Declaration of Ultimate Beneficial Owner Form



| | e of Corporate Entity | · · · · · · · · · · · · · · · · · · · | | | Folio Nun | ·- | |
|------|--|--|---------------------------------------|--------------------|-----------------------|--------------------------|--------------------|
| E | etails Of All Natural Persons* Who Are "Ultimate | | · · · · · · · · · · · · · · · · · · · | | | · · · | |
| ŀ | Full Name | Father's / Husband's Name | CNIC / Passport | No. CI | NIC Issue Date | Date of Birth | Nationality |
| - | Residential Address: | | | | | % of Share - holding: | |
| + | Full Name | Father's / Husband's Name | CNIC / Passport | No. C | CNIC Issue Date | Date of Birth | Nationality |
| 2. | ruii INairie | ratier's / Husband's Name | CINIC / Fassport | 140. | NC Issue Date | Date of Birti | Nationality |
| | Residential Address: | | | | % of Share - holding: | | |
| 3. | Full Name | Father's / Husband's Name | CNIC / Passport | No. CI | VIC Issue Date | Date of Birth | Nationality |
| | | | | | | | , |
| | Residential Address: | | | | | % of Share - holding: | |
| ase | copy & replicate the abov | e table if there are additional Ultimate Ber | neficial Owners. Furth | ier, also share co | opy of valid CNICs | | |
| | | erson Is Identified As Ultimate E | | (UBO) In T | he Corporate I | Entity, | |
| | | Of Senior Management Officials* | CNIC / | CNIC Issue | | | |
| 1. | Full Name | Father's / Husband's Name | Passport No. | Date | Date of Birth | Nationality | Designation |
| | | | | | | | |
| | Residential Address: | l | % of Share - h | | olding: | | |
| 2. | | | CNIC / | CNIC Issue | | | |
| | Full Name | Father's / Husband's Name | Passport No. | Date | Date of Birth | Nationality | |
| | | | | | | | |
| | Residential Address: | | | | % of Share - holding: | | |
| 3. | Full Name | Father's / Husband's Name | CNIC / | CNIC Issue | Date of Birth | Nationality | |
| | i uli i vairie | Tauter 5 / Husband 5 Name | Passport No. | Date | Date of Birtin | INationality | |
| | | | | | | | |
| | Residential Address: | | | % of Share - h | | olding: | |
| ease | copy & replicate the above | ve table if there are additional Senior Mana | gement Officials Furt | her, also share o | opy of valid CNIC | | |
| . C | etails Of Board Of I | Director / Trustees | | | | | |
| | Full Name | Father's / Husband's Name | CNIC / Passport No. | CNIC Iss | ue Date | Date of Birth | Nationality |
| ١. | | | | | | | |
| 2. | | | | | | | |
| _ | | | | | | | |
| 3. | | | | | | | |
| leas | se copy & replicate the abo | ove table if there are additional Directors/ | Trustees. Further, als | so share copy of | valid CNICs | | |
| We | hereby declare that the in | formation provided in this Form is true an | d accurate, and if suc | h information ch | nanges, I / We will p | promptly notify within 3 | 0 days in writing. |
| | | | | | | | |
| | | | | | | | |
| | Name | Designation | _ | C: | Company Star | | Date |

- Natural person(s) who directly/indirectly exercise control or have significant influence or having shareholding/ voting rights of more than 25% or 10% in case no holds the 25%, shall be considered as UBOs, If UBO is a corporate then its UBO must be shared; and
- For Foundations, Trusts and Non-Profit Organizations, Natural Person(s) serving as Directors, Settlor, Trustee(s) and Beneficiaries shall be considered UBO(s)
- Natural Person(s) owning the ultimate parent Company of a Corporate Entity shall also be declared as UBO.
- ** Chief executive officer Managing director, Deputy managing director, Chief Operating Officer, Company Secretary, Chief Financial Officer, Chief Compliance Officer and Chief Regulatory Officer and any holder of such positions by whatever name called who have sufficient knowledge of entity's risk exposure and of sufficient authority who may affect Risk Management.