

Distributor ARN / RIA#	Distributor Name	Sub-Distributor ARN	Internal Sub-Broker/ Employee Code	EUIN
ARN/RIA- 83784		ARN-		E 069303

#By mentioning RIA code, I/We authorize you to share with the SEBI Registered Investment Advisor the details of my/our transactions in the scheme(s) of Motilal Oswal Mutual Fund.

Investors applying under Direct Plan must mention "Direct" in ARN Column

Upright commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distributor.

"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 in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker."

First / Sole Applicant / Guardian	Second Applicant	Third Applicant	Power of Attorney Holder
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TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Refer Instruction 12 on page 7) In case the subscription amount is ₹10,000 or more and your Distributor has opted to receive Transaction Charges, the same are deductible as applicable from the purchase/ subscription amount and payable to the Distributor. Units will be issued against the balance amount invested.

Transaction Charges for per subscription ₹ 10,000 and above	<input type="checkbox"/> Existing Investor - ₹100
	<input type="checkbox"/> New Investor - ₹150

1 EXISTING INVESTOR'S DETAILS (Please fill your Folio No., Name, Section 1,7,10 &12)

Folio No. _____ Name **F I R S T** _____ **M I D D L E** _____ **L A S T** _____

2 FIRST APPLICANT'S DETAILS (Non-Individual investors should mandatorily fill separate FATCA Form Available on Website:www.motilaloswalmf.com.) Mr. Ms. M/s

Name **F I R S T** _____ **M I D D L E** _____ **L A S T** _____

Father's Name **F I R S T** _____ **M I D D L E** _____ **L A S T** _____

PAN /PEKRN** _____ CIN _____

KIN (KYC identification number) _____ Date of Birth / Incorporation **D D M M Y Y Y Y** _____ Place of Birth / Incorporation _____

Country of Birth / Incorporation _____ Nationality Indian US Others (Please Specify) _____ City of Incorporation _____

For Investments "On behalf of Minor" Birth Certificate School Certificate Passport Others Specify _____ Guardian's Relationship Father Mother Court Appointed With Minor

KIN of Guardian/ PoA (KYC identification number) _____

Name of the Guardian (In case of minor) / Contact person for non individuals / PoA holder name _____ Guardian / PoA PAN _____

F I R S T _____ **M I D D L E** _____ **L A S T** _____

Tax Residence Address (for KYC Address) Residential Registered office Business Residential or Business
Correspondence Address _____

City _____ State _____ Pin Code _____

Overseas address _____ Mandatory incase of NRI's _____

_____ Mandatory incase of NRI's _____

Email ID _____

Email ID & Mobile No. are essential to enable us to communicate better with you

** Please mention PAN/PEKRN(PAN Exempted KYC Reference Number) as it is mandatory Mobile _____ Tel. _____

3 KYC Details (Mandatory)

Status Partnership Firm HUF Private Limited Company Public Limited Company Listed Company Society AOP/BOI Trust H Liquidator
 Artificial Juridical Person Resident Individual Proprietor Minor FII/ FPI NRI PIO Limited Liability Partnership Trust
 Body Corporate NGO FI Govt. Body Bank Defence Establishments NPO Others Specify _____

Occupation Pvt. Sector Service Public Sector Gov. Service Housewife Defence Professional Retired Business Agriculture Student Forex Dealer Others Specify _____

INDIVIDUALS	NON-INDIVIDUALS
Gross Annual Income OR Net-worth* in ₹ <input type="checkbox"/> <1L <input type="checkbox"/> 1-5L <input type="checkbox"/> 5-10L <input type="checkbox"/> 10-25L <input type="checkbox"/> 25L-1CR <input type="checkbox"/> >1CR	<input type="checkbox"/> <1L <input type="checkbox"/> 1-5L <input type="checkbox"/> 5-10L <input type="checkbox"/> 10-25L <input type="checkbox"/> 25L-1CR <input type="checkbox"/> >1CR
networth as on D D M M Y Y	networth as on D D M M Y Y
*Not older than one year	(Networth is mandatory for Non-individuals)
Any other information _____	Any other information _____

Is the entity involved in any of the following:

1 Foreign Exchange/ Money Changer	<input type="checkbox"/> Yes <input type="checkbox"/> No
2 Gaming / Gambling / Lottery (casinos, Betting syndicates)	<input type="checkbox"/> Yes <input type="checkbox"/> No
3 Money Lending/ Pawning	<input type="checkbox"/> Yes <input type="checkbox"/> No

Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/ Karta/ Trustee/ Whole time Directors) I am PEP I am Related to PEP Not Applicable

Legal Entity Identifier (LEI) Number _____ LEI Expiry Date **D D M M Y Y Y Y** _____

*With reference to the RBI circular "Introduction of Legal Entity Identifier for Large Value Transactions in Centralised Payment Systems" vide RBI/2020-21/82 DPSS.CO.OD No.901/06.24.001/2020-21 dated 5th January 2021 it is mandatory to provide LEI information for all payment transactions (i.e. purchases (inward remittance), redemption / dividend / brokerage payouts (outward remittance) of value ₹ 50 crores and above undertaken by entities (non-individuals) through RTGS/NEFT w.e.f. April 01, 2021.

4 JOINT APPLICANT'S DETAILS

SECOND APPLICANT'S DETAILS

Mr. Ms. M/s

Mode of Holding Joint Anyone or Survivor (Default)

Name **F I R S T** _____ **M I D D L E** _____ **L A S T** _____

Father's Name **F I R S T** _____ **M I D D L E** _____ **L A S T** _____

PAN /PEKRN** _____ Email ID _____ Mobile _____

Email ID & Mobile No. are essential to enable us to communicate better with you

KIN (KYC identification number) _____

Date of Birth **D D M M Y Y Y Y** _____ Place of Birth _____ Country of Birth _____ Nationality Indian US Others (Please Specify) _____

Occupation Pvt. Sector Service Public Sector Gov. Service Housewife Defence Professional Retired Business Agriculture Student Forex Dealer Others Specify _____

INDIVIDUALS	NON-INDIVIDUALS	Politically Exposed Person (PEP) Status
Gross Annual Income OR Net-worth* in ₹ <input type="checkbox"/> <1L <input type="checkbox"/> 1-5L <input type="checkbox"/> 5-10L <input type="checkbox"/> 10-25L <input type="checkbox"/> 25L-1CR <input type="checkbox"/> >1CR	<input type="checkbox"/> <1L <input type="checkbox"/> 1-5L <input type="checkbox"/> 5-10L <input type="checkbox"/> 10-25L <input type="checkbox"/> 25L-1CR <input type="checkbox"/> >1CR	<input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable
networth as on D D M M Y Y	networth as on D D M M Y Y	
*Not older than one year	(Networth is mandatory for Non-individuals)	
Any other information _____	Any other information _____	

ACKNOWLEDGMENT SLIP Received subject to realisation, verification and conditions, an application for purchase of Units as mentioned in the application form. **Application/Folio No.** _____

From _____				Stamp & Signature
Cheque no. _____	Date _____	Amount _____	Scheme _____	
_____	_____	_____	_____	

THIRD APPLICANT'S DETAILS

Mr. Ms. M/s

Name: F I R S T M I D D L E L A S T
 Father's Name: F I R S T M I D D L E L A S T
 PAN /PEKRN** _____ Email ID _____ Mobile _____

Email ID & Mobile No. are essential to enable us to communicate better with you

KIN (KYC identification number) _____

Date of Birth: DD MM YY YY Place of Birth _____ Country of Birth _____ Nationality Indian US Others (Please Specify)

Occupation Pvt. Sector Service Public Sector Gov. Service Housewife Defence Professional Retired Business Agriculture Student Forex Dealer Others Specify

Gross Annual Income OR Net-worth* in ₹ <1L 1-5L 5-10L 10-25L 25L-1CR >1CR
 networth as on DD MM YY
 Any other information _____

Politically Exposed Person (PEP) Status
 I am PEP I am Related to PEP Not Applicable

**Please mention PAN/PEKRN (PAN Exempted KYC Reference Number) as it is mandatory

5 DEMAT ACCOUNT DETAILS

(Mandatory, only if you require units in the demat form. Please fill in all details, else the application is liable to be rejected).
 Nomination provided in demat account shall be considered.

NSDL CDSL Depository Participant (DP) Name _____
 DP ID _____ Beneficiary A/c No. _____
 Enclose for Demat option Client Master List Transaction/Holding Statement DIS Copy

6 MOBILE & EMAIL COMMUNICATION

Email ID & Mobile No. provided pertains to Self Family Member (Note: If Email pertains to Family Member please select any one) Spouse Dependent Parents
 Dependent Children Dependent Siblings Guardian

Investors providing Email Id would mandatorily receive E - Statement of Accounts in lieu of physical Statement of Accounts and the annual report or abridged summary on email. Please register your Mobile No & Email Id with us to get instant transaction alerts via SMS & Email. I hereby authorize MOAMC to send important information and regular updates to me. I wish to receive scheme wise annual report or abridged summary through Physical mode (Applicable only for investors who have not specified the email id)

7 INVESTMENT & PAYMENT DETAILS

Payment Type (Please ✓) Non - Third party payment Third party payment (Please fill the Third Party Payment Declaration Form)
 Lumpsum Zero Balance SYSTEMATIC INVESTMENT PLAN* / MICRO SIP-ECS (please fill OTM Debit Mandate form NACH/ ECS/ Direct Debit Form-2)

Sr. No.	Name of the Schemes	Plan	Option & Sub-Option	Investment Amount (₹)
1	Motilal Oswal _____			
2	Motilal Oswal _____			
3	Motilal Oswal _____			
4	Motilal Oswal _____			
5	Motilal Oswal _____			
In case of multiple schemes, Cheque/DD should be drawn in favour of "Motilal Oswal Mutual Fund Collection A/c." and the cheque amount should match with the Total Investment amount mentioned here.			Total Amount	

Drawn on Bank/Branch: _____ A/c no. _____
 A/c Type (Please Tick): Current Savings NRO NRE FCNR ***For Index Fund Only Growth Option is Available**
 Subsequent SIP Instalment Amount (₹) _____
 Fortnightly 1st-14th 7th-21st 14th-28th
 Annual SIP Weekly - Any Day of Transfer _____ (Monday to Friday) SIP Period From MM YY YY YY To End date MM YY YY Or Perpetual
 Monthly SIP- Any date of the month DD DD except (29th, 30th and 31st) *Incise if no date is selected, 7th would be the default SIP Date.
 Quarterly SIP- Any date of the month for each quarter (i.e. January, April, July, October) DD DD except (29th, 30th and 31st)

MOTILAL OSWAL FIXED AMOUNT BENEFIT PLAN DETAILS

Scheme Name: _____ Option *Growth Dividend-Payout Dividend - Reinvest
 Registration Amount ₹: _____ Include Current Valuation (✓) *Yes No
 Withdrawal % rate: *6% 8% 10% 12% Frequency: *Monthly Quarterly Annually Date: 1st *7th 14th 21st 28th
 Period: Start: MM YY YY End: MM YY YY Perpetual

*Default Option Please refer below for Terms & Conditions

SYSTEMATIC WITHDRAWAL PLAN DETAILS (SWP)

Rs. (in figures) _____ Rs. (in words) _____
 SWP Frequency: Weekly Fortnightly *Monthly Quarterly Annually SWP Date: 1st *7th 14th 21st 28th
 SWP Period: Start: MM YY YY End: MM YY YY

*Default Option

8 BANK DETAILS (Mandatory) Redemption / Dividend /Refund payouts will be credited into this bank account in case it is in the current list of banks with whom Motilal Oswal Mutual Fund has Direct Credit facility.

Bank Name

Bank A/c No. Type Current Savings NRO NRE FCNR Others Specify

Branch Name City Pin

IFSC Code (11 digit)* MICR Code (9 digit)* *Mentioned on your cheque leaf

I/We understand that the instructions to the bank for Direct Credit / NEFT /ECS will be given by the Mutual Fund, and such instructions will be adequate discharge of the Mutual Fund towards redemption / dividend / refund proceeds. In case the bank does not credit my / our bank account with / without assigning any reason thereof, or if the transaction is delayed or not effected at all or credited into the wrong account for reasons of incomplete or incorrect information. I / We would not hold Motilal Oswal Mutual Fund responsible. Further the Mutual Fund reserves the right to issue a demand draft / payable at par cheque in case it is not possible to make payment by Direct Cash/NEFT/ECS. If however the unit holders wish to receive a cheque (instead of a direct credit into their bank account) Please tick the box alongside

Cheque should be crossed "A/C payee only" drawn in favor of the scheme name.

9 NOMINATION DETAILS (Refer Instruction 10)

PLEASE REGISTER MY/OUR NOMINEE AS PER BELOW DETAILS OR I/WE DO NOT WISH TO NOMINATE (Fill Nominee Opt Out form*)

Name	Date of Birth if nominee is minor	Address	Guardian Name (in case Nominee is a Minor)	Signature (Guardian in case Nominee is a Minor)	Allocation %
Unit Holder's Signature <small>Mandatory if you are Opting for Nominee</small>	First / Sole Applicant / Guardian	Second Applicant	Third Applicant		100%

10 FATCA- CRS Declaration and Supplementary Information

10A Declaration for Individual

Non-Individual investors should mandatorily fill separate FATCA Form Available on Website:www.motilaloswalmf.com. The below information is required for all applicants/guardian

	Place/City of Birth	Country of Birth	Country of Citizenship / Nationality
First Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify) _____
Second Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify) _____
Third Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify) _____

Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India? Yes No

If 'No' please proceed for the signature of declaration

If 'YES', please fill for ALL countries (other than India) in which you are a Resident for tax purposes 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, & C (as defined below)
First Applicant				Reason <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
Second Applicant				Reason <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
Third Applicant				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.

[#]Please attach additional sheets if necessary

11 DECLARATION/CONSENT AND SIGNATURE

Having read and understood the contents of the Scheme Information Document of the Scheme(s), I/We hereby apply for the units of the scheme(s) and agree to abide by the terms, conditions, rules and regulation governing the scheme(s). I/We hereby declare that the amount invested in the scheme(s) is through legitimate Sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the income tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Government of India from time to time. I/We have understood the details of the scheme (s) & I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/We confirm that the funds invested in the Scheme (s), legally belong to me/us. In the event " Know Your Customer" process is not completed by me/us to the satisfaction of the Mutual Fund, I/we hereby authorize the Mutual Fund, to redeem the funds invested in the Scheme(s), in Favour of the applicant, at the applicable NAV prevailing on the date of such redemption and undertake such other action with such funds that may be required by the law.

The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Scheme of various Mutual Funds from amongst which the Scheme is being recommended to me/us. For NRIs only : I/We confirm that I am/we are Non Residents of Indian nationality/origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External/Non-Resident Ordinary/FCNR Account. I/We confirm that the details provided by me/us are true and correct. I declare that the information is to the best of my Knowledge, belief, accurate and complete. I agree to notify MOMF/AMC immediately in the event of information changes.

FATCA / CRS Certification:

Declaration for Individual: I hereby confirm that the information provided hereinabove is true, correct, and complete to the best of my knowledge and belief and that I shall be solely liable and responsible for the information submitted above. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of the same being effective and also undertake to provide any other additional information as may be required any intermediary or by domestic or overseas regulators/ tax authorities

Declaration for Non-Individual: I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me / us on this Form is true, correct, and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions and hereby accept the same.

First / Sole Applicant / Guardian/POA	Second Applicant	Third Applicant
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Date: _____ Place: _____

1 General Information

- a. Please read the terms of the Key Information Memorandum (KIM) and the Scheme Information Document (SID) and Statement of Additional Information carefully before filling the Application Form. Investors are deemed to have accepted the terms subject to which this offer is being made and bind themselves to the terms upon signing the Application Form and tendering payment.
- b. The Application Form should be completed in ENGLISH and in BLOCK LETTERS only. Please tick in the appropriate box for relevant options wherever applicable. Please do not overwrite. For any correction / changes (if any) made on the Application Form, the sole/all applicants are requested to authenticate the same by canceling and re-writing the correct details and counter-signing the same. Applications completed in all respects, must be submitted at the Investor Service Centres (ISCs) / Official Points of Acceptance.
- Investors can also subscribe to the Units of all scheme of Motilal Oswal Mutual Fund through the mutual fund trading platforms viz. BSE STAR MF of Bombay Stock Exchange Limited and Mutual Fund Service System (MFSS) of National Stock Exchange of India Limited. For further details, investors are advised to contact ISCs of Karvy or visit our website www.mostshares.com and www.motilaloslwalmf.com. Please write the Serial Number of the Application Form / Folio Number on the reverse of the cheque / demand draft. Applications incomplete in any respect are liable to be rejected. The AMC / Trustee retains the sole and absolute discretion to reject any application.

c. Investments through distributors

As per directions of Securities and Exchange Board of India (SEBI), the distributors, agents or any persons employed or engaged or to be employed or engaged in the sale and/or distribution of mutual fund products are required to have a valid certification from the National Institute of Securities Markets (NISM) by passing the certification examination.

Further, no agents / distributors are entitled to sell units of mutual funds unless the intermediary is registered with Association of Mutual Funds in India (AMFI).

- d. Applications on behalf of minors should be made by natural guardian (i.e. father or mother) or legal guardian (court appointed) and signed by them. The name of the Guardian should be filled in the relevant space provided in the Application Form. No joint applicant/ joint holder is permitted with the minor beneficiary

e. Employee Unique Identification Number (EUIIN)

Further, SEBI has made it compulsory for every employee/ relationship manager/ sales person of the distributor of mutual fund products to quote in the Application Form the EUIIN obtained by him/her from AMFI. EUIIN would assist in addressing any instance of mis-selling even if the employee/ relationship manager/sales person later leaves the employment of the distributor. Hence, if your investments are routed through a distributor please ensure that the EUIIN is correctly filled in the Application Form. However, if your distributor has not given you any advice pertaining to the investment, the EUIIN box may be left blank. In this case, you are required to provide a duly signed declaration to this effect, as given in the Form.

f. Direct Investments

Investors applying under Direct Plan must mention "Direct" in ARN No. column. In case Distributor code is mentioned in the Application Form, but "Direct Plan" is indicated against the Scheme/ Series name, the Distributor code will be ignored and the application will be processed under Direct Plan. In case of valid application received without indicating "Direct Plan" against the Scheme/ Series name and without any Distributor Code mentioned on the form, the application will be processed under "Direct Plan."

- g. All Applicants are subject to detailed scrutiny and verification. Application Form incomplete in any respect or not accompanied by a Cheque /Demand Draft are liable to be rejected either at the collection centre itself or subsequently after detailed verification at the back office of the Registrars.

h. If the Scheme name on the application form and on the payment instrument are different, the application will be processed and units will be allotted at applicable NAV of the scheme mentioned in the application / transaction slip duly signed by investor(s).

i. E-mail Communication

If the investor has provided an email address, the same will be registered in our records for communication and will be treated as your consent to receive. Allotment confirmations, consolidated account statement/account statement, annual report/abridged summary and any statutory / other information as permitted via electronic mode /email. These documents shall be sent physically in case the Unit holder opts/request for the same. Should the Unit holder experience any difficulty in accessing the electronically delivered documents, the Unit holder shall promptly intimate the Fund about the same to enable the Fund to make the delivery through alternate means. It is deemed that the Unit holder is aware of all security risks including possible third party interception of the documents and contents of the documents becoming known to third parties.

The AMC / Trustee reserve the right to send any communication in physical mode.

2 Compliance and Prevention of Anti Money Laundering

Your attention is particularly drawn to the section on "Prevention of Money Laundering and Know Your Customer". All the applications with incomplete/incorrect information/not accompanied with the necessary documents, shall be treated as invalid and shall be liable to be rejected. Prevention of Money Laundering Act, the SEBI Circulars on Anti Money Laundering (AML) and the Client Identification implementation procedures prescribed by AMFI inter alia require the AMC to verify the records of identity and address(es) of investors. It is mandatory for all applicants to submit necessary documents for compliance with Anti Money Laundering (guardian in case of minor). The AMC reserves the right to reject subscription requests in the absence of appropriate compliance with the AML Laws.

3 Applicant's Personal Information

- a. Please furnish your name and complete postal address with the Pin Code (**P.O. Box No. Not enough**) and your Contact Nos. This would help us reach you faster.
- b. Please furnish the name of Contact Person in case of investments by Company/ Body Corporate / Trust / Society / FIs / Association of Person / Body of Individuals.
- c. **KYC Compliance:** KYC is mandatory for all investors (including joint holders, guardians of minors and NRIs) to enclose a copy of KYC compliance to the application for investing in mutual fund schemes.
- d. If you have not indicated your Tax Status in the Application Form, the same would be assumed to be others.

4 Bank Account Details

An investor at the time of purchase of units must provide the details of his / her pay-out bank account (i.e. account into which redemption/ dividend proceeds are to be paid).

Bank account details provided in the application will be used for refunding rejected applications where DP ID is not matching. Investors are requested to provide Bank Account Detail linked with their Demat Account. In case of discrepancies Bank Account Details as per depository records will prevail.

5 Name and Type of Scheme

Name	Type
Motilal Oswal Focused 25 Fund	An open ended equity scheme investing in maximum 25 stocks intending to focus on Large Cap stocks
Motilal Oswal Midcap Fund	Mid Cap Fund - An open ended equity scheme predominantly investing in mid cap stocks
Motilal Oswal Flexi Cap Fund	Multi Cap Fund - an open ended equity scheme investing across larg cap, mid cap, small cap stocks
Motilal Oswal Long Term Equity Fund	An open ended equity linked saving scheme with a statutory lock in of 3 years and tax benefit
Motilal Oswal Dynamic Fund	An open ended dynamic asset allocation fund
Motilal Oswal Equity Hybrid Fund	An open ended hybrid scheme investing predominantly in equity and equity related instruments
Motilal Oswal Multi Asset Fund	An open ended scheme investing in Equity, International Equity Index Funds/Equity ETFs, Debt and Money Market Instruments and Gold Exchange Traded Funds

Motilal Oswal Ultra Short Term Fund	An open ended ultra - short term debt scheme investing in instruments such that the Macaulay duration of the portfolio is between 3 months and 6 months
Motilal Oswal Liquid Fund	An Open Ended Liquid Scheme
Motilal Oswal Large and Midcap Fund	An open ended equity scheme investing in both large cap and mid cap stocks
Motilal Oswal M50 ETF	An open ended scheme replicating/tracking Nifty 50 Index
Motilal Oswal Midcap 100 ETF	An open ended scheme replicating/tracking Nifty Midcap 100 Index
Motilal Oswal Nasdaq 100 ETF	An open ended scheme replicating/tracking NASDAQ-100 Index
Motilal Oswal S&P 500 Index Fund	An open ended scheme replicating / tracking S&P 500 Index
Motilal Oswal Nasdaq 100 Fund of Fund	An open ended fund of fund scheme investing in Motilal Oswal Nasdaq 100 ETF
Motilal Oswal Nifty Bank Index Fund (MOFNIFTYBANK)	An open ended scheme replicating / tracking Nifty Bank Index
Motilal Oswal Nifty 500 Fund	An open ended scheme replicating / tracking Nifty 500 Index
Motilal Oswal Nifty Smallcap 250 Index Fund	An open ended scheme replicating / tracking Nifty Smallcap 250 Index
Motilal Oswal Nifty Midcap 150 Index Fund	An open ended scheme replicating/ tracking Nifty Midcap 150 Index
Motilal Oswal Nifty 50 Index Fund	An open ended scheme replicating/tracking Nifty 50 Index
Motilal Oswal Nifty Next 50 Index Fund	An open ended scheme replicating / tracking Nifty Next 50 Index
Motilal Oswal 5 Year G – Sec ETF	An open ended scheme replicating/tracking Nifty 5 yr Benchmark G-Sec Index
Motilal Oswal Asset Allocation Passive Fund of Fund - Aggressive	An open ended fund of funds scheme investing in passive funds
Motilal Oswal Asset Allocation Passive Fund of Fund - Conservative	An open ended fund of funds scheme investing in passive funds
Motilal Oswal 5 Year G-Sec Fund of Fund	An open ended fund of funds scheme investing in units of Motilal Oswal 5 Year G-Sec ETF

6 Payment Details

- a. Cheques should be crossed "**A/c Payee only**" and drawn in favour of

Motilal Oswal Long Term Equity Fund, Motilal Oswal Flexi Cap Fund, Motilal Oswal Midcap Fund, Motilal Oswal Focused 25 Fund, Motilal Oswal Dynamic Fund, Motilal Oswal Equity Hybrid Fund, Motilal Oswal Multi Asset Fund, Motilal Oswal Ultra Short Term Fund, Motilal Oswal Nasdaq 100 Fund Of Fund, Motilal Oswal Liquid Fund, Motilal Oswal Large and Midcap Fund, Motilal Oswal Nifty 500 Fund, Motilal Oswal Nifty Midcap 150 Index Fund, Motilal Oswal Nifty Bank Index Fund, Motilal Oswal Nifty Smallcap 250 Index Fund, Motilal Oswal Nifty 50 Index Fund, Motilal Oswal Nifty Next 50 Index Fund and Motilal Oswal S&P 500 Index Fund.

- b. Application Form along with the Cheque/Demand Draft may be lodged with Official Collection Centres.
- c. If you are residing / located in a city / town where we do not have an Official Collection Centre, please draw a demand draft payable at your nearest city where we have such office.
- d. Payment by Cash, Stock invests, Outstation Cheques and Non-MICR Cheques will not be accepted. Post-dated cheques will not be accepted.

7 Third Party Payments

Investment/subscription made through Third Party Cheque(s) will not be accepted. Third party cheque(s) for this purpose are defined as:

- (i) Investment made through instruments issued from an account other than that of the beneficiary investor,
- (ii) in case the investment is made from a joint bank account, the first holder of the mutual fund folio is not one of the joint holders of the bank account from which payment is made. Third party cheque(s) for investment/subscription shall be accepted, only in exceptional circumstances, as detailed below:
- 1) Payment by Parents/Grand-Parents/related persons on behalf of a minor in consideration of natural love and affection or as gift. However, this restriction will not be applicable for payment made by a guardian whose name is registered in the records of Mutual Fund in that folio.
 - 2) Payment by Employer on behalf of employee under Systematic Investment Plans or lump sum/one-time subscription through Payroll deductions.
 - 3) Custodian on behalf of a Foreign Institutional Investor (FII) or a client.

The above mentioned exception cases will be processed after carrying out necessary checks and verification of documents attached along with the purchase transaction slip/application form, as stated below:

- 1) Determining the identity of the Investor and the person making payment i.e. mandatory Know Your Client (KYC) for Investor and the person making the payment.
- 2) Obtaining necessary declaration from the Investor/unitholder and the person making the payment. Declaration by the person making the payment should give details of the bank account from which the payment is made and the relationship with the beneficiary.
- 3) Verifying the source of funds to ensure that funds have come from the drawer's account only.

The Schemes will accept payment of any amount from any donor for making investment in the Schemes on behalf of a minor. However, the following conditions have to be fulfilled:

- 1) Investment is made in the name of a minor.
- 2) Mandatory KYC for the investors and the person making the payment i.e. third party.
- 3) Submission of Third Party declaration form(s) by persons other than the Registered Guardian. Please contact the nearest Investor Service Centre (ISC) of the Fund or visit our website www.motilaloslwalmf.com for the said Declaration Form.

4) Submission of all documents as applicable for making investment in these Schemes. Motilal Oswal Asset Management Company Limited (the AMC) reserves a right to seek information and/or obtain such other additional documents other than the aforesaid documents from third party for establishing the identity of the Third Party, before processing such applications.

In case of investment/subscriptions made via Pay Order, Demand Draft, Banker's cheque, RTGS, NEFT, ECS, bank transfer, net banking etc. Following additional checks shall be carried out:

- 1) If the investment/subscription is settled with pre-funded instruments such as Pay Order, Demand Draft, Banker's cheque, etc., a Certificate from the Issuing banker must accompany the purchase application, stating the Account holder's name and the Account number which has been debited for issue of the instrument. The funds should be debited from a pre-registered pay in account available in the records of the Mutual fund, or from the account of the first named unit holder. Additionally, if a pre-funded instrument issued by the Bank against cash, it shall not be accepted for investments of Rs.50,000/- or more. Such pre-funded instrument issued against cash payment of less than Rs.50,000/- should be accompanied by a certificate from the banker giving name, address and PAN (if available) of the person who has requested for the demand draft.
- 2) If payment is made by RTGS, NEFT, ECS, bank transfer, etc., a copy of the instruction to the bank stating the account number debited must accompany the purchase application. The account number mentioned on the transfer instruction should be from pay in account available in the records, or from the account of the first named unit holder.

Distributor ARN / RIA#	Distributor Name	Sub-Distributor ARN	Internal Sub-Broker/ Employee Code	EUIN
ARN/RIA- 8 3 7 8 4		ARN-		E 0 6 9 3 0 3

#By mentioning RIA code, I/We authorize you to share with the SEBI Registered Investment Advisor the details of my/our transactions in the scheme(s) of Motilal Oswal Mutual Fund.

Investors applying under Direct Plan must mention "Direct" in ARN Column

Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distributor.

I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

First Holder

Second Holder

Third Holder

1 UNIT HOLDER INFORMATION

Mr. Ms. M/s

Existing Folio Number Existing UMRN

Name F I R S T M I D D L E L A S T

2 SYSTEMATIC INVESTMENT PLAN DETAILS

Scheme name	Plan	Option *Growth (Default Option)	Dividend Frequency	SIP Installment Amount	SIP Booster details	SIP Booster Amount	SIP Booster Frequency	SIP Maximum SIP limit amount
Motilal Oswal	<input type="checkbox"/> Regular <input type="checkbox"/> Direct	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Reinvestment		(₹) <input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	SIP Booster amount minimum ₹ 100	<input type="checkbox"/> Quarterly <input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly	(₹) <input type="text"/>

SIP Frequency and Date*

Fortnightly 1st-14 *7th-21st 14th-28th

Annual SIP D D M M Y Y Y Y Y Y

Any Day/
Date SIP Weekly - Any Day of Transfer (Monday to Friday)

Monthly SIP- Any date of the month D D except (29th, 30th and 31st)

Quarterly SIP- Any date of the month for each quarter (i.e. January, April, July, October) D D except (29th, 30th and 31st)

*Incise if no date is selected, 7th would be the default SIP Date.

SIP Period

From M M Y Y Y Y Y Y To M M Y Y Y Y Y Y

or Perpetual SIP

SIP cheque No. SIP cheque Date D D M M Y Y Y Y Y Y

3 DECLARATION AND SIGNATURE (To be signed by ALL UNIT HOLDERS if mode of holding is 'joint')

This is to confirm that the declaration/instruction has been carefully read, understood. I/We have understood that I/we are authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity or the bank where I have authorized the debit and express my willingness and authorize to make payments through participation in NACH/ECS/Direct Debit/Standing Instructions. I/We hereby confirm adherence to the terms of NACH/ECS (Debits)/Direct Debits/Standing Instructions. Authorization to Bank: This is to inform that I/We have registered for ECS / NACH (Debit Clearing) / Direct Debit / Standing instructions facility and that my/our payment towards my/our investment in Motilal Oswal Mutual Fund shall be made from my/our bank account with your Bank. I/We authorize the representatives Motilal Oswal Mutual Fund carrying this mandate form to get it verified and executed.

(Please attach a cancelled cheque/cheque copy)

First / Sole Applicant / Guardian / Authorised Signatory	Second Applicant	Third Applicant
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(To be signed by all holders if mode of operation of Bank Account is 'Joint')



OTM Debit Mandate form NACH/ ECS/ Direct Debit [Applicable for Lumpsum Additional Purchases as well as SIP Registrations]

UMRN For Official Use Date D D M M Y Y Y Y Y Y

Tick (✓)	Sponsor Bank Code	C I T I O O O P I G W	Utility Code	N A C H O O O O O O O O O 2 2 8 0 6
Create <input checked="" type="checkbox"/>	I/We hereby authorize	Motilal Oswal Mutual Fund	To Debit (to tick ✓)	<input type="checkbox"/> SB <input type="checkbox"/> CA <input type="checkbox"/> CC <input type="checkbox"/> SB-NRE <input type="checkbox"/> SB-NRO <input type="checkbox"/> Other
Modify <input checked="" type="checkbox"/>	Bank a/c number	<input type="text"/>	with Bank	<input type="text"/> Bank name and branch
Cancel <input checked="" type="checkbox"/>			IFSC	<input type="text"/> Or MICR <input type="text"/>

an amount of Rupees ₹

FREQUENCY Mthly Qly H.Yrly Yrly As & when presented DEBIT TYPE Fixed Amount Maximum Amount

Reference 1 Folio No. Mob. No.

Reference 2 Application No. Email ID

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.

Period	1. Sign	2. Sign	3. Sign
From <input type="text"/> D D M M Y Y Y Y Y Y	<input type="text"/>	<input type="text"/>	<input type="text"/>
To <input type="text"/> 3 1 1 2 2 0 9 9	Name as in bank record (mandatory)	Name as in bank record (mandatory)	Name as in bank record (mandatory)
Or <input checked="" type="checkbox"/> Until cancelled	This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity/ Corporate to debit my account based on the instruction as agreed and signed by me. I have understood that I am authorized to cancel/ amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/ corporate or the bank where I have authorized the debit		

ACKNOWLEDGMENT SLIP (To be filled by the investor)

Application No.

Folio No.	<input type="text"/>	Investor Name	<input type="text"/>
Scheme Name	<input type="text"/>	Plan	<input type="text"/>
SIP Period From	<input type="text"/> D D M M Y Y Y Y	To	<input type="text"/> D D M M Y Y Y Y <input type="checkbox"/> Perpetual SIP

Stamp & Signature

FATCA & CRS Instructions

FATCA Instructions & Definitions Individual

FATCA & CRS TERMS & CONDITIONS

Note: The Guidance Note/notification issued by the CBDT shall prevail in respect to interpretation of the terms specified in the form)
Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/appointed agencies.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Please note that you may receive more than one request for information if you have multiple relationships with Motilal Oswal Mutual Fund or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

FATCA & CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS Indicia
U.S. place of birth	1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); and 3. Any one of the following documents: Certified Copy of "Certificate of Loss of Nationality or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
Residence/mailling address in a country other than India	1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence (refer list below)
Telephone number in a country other than India	If no Indian telephone number is provided: 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence (refer list below) If Indian telephone number is provided along with a foreign country telephone number: 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; OR 2. Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

- Certificate of residence issued by an authorized government body*
 - Valid identification issued by an authorized government body* (e.g. Passport, National identity card, etc.)
- *Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.

FATCA & CRS INSTRUCTIONS

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or green card holder, please include United States in the foreign country information field along with your US Tax Identification Number.

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 this to the form.

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA Instructions & Definitions Non-Individual

(Note: The Guidance Note/notification issued by the CBDT shall prevail in respect to interpretation of the terms specified in the form)

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the US Tax Identification Number.

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 this to the form.

1 (i) **Financial Institution (FI)** - The term FI means any financial institution that is a Depository Institution, Custodial Institution, Investment Entity or Specified Insurance company, as defined.

(ii) **Depository institution:** is an entity that accepts deposits in the ordinary course of banking or similar business.

(iii) Custodial institution is an entity that holds as a substantial portion of its business, holds financial assets for the account of others and where it's income attributable to holding financial assets and related financial services equals or exceeds 20 percent of the entity's gross income during the shorter of:

- The three financial years preceding the year in which determination is made; or
- The period during which the entity has been in existence, whichever is less.

(iv) Investment entity is any entity;

(a) That primarily conducts a business or operates for or on behalf of a customer for any of the following activities or operations for or on behalf of a customer

(i) 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; or Individual and collective portfolio management; or

(ii) Investing, administering or managing funds, money or financial asset or money on behalf of other persons;

or

(b) 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 above. An entity is treated as primarily conducting as a business one or more of the 3

activities described above, or an entity's gross income is primarily attributable to investing, reinvesting, or trading in financial assets of the entity's gross income attributable to the relevant activities equals or exceeds 50 percent of the entity's gross income during the shorter of:

- The three-year period ending on 31 March of the year preceding the year in which the determination is made; or
- The period during which the entity has been in existence. The term "Investment Entity" does not include an entity that is an active non-financial entity as per codes 04, 05 and 06 and 07- refer point 2c.)

(v) Specified Insurance Company: 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.

(vi) FI not required to apply for GIIN: Refer Rule 114F(5) of Income Tax Rules, 1962 for the conditions to be satisfied as "non-reporting financial institution and Guidance issued by CBDT in this regard.

A. Reasons why FI not required to apply for GIIN:

Code	Sub-category
01	Governmental Entity, International Organization, or Central Bank
02	Treaty Qualified Retirement Fund; a Broad Participation Retirement Fund; a Narrow Participation Retirement Fund; or a Pension Fund of a Governmental Entity, International Organization or Central Bank
03	Non-public fund of the armed forces, an employees state insurance fund, a gratuity fund or provident fund
04	Entity is an Indian FI solely because it is an investment entity
05	Qualified credit card issuer
06	Investment Advisors, Investment Managers & Executing Brokers
07	Exempt collective investment vehicle
08	Trust

(Continued overleaf)

SYSTEMATIC INVESTMENT PLAN DETAILS

1. The Mandate will be registered under the best suited mode i.e. NACH or ECS or Direct Debit at the discretion of its appointed payment Aggregator through whom the mandate will be registered for the SIP debit facility.

2. Unit holder(s) need to provide along with the mandate form an original cancelled cheque (or a copy) with name and account number pre-printed of the bank account to be registered for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque/ bank account details are subject to third party verification.

3. Where the cancelled cheque or a copy of the cheque does not mention the bank account holder's name(s), Investor should provide self-attested bank pass book copy / bank statement / bank letter to substantiate that the first unit holder is one of the joint holder of the bank account. In case of a mismatch, it will be deemed to be a 3rd party payment and rejected except under the following exceptional circumstances.

- Payment by parents / grand-parents / related person on behalf of a minor in consideration of natural love and affection or as gift provided the purchase value is less than or equal to '50,000/-' and KYC is completed for the registered Guardian and the person making the payment. However, single subscription value shall not exceed above '50,000/-' (including investment through each regular purchase or single SIP instalment). However, this restriction will not be applicable for payment made by a guardian whose name is registered in the records of Mutual Fund in that folio. Additional declaration in the prescribed format signed by the guardian and parents/grand - parents/related person is also required along with the application form.
- Payment by an Employer on behalf of employee under Systematic Investment plans through Payroll deductions provided KYC is completed for the employee who is the beneficiary investor and the employer who is making the payment. Additional

declaration in the prescribed format signed by employee and employer is also required along with the application form

c) Custodian on behalf of an FI or a Client provided KYC is completed for the investor and custodian. Additional declaration in the prescribed format signed by Custodian and FI/ Client is also required along with the application form.

4. Please note that in the event of a minor mismatch between the bank account number mentioned in the application form and as appearing in the cheque leaf submitted, bank account number would be updated based on the cancelled cheque leaf provided the name(s) of the investor/applciant appears in the cheque leaf.

AUTHORISATION BY BANK ACCOUNT HOLDER(S)

a) Please indicate the name of the bank & branch, bank account number.

b) If the mode of operation of bank account is joint, all bank account holders would need to sign at the place marked.

6. Applications incomplete in any respect are liable to be rejected. AMC/ Service Provider shall have absolute discretion to reject any such Application forms.

7. AMC or other service providers shall not be responsible and liable for any damages / compensation for any loss, damage etc. The investor assumes the entire risk of using this facility and takes full responsibility.

DECLARATION & SIGNATURES

8. This section need to be signed by the applicant(s) / unit holder(s) at the places marked as per the mode of holding recorded with us (i.e. "Single", "Anyone or Survivor" or "Joint").

TERMS AND CONDITIONS FOR ECS (Debit Clearing)

1. The cities/banks/ branches in the list may be modified / updated / changed / removed at any time in future entirely at the discretion of Motilal Oswal Mutual Fund without assigning any reasons or prior notice. If any city / bank/ branch is removed, SIP instructions for investors in such city/bank/branch via (ECS) (Debit Clearing) Direct Debit route will be discontinued without prior notice.

List of Banks for SIP Direct Debit Facility:-

Allahabad Bank, Axis Bank, Bank of Baroda, Bank of India, Citi Bank, Corporation Bank, Federal Bank, ICICI Bank, IDBI Bank, IndusInd Bank, Kotak Mahindra Bank, Punjab National Bank, South Indian Bank, State Bank of India, State Bank of Patiala, UCO Bank, Union Bank of India, United Bank of India

3. Applications for SIP Auto Debit (ECS/ Direct Debit) Facility would be accepted only if the bank branch participates in local MICR/ECS clearing.

4. In case the investor's bank chooses to cross verify the auto debit mandate with him/ her as the bank's customer, investor would need to promptly act on the same. AMC/ Service Provider will not be liable for any transaction failures due to rejection of the transaction by investor's bank/ branch or its refusal to register the SIP mandate or any charges that may be levied by the Bank/ Branch on investor / applicant.

INSTRUCTIONS TO FILL THE OTM Debit Mandate form NACH/ ECS/ Direct Debit

1. UMRN Code, Sponsor Code, and Utility Code are for official use only. Please do not write anything in these boxes/spaces.

2. The following information has to be mandatorily filled in the Mandates. In case any of these fields are not filled, the mandate is liable for rejection.

- Please tick the Appropriate Account Type and furnish the Bank Account Number from which the SIP installment/s is/are to be debited.
- Please mention the Bank Name, 11 Digit IFSC code, 9 Digit MICR Code of your Bank in the appropriate boxes provided for the purpose. The MICR code is the number appearing next to the cheque number on the MICR band at the bottom of the cheque. In the absence of these information, Mandate registration is liable to be rejected.

c) Please mention the maximum amount that can be debited using this mandate. The amount needs to be mentioned both in words as well as numbers.

d) Please mention your Mobile Number and Email Id on the mandate form.

e) Please provide the Start and End date for the period which the Mandate should be active. If you do not wish to provide an End date, please tick the check box for 'Until Cancelled'.

SIGNATURES

3. The mandate needs to be signed by all the account holders in line with the mode of holding recorded with the investor's bank. The Account holder's names have to be mentioned as per their mode of holding in Account.



Now that's a
FAB PLAN
Motilal Oswal Fixed Amount Benefit Plan

Application No.
Version: 10.1.2023

EXISTING UNIT HOLDER INFORMATION

Folio No. Registration Cancellation Date

Name of the 1st Holder:

Name of the 2nd Holder:

Motilal Oswal Fixed Amount Benefit Plan Details

Scheme Name: Option *Growth Dividend-Payout Dividend - Reinvest

Registration Amount ₹: Include Current Valuation (✓) *Yes No

Withdrawal % rate: *6% 8% 10% 12% Frequency: *Monthly Quarterly Annually

Date: 1st *7th 14th 21st 28th

Period: Start*: End: Perpetual

*Default Option Please refer below for Terms & Conditions

Top Up Additional Purchase Request

I / We would like to purchase Units of the above mentioned Scheme for ₹ (in figures)

₹ (in words) Cheque / DD No.

Dated A/C No. Drawn on Bank/Branch

Account Type Current Savings NRO NRE Others Specify

First / Sole Applicant / Guardian	Second Applicant	Third Applicant	POA Holder
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ACKNOWLEDGMENT SLIP FOR Motilal Oswal Fixed Amount Benefits Plan

Application No.

Folio No. Registration Cancellation

Scheme Stamp & Signature

TERMS AND CONDITIONS

- It is applicable for lump sum investments only. The payout will be calculated on the basis of respective lump sum investment and /or recent current valuation (If opted for)
- The eligible schemes for this facility are Motilal Oswal Equity Hybrid Fund (Default), Motilal Oswal Focused Fund (Formerly known as Motilal Oswal Focused 25 Fund), Motilal Oswal Midcap Fund (Formerly known as Motilal Oswal Midcap 30 Fund), Motilal Oswal Flexi Cap Fund, Motilal Oswal Large and Midcap Fund, Motilal Oswal Balanced Advantage Fund (Formerly known as Motilal Oswal Dynamic Fund), Motilal Oswal Nifty 500 Index Fund (Formerly known as Motilal Oswal Nifty 500 Fund), Motilal Oswal Nifty Midcap 150 Index Fund, Motilal Oswal Nifty Smallcap 250 Index Fund, Motilal Oswal Asset Allocation Passive Fund of Fund - Aggressive & Motilal Oswal Asset Allocation Passive Fund of Fund – Conservative.
- Top up amount on existing folio to be considered as applicable for fixed amount benefits plan in addition to original lump sum investment and /or recent current valuation (If opted for)
- #In case start date is not mentioned Fixed Amount Benefits plan shall be active after 7 business days of plan registration
- Frequency available Monthly, Quarterly or Annually. In case if no frequency is selected, Monthly would be the default option.
- This Facility currently offers 6%, 8%, 10% and 12% p.a of original cost of investment and /or recent current valuation (If opted for). In case if no option is selected, 6% would be the default option.
- The dates available under this plan for the schemes of Motilal Oswal Mutual Fund (MOMF) is 1, 7, 14, 21 or 28. In case, the date fixed happens to be a holiday / non-business day, the same shall be affected on the next business day. In case if no date is selected, 7th would be default date.
- In case, end date is not specified; default option would be perpetual. In case, start date is not specified; FAB Plan would assume one year of default deferment
- In case of partial redemptions, the payouts will further trigger on the original investment cost and /or recent current valuation (If opted for) and not on the balance investment
- In case of the account balance available under the folio is less than the desired payout amount, the redemption will be processed for the available amount in the folio and the folio would be closed.
- The AMC will require 7 calendar days from the date of submission of valid enrolment forms to register the Investor under this Facility. Therefore, in the intervening period i.e. date of submission of enrolment form and date of registration, if the date of trigger is crossed, then the same will be considered at the next date of trigger
- Unit holders can discontinue the Facility at any time by providing a form which shall be made effective within 7 calendar days of the date of receipt of the said request
- This facility will be automatically terminated if all units are liquidated or withdrawn or pledged or upon receipt of intimation of death of the unit holder
- Motilal Oswal Fixed Amount Benefits Plan can be opted if minimum monthly fixed amount benefits is Rs. 500/-
- For more details, kindly visit the MOMF website- www.motilaloslwalmf.com