institution resident in the U.S. A rin a U.S. Ferritory   Pease complete Section 2   1.8 Power Complete Section 3   Pease provide Form W8 BEK   1.8 Non-Financial Foreign Financial Institution (Besides those listed above)   Pease provide Form W8 BEK   1.8 Power Pease Complete Section 3   1.9 Specified U.S. Person   Pease provide Form W9 and U.S. This Number   1.9 Specified U.S. Person   Pease provide Form W9 and U.S. This Number   1.9 Specified U.S. Person   Pease provide Form W9 and U.S. This Number   1.9 Specified U.S. Person   Pease provide Form W9 and U.S. This Number   1.9 Specified U.S. Person   Pease provide Form W9 and U.S. This Number   1.9 Specified U.S. Person   Pease provide Form W9 and U.S. This Number   1.9 Linear Provide a City Indicated by Indicated Institution and have not type dobtained a Silin   1.0 The Entity is a IAS Patricial Provide a City Indicated Institution and have not type dobtained a Silin   1.0 The Entity is a IAS Patricial Provide a City Indicated U.S. Person   1.0 The Entity is a IAS Patricial Provide A City Indicated Institution Floragical Institution and have not type dobtained a Silin   1.0 The Entity is a IAS Patricial Provide A City Indicated Institution Floragical Institution and have not type dobtained a Silin   1.0 The Entity is a IAS Patricial Provide A City Institution Institution Floragical Institution And Provide Institution Institution Floragical Institution And Provide Institution Floragical Institution Floragi					☐ Account can	nnot be opened	
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Pease provide form W-9 and US-TIN Number					☐ Please compl	ete Section 3	
SECTION 2: FINANCIAL INSTITUTIONS  2.1 Please provide your Global Intermediary Identification Number ("GIN") 2.2 If you are unable to provide a GIN, please sick one of the below reasons; (i) the Intity is a IGA Partner Jurisdiction Financial Institution and have not yet obtained a GIN       (ii) GIN not yet obtained but sponsored by another entity which does have a GIN       Sponsor's Name:  Sponsor's Name:  Sponsor's GIN: (iii) US Person but not a Specified US Person     SECTION 3: PASSIVE NON-FINANCIAL FOREIGN ENTITY  If you are a Passive Non-Financial Foreign Entity, we are required to establish whether any Controlling Person (refer Glossary for meaning of Controlling Person) is a US critizen or resident in the U.S for tax purposes: Please provide certification for all such controlling persons of the entity.  Full Name   U.S Critizen   U.S Resident   Place of Birth   TIN (if applicable)   Contact No.   Yes No	•				☐ Please provid	e Form W-9 and	
SECTION 2: FINANCIAL INSTITUTIONS  2.1 Pease provide your Global Intermediary Identification Number (*Clin*) 2.2 If you are unable to provide a cililu, please tick one of the below reasons; (i) The Entity is al GA Partner Jurisdiction Financial Institution and have not yet obtained a GliN (ii) GliN not yet obtained but sponsored by another entity which does have a GliN Sponsor's GliN: (iii) US Person but not a Specified US Person  SECTION 3: PASSIVE NON-Financial Foreign Entity, we are required to establish whether any Controlling Person (refer Glossary for meaning of Controlling Person) is a U.5 citizen or resident in the U.5 for tax purposes. Please provide certification for all such controlling persons of the entity.  Full Name  Ves No Yes No Ye							
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Full Name US Citizen VS Resident Yes No Yes	If you are a Passive Non-Financial Foreign	Entity, we are requir	ed to establish	whether ar	ny Controlling Person (re	efer Glossary for meaning of Contr	olling Person) is a U.S citizen or
Yes No  Address  *If additional self-certifications are required, please copy this page.  Authorized Signatory 1  Name:  Contact No.:  Signature:  Signature:	resident in the U.S. for tax purposes. Pleas	se provide certification	n for all such co	ntrolling pe	rsons of the entity. *		
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Yes No Address  *If additional self-certifications are required, please copy this page.  Authorized Signatory 1 Authorized Signatory 2  Name: Name: Contact No.: Signature: Signature:							
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Yes No Yes No  Ownership %  Position  Address  *If additional self-certifications are required, please copy this page.  Authorized Signatory 1  Name:  Contact No.:  Signature:  Signature:							
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Company's Rubber Stamp

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## **DECLARATION** I/ we hereby confirm the information provided above is true, accurate and complete. Subject to applicable local laws, I/ we hereby consent for ABL AMC or any of its affiliates to share my information with domestic or overseas regulators or tax authorities where necessary to establish my/our tax liability in any jurisdiction. I/we undertake to notify ABL AMCL within 30 calendar days if there is a change in any information which I/ we have provided earlier. Where required by domestic or overseas regulators or tax authorities, I/ we consent and agree that ABL AMCL may withhold from our account(s) such amounts as may be required according to applicable laws, regulations and directives. I/ we will indemnify and hold harmless ABL AMCL from any loss, action, cost, expense (including, but not limited to sums paid in settlement of claims, reasonable attorneys' and consultant fees, and expert fees), claim, damages, or liability which arises or is incurred by ABL AMCL in discharging its obligations under FATCA and/or as a result of diclosures to the US tax authorities. Signature: **FATCA Status:**

### FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) DUE DILIGENCE - ENTITIES (FOR OFFICE USE ONLY) U. S. owned Passive NFFE Specified U.S. person Non-U.S. person Direct Non-Participating FFI Recalcitrant Direct Reporting NFFE Other (Please Specify) (As per W8 forms and FATCA Due Diligence Form) It is hereby confirmed that to the best of our knowledge, customer self-certification is correct. If subsequently anything comes to our knowledge that the customer is a specified U.S. person then we will get the customer's status updated as a U.S. reportable account. Signature: Designation:

### **GLOSSARY**

Financial Institution
The term "Financial Institution" means a Custodial Institution, a Depository Institution, an Investment Entity, or a Specified Insurance Company as defined below:
Custodial Institution:
Any Entity that holds, as a substantial portion of its business, financial assets for the account of others.

others.

Depository Institution:

Any Entity that accepts deposits in the ordinary course of a banking or similar business.

Investment Entity: Any Entity that conducts as a business (or is managed by an entity that conducts as a business) one or more of the following activities or operations for or on behalf of a customer:

Participating Foreign Financial Institution (PFFI)
A Participating Foreign Financial Institution is a FFI that enters into an agreement with the US Internal Revenue Service (IRS) to undertake certain due diligence, withholding and reporting requirement for US account holders, including an FFI that is treated as a Reporting FI under a Model 2 IGA and that is certifying that it will comply with the terms of an FFI Agreement, as modified by the terms of the applicable Model 2 IGA.

Non-Participating Foreign Financial Institute (NPFFI) A Foreign Financial Institution (FFI) that is not a participating FFI, a deemed-compliant FFI or an exempt beneficial owner

Pakistani Financial Institution (PFI)

PFI is a FI resident in Pakistan, but excludes any branch of such FI that is located outside Pakistan A branch of a FI, which is not resident in Pakistan, but is located in Pakistan.

Partner Jurisdiction It is a jurisdiction that has in effect an agreement with the U.S. to facilitate the implementation of FATCA.

Partner Jurisdiction FI
A FI established in a Partner Jurisdiction, but excluding any branch of such FI that is located outside the
Partner Jurisdiction. A branch of FI, which is not established in the Partner Jurisdiction, but is located
in the Partner Jurisdiction.

Deemed Compliant FFI
A Deemed Compliant FFI in the context of Annex II of a Model 1 IGA is generally a Non-Reporting FI
that is not required to register with the Internal Revenue Service (IRS) and certifies its status by
providing a withholding agent with a valid US tax form W-8 BEN-E. It includes non-registered local
banks, retirement plans, non-profit organizations, Foreign Financial Institutions with only low-value
accounts, and certain owner-documented Foreign Financial Institutions. However, in order to qualify
as a Non-Reporting FI, it is essential that such FI must meet all the conditions as captured under
Annexure II of the IGA Model 1 to ratify their status as such.

Non-Financial Foreign Entity (NFFE) A Non-Financial Foreign Entity is any Non-US entity that is not a Financial Institution. NFFE is further classified as Active NFFE and Passive NFFE.

**Active NFFE** It is an NFFE that meets any of the following criteria:

Active NFFE It is an NFFE that meets any of the following criteria:

a) Less than 50 percent of the NFFE's gross income for the preceding calendar year or other appropriate reporting period is passive income and less than 50 percent of the assets held by the NFFE during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of passive income;
b) The stock of the NFFE is regularly traded on an established securities market or the NFFE is a Related Entity of an Entity the stock of which is regularly traded on an established securities market;
c) The NFFE is organized in a U.S. Territory and all of the owners of the payee are bona fide residents of that U.S. Territory;
d) The NFFE is a government (other than the U.S. government), a political subdivision of such government (which, for the avoidance of doubt, includes a state, province, county, or municipality), or a public body performing a function of such government or a u.S. Territory, an international organization, a non-U.S. central bank of issue, or an Entity wholly owned by one or more of the foregoing;
e) Substantially all of the activities of the NFFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an NFFE shall not qualify for this status if the NFFE functions (or holds itself out) as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes;
f) The NFFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFFE shall not qualify for this exception after the date that is

- Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rateand index instruments; transferable securities; or commodity futures trading.
   Individual and collective portfolio management; or
   Otherwise investing, administering, or managing funds or money on behalf of other persons.

- Exempt Beneficial Owner
  The term "Exempt Beneficial Owner" means:
  Governmental Entity
  International Organization
  Central Bank
  Pension Fund of an Exempt Beneficial Owner
  Investment Entity wholly owned by Exempt Beneficial Owners

i - It is established and operated in its jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its jurisdiction of residence and it is a professional organization, business league, chamber of commerce, labor organization, agricultural or horticultural organization, civic league or an organization operated exclusively for the promotion of social welfare;
ii - It is exempt from income tax in its jurisdiction of residence;
iii - It has no shareholders or members who have a proprietary or beneficial interest in its income or assests:

iii - It has no shareholders or members win nave a proprietary or content and assets; iv - The applicable laws of the NFFE's jurisdiction of residence or the NFFE's formation documents do not permit any income or assets of the NFFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity other than pursuant to the conduct of the NFFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFFE has purchased; and v - The applicable laws of the NFFE's jurisdiction of residence or the NFFE's formation documents require that, upon the NFFE's liquidation or dissolution, all of its assets be distributed to a governmental entity or other non-profit organization, or escheat to the government of the NFFE's jurisdiction of residence or any political subdivision thereof

Passive Income
Passive Income means income other than trading income (income from core business) and would include, for example (a) Interest (b) Income equivalent to interest, including amounts received in lieu of interest (c) Rents and royalties (d) Annuities (e) Foreign currency gains.

Controlling Person
Controlling Person means a natural person who exercise control over an Entity. In case of Limited
Company/Corporation, Directors and individual (natural persons) shareholders holding 20% or above
stake will be treated as Controlling Person. If legal person holds 20% or above stake in an entity,
identify and obtain information of individuals (natural persons) holding shares equal to 20% or above
of that legal person. In case of Partnership, all partners will be treated as Controlling Persons

Related Entity
An entity is a related entity to another entity if one entity controls the other or the entities are under common control, where "control" is defined as a direct or indirect ownership of more than 50% of the vote or value in an entity. > Specified U.S. Person A Specified U.S. Person is any U.S. Person who is not excluded from the definition of a Specified U.S. Person. Therefore, to classify an entity or individual as a Specified U.S. Person, it should first meet the definition of a U.S. Person then the following exceptions should be applied:

Any corporation which is a member of the same expanded affiliated group as a corporation the stock of which is regularly traded on an established securities market.

Any organization exempt from taxation under IRC Section 501(a) or an individual retirement plan.

- Any organization exempt from taxation under IRC Section 30 (a) or an individual exercise plan.
  The U.S or any wholly owned agency or instrumentality thereof.
  Any State of the US, any US Territory, any political subdivision of any of the foregoing, or any wholly owned agency or instrumentality of any one or more of the foregoing. Any US regulated bank.
  Any US real estate investment trust.
  Any US real estate investment Company.
  Any US common trust fund.
  Any US trust which is tax exempt or is a charitable trust.
  A registered dealer in securities, commodities, or derivatives financial instruments (including notional principal contracts, futures, forwards, and options).
  A US broker, who is a dealer, a barter exchange, or any other person who regularly acts as a middleman with respect to property or services.

- US Person
   A US Person is an individual who is a citizen or resident of the US (a resident of the US includes an individual who is a green card holder or who meets the substantial
- Corporation, partnership, estate and trust organized in the U.S. or under US laws.

Form w-8BEM. Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding IRS Form entitled "Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding." In general, the person providing this uses it to certify its status as a non-US person and that it is the beneficial owner of the income to which it relates.

Form W-9 - Request for Taxpayer Identification Number (TIN) and Certification IRS Form entitled "Request for US Taxpayer Identification Number and Certification." The person providing this uses it to certify its status as a US citizen or other US person.

Signature of	Signature of	Signature of	Signature of	Company's
Authorized Signatory	Authorized Signatory	Authorized Signatory	Authorized Signatory	Rubber Stamp

7 CRS SELF-CI	ERTIFICATION FORM FOR ENTITIES								
Even if you have already provided information in relation to the United States Government's Foreign Account Tax Compliance Act (FATCA), you may still need to provide additional information for the CRS as this is a separate regulation.									
SECTION 1 – IDEN	TIFICATION OF ACCOUNT HOLDER								
Legal Name of Entity Current Address Mailing Address		Country Country	of Incorporation						
Registration Number									
SECTION 2 – ENTIT	Y TYPE (PLEASE PROVIDE THE ACCOUNT HOLDER'S ST	ATUS BY TICKING ON	NE OF THE FOLLOWING BOXES)						
i. An Investm Note: If tick	itution – Investment Entity ent Entity located in a Non-Participating Jurisdiction and manag ting this box please also complete the sub-section 2(a) stment Entity	ged by another Financial	Institution						
If you have tie	tution – Depository Institution, Custodial Institution or Specified ked (a) or (b) above, please provide, if held, the Account Holder IN") obtained for FATCA purposes.		dentification						
	rket, provide name of that market: elated Entity of a regularly traded corporation, please provide th	ne name of the regularly	r traded corporation						
(e) Active NFE – a (f) Active NFE – c	n Government Entity or Central Bank In International Organization Other than (c) - (e) (for example a start-up NFE or a non-profit NF Hote: If ticking this box please also complete the sub-section 2(a								
· ·	ked 1(a)(i) or 1(g) above, then please:								
(a) Indicate the na	ame of any Controlling Person(s) of the Account Holder:	(ii)							
(II) (b) Complete "Controlling Person tax residency self-certification form" for each Controlling Person. Note: Please refer to "Controlling Person tax residency self-certification form" and complete the said form for each Controlling Person. If there are no natural person(s) who exercise control of the Entity, then the Controlling Person will be the natural person(s) who holds the position of senior managing official. (Please see the definition of Controlling Person in GLOSSARY section).									
SECTION 3 – COUNTRY OF RESIDENCE FOR TAX PURPOSES AND RELATED TAXPAYER IDENTIFICATION NUMBER ("TIN")									
Please indicate countries where Account Holder is tax resident and TIN for each country or equivalent number. If a TIN is unavailable please provide the appropriate reason A, B or C as explained below:  Reason A - The country/jurisdiction where the Account Holder is resident does not issue TINs to its residents;  Reason B - The Account Holder is unable to obtain a TIN or equivalent number (Please explain reason of not obtaining TIN);  Reason C - No TIN is required for that country/ jurisdiction.									
	Country of tax residence	TIN	If no TIN available enter Reason A, B or C						
1.									
2.									
3.									
	ollowing boxes why you are unable to obtain a TIN if you selecte is tax resident in more than three countries please use a separat								

the Account Holder is tax resident in more than three countries please use a separate s

### **CRS DECLARATION & SIGNATURE (ENTITY)**

If we understand that the information supplied by me/our is covered by the full provisions of the terms and conditions governing the Account Holder's relationship with the company setting out how it may use and share the information supplied by me/us. If we acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be provided to the tax authorities of the country in which the account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information. If we certify that I am/we are authorized to sign for the Account Holder of all the account(s) to which this form relates.

I/ we hereby declare and confirm (as an authorized signatory of the Entity) that all information provided in this Self-Certification Form is to the best of my/our knowledge and belief, correct and complete.

If we hereby undertake that where If we have provided information regarding any other person (such as Controlling Person or other Reportable Person to which this form relates). If we will immediately inform/notify those persons that If we have provided such information to the Company, and that such information may be provided to the tax authorities of the country/jurisdiction in which the account(s) is/are maintained and exchanged with tax authorities of another country or jurisdiction in which person may be a tax resident pursuant to intergovernmental agreements to exchange financial account information. If we hereby indemnify and hold the Company and its directors, officers, representatives and employees harmless from all costs, expenses, losses, damages, liability, penalties incurred, suffered and/or imposed on the Company as a result of any suits, proceedings and/or litigation arising out of or in any manner connected with this Self-Certification Form and/or the information supplied hereby. If we agree and undertake that if there is any change in any information which If we have provided in this form, If we shall submit a new form within thirty (30) calendar days.

,					-			,				
Name:		Date:		-			-					
Signature:		Capacity:										

lote: Please indicate the capacity in which you are signing the form (for example 'Authorized Officer'). If signing under a power of attorney please also attach a certified copy of the power of attorney.

Signature of	Signature of	Signature of	Signature of	Company's
Authorized Signatory	Authorized Signatory	Authorized Signatory	Authorized Signatory	Rubber Stamp

### **INSTRUCTION CRS - SELF-CERTIFICATION**

Introduction
Organization of Economic Cooperation and Development (OECD) has developed a common framework known as Common Reporting Standard for Automatic Exchange of Information (AEOI). Government of Pakistan has signed the Multilateral Convention on Multual Administrative Assistance in Tax Malters of OECD to implement CRS. As per the State Bank of Pakistan BPRD Circular Letter No. 10 dated 19th April, 2017, and Government of Pakistan Notification SRO No. 166/I/2017, ABL Asset Management Company Limited (ABL AMCL, the Company) is required to comply with the local applicable CRS requirements in accordance with relevant local laws and legally obligated to collect certain information and/or documents from the account holders related to their tax residence and report such information and/or documents with the appropriate tax authorities in compliance with CRS requirements applicable in Pakistan.

Under the CRS, ABL AMCL is required to determine where an entity is 'tax resident' (this will usually be where you are liable to pay corporate income taxes). If you are tax resident outside the country where your account is held, we may need to give information to the local tax authority, along with information relating to your accounts. That may then be shared between relevant tax authoritie

Who should complete this form?

Please complete the form where you need to self-certify on behalf of an entity accountholder. For joint or multiple accountholders please complete a separate form for each accountholder. If you are an individual accountholder or sole proprietor, please complete the "Individual CRS Self-Certification Form".

Form."

Form.

Self-certification Validity and Duty of Due Care —
The form will remain valid unless there is a change in circumstances relating to information, such as the account holder's tax status or other mandatory field information that makes the form incorrect or incomplete. In that case it shall be your responsibility to notify us immediately and provide an updated self-certification within 30 days of such change in circumstances. Completion of this form will ensure that ABL AMC holds accurate and up-to-date information about your tax residence. Your cooperation and due care will help you avoid any inconvenience that may occur due to inaccurate status reporting.

Further Information If you have any questions on defining your tax residency status, please consult your professional tax consultant for advice. You can also find out more, including a list of jurisdictions that have signed agreements to automatically exchange information, along with details about the information being requested, on the OECD Portal and more information on Common Reporting Standard on FBR website http://www.fbr.gov.pk Please refer to Appendix attached with form for definitions and CRS Key terms.

### Key Terms and Definitions Note:

Key Terms and Dehnitions Note:
These are selected definitions provided to assist you with the completion of this form. Further details can be found within the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information (the CRS"), the associated Commentary to the CRS, and domestic guidance. This can be found at the OEDC Portal

If you have any questions then please contact your tax advisor or domestic tax authority

The Account Holder means the person listed or identified as the holder of a Financial Account by the Financial Institution that maintains the account. A person, other than a Financial Institution, holding a Financial Account for the benefit or account of another person as agent, custodian, nominee, signatory, investment advisor or intermediary is not treated as holding the account for purposes of these rules and such other person is treated as holding the account. In the case of a Cash Value Insurance Contract of an Annuity Contract, the Account Holder is any person entitled to access the Cash Value or change the beneficiary of the contract. If no person can access the Cash Value or change the beneficiary of the contract. Ho person can access the Cash Value or change the value in the payment under the terms of the contract. Upon the maturity of a Cash Value Insurance Contract or an Annuity Contract, each person entitled to receive a payment under the contract is treated as an Account Holder.

An NFE is an Active NFE if it meets any of the criteria listed below. In summary, those criteria refer to: whether or not any of them exercises control over the activities of the trust. Where the settlor(s) of a trust is an Entity then the CRS requires Financial Institutions to also identify the Controlling Persons of the settlor(s) and when required report them as Controlling Persons of the trust. In the case of a legal arrangement other than a trust, "Controlling Person(s) means persons in equivalent or similar positions.

Custodial Institution
The term "Custodial Institution" means any Entity that holds, as a substantial portion of its business, Financial Assets for the account of others. This is where the Entity's gross income attributable to the holding of Financial Assets and related financial services equals or exceeds 20% of the Entity's gross income during the shorter of: (i) the three-year period that ends on 31 December (or the final day of a non-calendar year accounting period) prior to the year in which the determination is being made; or (ii) the period during which the Entity has been in existence.

**Depository Institution**The term "Depository Institution" means any Entity that accepts deposits in the ordinary course of a banking or similar business.

FATCA FATCA stands for the Foreign Account Tax Compliance provisions, which were enacted into U.S. law as part of the Hiring Incentives to Restore Employment (HIRE) Act on March 18, 2010. FATCA creates a new information reporting and withholding regime for payments made to certain non-U.S. financial institutions and other non-U.S. entities.

Entity

The term "Entity" means a legal person or a legal arrangement, such as a corporation, organization, partnership, trust or foundation.

The term "Financial Institution" means a "Custodial Institution" a "Depository Institution", an "Investment Entity" or a "Specified Insurance Company". (Please refer to the relevant definition in the form for more details)

Governmental Entity
Governmental
G

Active NFEs by reason of income and assets; Publicly traded NFEs; Governmental Entities, International Organizations, Central Banks, or their wholly owned Entities;

Governmental Entities, International Organizations, Central Banks, or their wholly owned Entities;
Holding NFEs that are members of a nonfinancial group;
Start-up NFEs;
NFEs that are liquidating or emerging from bankruptcy;
Treasury centers that are members of a nonfinancial group; or
Non-profit NFEs.
An entity will be classified as Active NFE if it meets any of the following criteria:
An entity will be classified as Active NFE if it meets any of the following criteria:
An entity will be classified as Active NFE if it meets any of the following criteria:
An entity will be classified as Active NFE if it meets any of the following criteria:
An entity will be classified as Active NFE if it meets any of the following criteria:
An entity will be production of passive income and less than 50% of the NFE bar or other appropriate reporting period are assets that produce or are held for the production of passive income;
b) the stock of the NFE is regularly traded on an established securities market or the NFE is a Related Entity of an Entity the stock of which is regularly traded on an established securities market;
C) the NFE is a Governmental Entity, an International Organization, a Central Bank, or an Entity wholly owned by one or more of the foregoing,
C) substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing inancing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an Entity does not qualify for this status if the Entity functions (or holds itself out) as an investment tund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes:

acquire or fund companies and then hold interests in those companies as capital assets for investment purposes;
e) the NFE is not yet operating a business and has no prior operating history, (a " start-up NFE") but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFE does not qualify for this exception after the date that is 24 months after the date of the initial organization of the NFE;
f) the NFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganizing with the intent to continue or recommence operations in a business other than that of a Financial Institution;
g) the NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution; or h) the NFE meets all of the following requirements:
i - it is established and operated in its jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its jurisdiction of presidence and it is a professional organization, civic league or an organization operated exclusively for the promotion of social welfare;
ii - it is exempt from income tax in its jurisdiction of residence;
iii - it as no shareholders or members who have a proprietary or beneficial interest in its income or assets;
the policiable laws of the NFE's jurisdiction of residence or the NFE's formation documents do not

iii - it has no shareholders or members who have a proprietary or business.

iv - the applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity other than pursuant to the conduct of the NFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFE has purchased; and v - the applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all of its assets be distributed to a Governmental Entity or other non-profit organization, or escheat to the government of the NFE's jurisdiction of residence or any political subdivision. Note: Certain entities (such as U.S. Territory NFFEs) may qualify for Active NFFE status under the CRS.

"Control" over an Entity is generally exercised by the natural person(s) who ultimately has a controlling ownership interest (typically on the basis of a certain percentage (e.g. 25%)) in the Entity. Where no natural person(s) exercises control through ownership interests, the Controlling Person(s) of the Entity will be the natural person(s) who exercises control of the Entity through other means. Where no natural person(s) is/are identified as exercising control of the Entity through ownership interests, then under the CRS the Reportable Person is deemed to be the natural person who hold the position of senior managing official.

Controlling Person(s)

Controlling Person(s)
"Controlling Persons" are the natural person(s) who exercise control over an entity. Where that entity is treated as a Passive Non-Financial Entity ("Passive NFE") then a Financial Institution is required to determine whether or not these Controlling Persons are Reportable Persons. This definition corresponds to the term "beneficial owner" described in Recommendation 10 of the Financial Action Task Force Recommendations (as adopted in February 2012). In the case of a trust, the Controlling Person(s) are the settlor(s), the trustee(s), the protector(s) (if any), theheneficiary(is) colass(es) of beneficiaries, or any other natural person(s) exercising ultimate effective control over the trust (including through a chain of control or ownership). Under the CRS the settlor(s), the trustee(s), the protector(s) (if any), and the beneficiary(ies) or class(es) of beneficiaries, are always treated as Controlling Persons of a trust repardless of described in sub-clause (ii) of clause (fi), or a trust, repardless of described in sub-clause (ii) of clause (fi), or a trust repardless of described in sub-clause (ii) of clause (fi), or a trust repardless of described in sub-clause (ii) of the protector of the Entity's gross income during the shorter of (a) the three-year period ending on the 31st December of the Entity's gross income during the shorter of (a) the three-year period ending on the 31st December of the Entity's gross income during the shorter of (a) the three-year period ending on the 31st December of the Entity's gross income during the shorter of (a) the three-year period ending on the 31st December of the Entity's gross income during the shorter of (a) the three-year period ending on the 31st December of the Entity's gross income during the shorter of (a) the three-year period ending on the 31st December of the Entity's gross income during the shorter of (a) the three-year period ending on the 31st December of the Entity's gross income during the shorter of (a) the three-year period ending

NFE An "NFE" is any Entity that is not a Financial Institution.

Non-Reporting Financial Institution

A Non-Reporting Financial Institution " means any Financial Institution that is:

A Governmental Entity, International Organization or Central Bank, other than with respect to a payment that is derived from an obligation held in connection with a commercial financial activity of a type engaged in by a Specified Insurance Company, Custodial Institution, or Depository Institution,

A Broad Participation Retirement Fund; a Narrow Participation Retirement Fund; a Pension Fund of a Governmental Entity, International Organization or Central Bank; or a Qualified Credit Card Issuer:

An Exempt Collective Investment Vehicle; or

A Trustee-Documented Trust: a trust where the trustee of the trust is a Reporting Financial Institution and reports all information required to be reported with respect to all Reportable Accounts of the trust;

Any other defined in a countries domestic law as a NonReporting Financial Institution.

Participating Jurisdiction "Participating Jurisdiction" means a jurisdiction (i) with which an agreement is in place pursuant to which there is an obligation in place to provide the information specified in rule 78C, and (ii) which is identified in a published list to be made available on FBR's web portal; "Participating Jurisdiction Financial Institution" The term "Participating Jurisdiction Financial Institution means (i) any Financial Institution that is tax resident in a Participating Jurisdiction, and (ii) any branch of a Financial Institution that is located outside of that jurisdiction, and (ii) any branch of a Financial Institution that is not tax resident in a Participating Jurisdiction, if that branch is located in such Participating Jurisdiction.

Passive NFE Under the CRS a "Passive NFE" means any: (i) NFE that is not an Active NFE; and (ii) Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution.

Related Entity
An Entity is a "Related Entity" of another Entity if either Entity controls the other Entity, or the two
Entities are under common control. For this purpose control includes direct or indirect ownership of
more than 50% of the vote and value in an Entity.

Reportable Account
The term "Reportable Account" means an account held by one or more Reportable Persons or by a
Passive NFE with one or more Controlling Persons that is a Reportable Person.

Reportable Jurisdiction
Reportable Jurisdiction means all jurisdictions other than Pakistan and the United States of America;

Signature of	Signature of	Signature of	Signature of Authorized Signatory	Company's
Authorized Signatory	Authorized Signatory	Authorized Signatory		Rubber Stamp

(ii) A "controlled entity" means an Entity that is separate in form from the jurisdiction or that otherwise constitutes a separate juridical entity, provided that—a. the Entity is wholly owned and controlled by one or more Governmental Entities directly or through one or more controlled entities;
b. the Entity's net earnings are credited to its own account or to the accounts of one or more Governmental Entities, with no portion of its income inuring to the benefit of any private person; and c. the Entity's assets vest in one or more Governmental Entities upon dissolution; and (iii) Income does not inure to the benefit of private persons if such persons are the intended beneficiaries of a governmental program and the program activities are performed for the general public with respect to the common welfare or relate to the administration of some phase of government. Notwithstanding the foregoing, however, income is considered to inure to the benefit of private persons if the income is derived from the use of a governmental entity to conduct a commercial business, such as a commercial banking business that provides financial services to private persons. "International Organization" "International Organization" means any international organization or wholly owned agency or instrumentality thereof and includes any intergovernmental organization (including a supranational organization) that is comprised primarily of governments, that has in effect a headquarters or substantially similar agreement with Pakistan and the income of which does not inure to the benefit of private persons. private persons.

Investment Entity
Investment Entity means any Entity
(i) An Entity that primarily conducts as a business one or more of the following activities or operations for or on behalf of a customer:

• Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange, exchange, interest rate and index instruments; transferable securities; or commodity futures trading;
• Individual and collective portfolio management; or
• otherwise investing, administering or managing Financial Assets or money on behalf of other persons; or

or (iii) The gross income of which is primarily attributable to investing, reinvesting or trading in Financial Assets, if the Entity is managed by another Entity that is a Depository Institution, a Custodial Institution, a Specified Insurance Company or an Investment Entity described in sub-Clause (i): An Entity is treated as primarily conducting as a business one or more of the activities

Reportable Jurisdiction Person

Reportable Jurisdiction Person means an individual or Entity that is resident in a Reportable Jurisdiction or an estate of a decedent that was a resident of Reportable Jurisdiction. For this purpose, an Entity such as a partnership, limited liability partnership or similar legal arrangement that has no residence for tax purposes shall be treated as resident in the jurisdiction in which its place of effective management is

- Reportable Person
  Reportable Person means a Person other than
  a corporation the stock of which is regularly traded on one or more established securities markets,

  any corporation that is a Person of the stock of the st
- markets; any corporation that is a Related Entity of a corporation described in sub-clause (i); a Governmental Entity; an International Organization; a Central Bank; or a Financial Institution.

Specified Insurance Company
The term "Specified Insurance Company" means any Entity that is an insurance company (or the holding company of an insurance company) that issues, or is obligated to make payments with respect to, a Cash Value Insurance Contract or an Annuity Contract.

TIN (including functional equivalent)
The term "TIN" means Taxpayer Identification Number or a functional equivalent in the absence of a
TIN. A TIN is a unique combination of letters or numbers assigned by a jurisdiction to an individual or an
Entity and used to identify the individual or Entity for the purposes of administering the tax laws of such
jurisdiction. Further details of acceptable TINs can be found at the OECD Portal Some jurisdictions do
not issue a TIN. However, these jurisdictions often utilize some other high integrity number with an
equivalent level of identification (a "functional equivalent"). Examples of that type of number include,
for Entities, a Business/company registration code/number.

### **DECLARATION & SIGNATURE**

I/ we have carefully read, understand and agree to abide by all the rules, regulations, terms and conditions given in the form / constitutive documents along with details of Sales Load to be deducted (if any) and all taxes. The details provided by me/us are true, correct and complete to the best of my/our knowledge and belief, and the documents submitted along with this application are genuine. If we hereby undertake to promptly inform the company of any changes to the information provided in this form. If We shall not use this account to support/ finance any unlawful activity like money laundering, terrorist financing and I/ we shall update the ABL AMCL about any changes in my/our mailing address/ contact information and / or any change in any of the information furnished in this account opening form viz; nature of business, source of income, in compliance with NBFC regulations & AML/CFT Regulations and AMC's own internal control requirements from time to time. I/we further agree to provide proper evidence / proof of incoming to the ABL AMCL at any point of time, if required, which are arriving in my above account I/ we certify that I/ we have the power and authority to establish this account and the features and services requested and that the authorizations hereon shall continue until any written notice of a modification or a termination signed by all appropriate parties. If we hereby accept that the company may at any time in the future require verification before processing any requested transaction in this account; the verification procedures may include recording instructions, requiring certain identifying information before acting upon instructions and sending written confirmations. With respect to the value added services offered by the company, I/ we waive and discharge the company fully from any delay due to breakdown or sending of such services, beyond reasonable control of the company, and understand that the company may at its absolute discretion, discontinue any of the services completely or partially without any notice to me/us. I/ we have understood that investments in mutual funds are subject to market risks and fund prices may go up or down based on market conditions. I/ we have understood that past performance is not necessarily an indicator of future results and there is no fixed or guaranteed return. If we acknowledge and accept that the ABL AMCL reserves the right to close or suspend without prior notice, my/our account if required document/information is not submitted within stipulated time.

I/we hereby provide my/our consent for account opening and using the information/documents provided to perform KYC related verification for necessary due diligence, including verification of the identity from NADRA (NADRA verisys) by ABL Asset Management Company Limited as required under the regulatory framework of account opening.

Signature of Signature of Authorized Signatory Authorized Signatory	Signature of Authorized Signatory	Signature of Authorized Signatory	Company's Rubber Stamp

9	FOR ABL AMCL SALES REPRESENTATIVE/ ABL BRANCH USE ONLY		
	ABL AMCL Sales Staff /Investment Faciliator Name / Distributor	Branch Code	ABL Branch's Staff Name
	Authorised Signature of ABL AMCL Sales Staff / Investment facilitator / Distributor (Rubber Stamp Incase of Distributor)		ABL Branch Stamp with two officers' signature

10 FOR ABL AMCL OFFICE USE ONLY		
Transaction Date	Transaction No.	Originator Staff No.
Data Input by	Form Received on:	
Data and attachments verified by		Signature Operations Department



INVESTOR DETAILS (IN BLOCK LETTERS)

Date		-		-	
	(DD	-	MM	-	YY)

ABL AMC A/C No.

For Office Use Only

# Initial Investment Form

Investor Name:									
CNIC/NICOP/Passport No. NTN (In case of Sole Poprietor) (In case of corporate client)									
2	INVESTMENT DETAILS								
	Name of Fund	Name of Fund		Amount in PKR		Amount in Words			
1									
2									
3									
4									
3	PAYMENT DETAILS								
Р	Payment Mode Cheque	Pay C	Order	Online Transfer	RTGS				
	Cheque No./ Pay Order No./ Online Transfe	r		Bank Name		Branch			
For payment instructions please refer to the Guidelines section of this form.									
4	RISK PROFILE OF CIS/ PLANS								
4		' Plan Name			Risk Profil	e Risk of Principal Erosion			
4		ABL Money Ma ney Market Pla	arket Fund (ABL Mo n-I) I ABL Fixed Rate		Risk Profil	e Risk of Principal Erosion Principal at Low Risk			
4	Fund ,  ABL Cash Fund I ABL Islamic Cash Fund I  ABL Islamic Money Market Fund (ABL Islamic Mor	ABL Money Ma ney Market Pla Fund (ABL Spe	arket Fund (ABL Mo n-I) I ABL Fixed Rate cial Savings Plans)	Fund (ABL Fixed Rate Plans)		<u> </u>			
4	Fund , ABL Cash Fund I ABL Islamic Cash Fund I ABL Islamic Money Market Fund (ABL Islamic Mor ABL Special Saving	ABL Money Market Pla Fund (ABL Spermic Sovereign BL Financial Se servative Alloc	arket Fund (ABL Mc n-I) I ABL Fixed Rate cial Savings Plans) Fund (ABL Islamic So ector Fund (ABL Final ation) I ABL IFPF (Co	Prund (ABL Fixed Rate Plans)  overeign Plan – I)  ncial Sector Plan-I), onservative Allocation)	Low	Principal at Low Risk			
4	Fund ,  ABL Cash Fund I ABL Islamic Cash Fund I  ABL Islamic Money Market Fund (ABL Islamic Mor  ABL Special Saving  ABL Government Securities Fund I ABL Isla  ABL Income Fund, ABL islamic Income Fund I A  ABL Islamic Asset Allocation Fund I ABL FPF (Con  ABL AMCL FInancial PLann  ABL FPF ( Active Allocation ) I ABL IFPF (Active A	ABL Money Ma ney Market Pla Fund (ABL Spe- mic Sovereign BL Financial Se servative Alloc er - (Moderate	arket Fund (ABL Mc n-I) I ABL Fixed Rate cial Savings Plans) Fund (ABL Islamic So ector Fund (ABL Final ation) I ABL IFPF (Co Plan, DynamicPlan) essive Allocation) I AB	Prund (ABL Fixed Rate Plans)  overeign Plan – I)  ncial Sector Plan-I),  nservative Allocation)	Low Moderate	Principal at Low Risk Principal at Moderate Risk			
5	Fund , ABL Cash Fund I ABL Islamic Cash Fund I ABL Islamic Money Market Fund (ABL Islamic Mor ABL Special Saving ABL Government Securities Fund I ABL Isla ABL Income Fund, ABL islamic Income Fund I A ABL Islamic Asset Allocation Fund I ABL FPF (Con ABL AMCL FInancial Plann ABL FPF ( Active Allocation ) I ABL IFPF (Active A ABL Islamic Stock F	ABL Money M. ley Market Pla Fund (ABL Spe- mic Sovereign BL Financial Se servative Alloc er - (Moderate Illocation, Aggre und I Allied Fine	arket Fund (ABL Mc n-I) I ABL Fixed Rate cial Savings Plans) Fund (ABL Islamic Sc ector Fund (ABL Final ation) I ABL IFPF (Co Plan, DynamicPlan) essive Allocation) I AB ergy Fund	Prund (ABL Fixed Rate Plans)  overeign Plan – I)  ncial Sector Plan-I),  nservative Allocation)	Low Moderate Medium	Principal at Low Risk  Principal at Moderate Risk  Principal at Medium Risk			
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have of given in not gu we hav close of appeti	Fund ,  ABL Cash Fund I ABL Islamic Cash Fund I  ABL Islamic Money Market Fund (ABL Islamic Mor  ABL Special Saving  ABL Government Securities Fund I ABL Isla  ABL Income Fund, ABL islamic Income Fund I A  ABL Islamic Asset Allocation Fund I ABL FPF (Con  ABL AMCL FInancial Plann  ABL FPF (Active Allocation) I ABL IFPF (Active A  ABL Islamic Stock F  DECLARATION AND SPECIMEN SIGNATURE  will not claim Repatriation from Pakistan of Dividends and Sa  carefully read, understand and agree to abide by all the rules, in the form / constitutive documents along with details of Sal  Jaranteed and not issued by any person. Shareholders of ABL  we understood that past performance of the fund is not nece  or suspend without prior notice, my/our account if required d  ite. I am/ we are aware that my/our financial needs may chang  ite. I am/ we are aware that my/our financial needs may chang	ABL Money Miney Market Platund (ABL Spemic Sovereign BL Financial Seservative Allocer - (Moderate Blocation, Aggreund LAllied Fine OF ACCOUNTIES LOAD to be detected by the sample of the sample of the sample of the best load to be detected by the sample of the sample of the best load to be detected by the sample of the best load to be detected by the sample of the best load to be detected by the sample of the best load to be detected by the sample of the best load of the sample of the best load of the sample of the	arket Fund (ABL Mc n-I) I ABL Fixed Rate cial Savings Plans) Fund (ABL Islamic So ector Fund (ABL Final ation) I ABL IFPF (Co e Plan, DynamicPlan) essive Allocation) I AB ergy Fund  NT HOLDER(S)  the units except as perm vant Trust Deed(s), Off duture quid (if any) loss of or of future results and lation is not submitted ending on my/our perso	e Fund (ABL Fixed Rate Plans)  overeign Plan – I)  notal Sector Plan-I), onservative Allocation)  L Stock Fund I  missible under the Rules of the State Beering Documents, guidelines (on the Ig taxes. I/we am/are fully informed are to investor resulting from the operation there is no fixed or guaranteed return within stipulated time. I/ we understate and and situation objectives. I/we sha	Low  Moderate  Medium  High  ank of Pakistan or oack of this form) di understand tha ons of any CIS laur.  I. I we acknowlee the did that this CIS Ri: Il be solely respon:	Principal at Low Risk  Principal at Moderate Risk  Principal at Medium Risk  Principal at High Risk  Ministry of Finance, Government of Pakistan. I/ we that govern this transactions, terms and conditions investment in units of CIS(s) are not bank deposit, ched by ABL Funds unless otherwise mentioned. I/ ge and accept that ABL AMCL reserves the right to k Categorization will help me/us assess my/our risk ible for all of my/our current and future investment			

6	NAME OF COLLECTIVE INVESTMENT SCHEME	ACCOUNT PAYEE TITLE		NAME OF CO			ACCOUNT PAYEE TITLE			
-	ABL Cash Fund	CDC Trustee ABL Cash Fund	-	ABL Islamic Ca	ash Fund		CDC Trustee ABL Islamic Cash Fund			
-	ABL Money Market Fund (ABL Money Market Plan-I)	CDC Trustee ABL Money Market Fund (ABL Money Market Plan-I)	-		oney Market Fund Ioney Market Plan-I)		CDC Trustee ABL Islamic Money Market Fund-(ABL Islamic Money Market Plan-I)			
-	ABL Special Savings Fund (ABL Special Savings Plan I, II, III, IV, V and VI)	CDC Trustee ABL Special Savings Fund- ABL Special Savings Plan-( <b>1, II , III, I</b> V, V and VI)	-	ABL Islamic Inc	come Fund		CDC Trustee ABL Islamic Income Fund			
-	ABL Fixed Rate Fund (ABL Fixed Rate Plans)	CDC Trustee ABL Fixed Rate Fund (ABL Fixed Rate Plans)		BL Islamic Financial Planning und (Conservative, Active &		MCBFSL Trustee ABL Islamic Financial Planning Fund (Conservative, Active &				
-	ABL Government Securities Fund	CDC Trustee ABL Government Securities Fund		Aggressive All	location)	) Aggressive Allocation Plan				
-	ABL Income Fund	CDC Trustee ABL Income Fund	-	ABL Islamic Sto	ock Fund		MCBFSL Trustee ABL Islamic Stock Fund			
-	ABL Financial Sector Fund (ABL Financial Sector Plan-I)	CDC-Trustee ABL Financial Sector Fund- Plan-I	-	ABL Islamic As	sset A <b>ll</b> ocation Fund		MCBFSL Trustee ABL Islamic Asset Allocation Fund			
-	ABL Financial Planning Fund (Conservative Allocation Active Allocation)	MCBFSL Trustee ABL Financial Planning Fund (Conservative Allocation Plan & Active Allocation Plan)	-	ABL Islamic Sc (ABL Islamic Sc	overeign Fund Sovereign Plan – I)		CDC-Trustee ABL Islamic Sovereign Plan – I			
-	ABL Stock Fund	CDC Trustee ABL Stock Fund								
-	Allied Finergy Fund	CDC Trustee Allied Finergy Fund								
7	RISK DISCLOSURE STATEMEN	Г								
		To be filled by	the	Investor	r					
m a o a	If we confirm that I am/ we are investing in									
U	اےا یم کا ایل کوئی بھی نقصان کیلئے ذیے دارنہیں ٹھرائیں گے جومیرے/ ہمارے فیلے کے نتیجے میں ہوسکتا ہے۔ میں/ہم مزیدا تفاق کرتے ہیں کہ اے بیال اے ایم سی ایل نے میرے/ ہمارے پسک پروفائل کےمطابق ایک مخصوص فنڈ/ پلان کینکر کی کتجویز میش کی ہے۔ تا ہم ، مجھے/ ہمارے پاس کسی بھی فنڈ کے زمرے میں سرمایہ کاری کرنے کی صوابدید ہے۔ میں/ہم مزید نقید بی کہ میں / ہم نے فنڈ منیجر کی رپورٹ، ٹرسٹ ڈیڈ ، آفریگ ڈاکومنٹ، مفنی									
ئى	نڈ ملیجر کی رپورٹ، ٹرسٹ ڈیڈ ، آفرنگ ڈا کومنٹ، عمنی	وابدیدہے۔میں/ہم مزید تصدیق کرتے ہیں کہ میں/ ہم نے ف	نے کی ص	میں سر ما بید کا ری کر۔	اس سی بھی فنڈ کے زمرے میں					
						-4	ٹرسٹ ڈیڈا در شمنی آ فرنگ ڈا کومنٹ کو پڑھا۔			
[						Çi.	anature of Authorized Cignatory			
	Dated					SIĞ	gnature of Authorized Signatory			
8	UNDERTAKING									
	ndertaking by Investor we	hereby underta	ke th	at the risk a	ssociated with the	respective	product has been adequately			
	xplained, disclosed and understoo									
	Dated				Signa	iture of Autho	orized Signatory			
	ndertaking by Sales Agent									
	If we have explained the risk of the fund hereby confirm the following:  If we have explained the risk of the fund being sold to the -investor. If we have explained that the									
р	possibility of principal being at risk is higher in case of high risk funds. I/ we have not made or implied any guarantee with respect to return on investment									
ai	amount. I/ we have not cuoted any fixed return percentage or amount to the investor.									
	Signature of Sales Agent					Name & Sigr	nature of Immediate Supervisor			
D	Dated					Dated	-   -   -			
9 FOR ABL AMCL OFFICE USE ONLY										
Tra	ansaction Date OD - MM -	Transaction No.			Originato	r Staff No.				
Da	ita Input by	Form Received on:								
Da	ta and attachments verified by					Signatu	re Operations Department			

ontactus@ablfunds.com

© 021-111-225-262

Website : www.ablfunds.com

Get in Touch

"INVEST" to 8262

042-111-225-262

Allied Bank

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