



Asset
Management

**GOLDMAN SACHS MUTUAL FUND
COMMON TRANSACTION FORM
(For GS CNX 500, GSIEF)**

For existing Non-ETF Investors only

Please strike unused section to avoid unauthorised use

Application No. _____

Please read Key Information Memorandum and the instructions in this form. All sections to be filled legibly in English and in BLOCK LETTERS.

Broker/Distributor Name*:	ARN:	Sub-Broker Name & Code	Registrar Serial No.
Employee Name & EUIN:			
"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".			

*If not routed through a broker/Distributor, will be captured as DIRECT

Upfront commission shall be paid directly by the Investor to the Distributor / broker based on the Investors' assessment of various factors including the service rendered by the Distributor / broker

Existing Folio No. _____	Date: _____
First / Sole Holder Name _____	
(Please attach attested PAN copy and KYC Acknowledgement Letter of all Applicants / POA holders / Guardian, as applicable, if not submitted earlier)	

1. ADDITIONAL PURCHASE

#I/We want to Purchase Units of the below Scheme for ₹ (in figure) _____

Cheque/DD No for ₹ _____ Dated _____ Drawn on (Bank) _____

Branch _____ Account No. _____ Account Type _____

☐ Goldman Sachs India Equity Fund (GSIEF)

☐ Goldman Sachs CNX 500 Fund (GS CNX 500)

Plan: ☐ Direct Plan ☐ Distributor Plan

Option: ☐ Growth* ☐ Dividend

Dividend option ☐ Payout ☐ Reinvestment**

(*Default Option; **Default Dividend Option)

#For Additional Purchase of Rs. 10,000 and more: In case the transaction is routed through an empanelled Distributor who has 'opted in' to receive transaction charges, a transaction charges of Rs.100/- will be deducted from the purchase amount and paid to the Distributor. Units will be issued against the balance amount invested.

Do you want Units in demat form? [Please tick(✓)]. ☐ Yes ☐ No If existing holding is in physical mode and demat details are filled up, it will be deemed that allotment of Units for additional Purchase is required in dematerialised form. For all such cases a new folio will be created and all account related information will be captured as per the details available with Depository Participant

NATIONAL SECURITIES DEPOSITORY LTD. (NSDL)

Depository Participant Name: _____

DPID No.: I N _____

Beneficiary A/c No. _____

CENTRAL DEPOSITORY SERVICES (INDIA) LTD. (CDSL)

Depository Participant Name: _____

Beneficiary A/c No. _____

2. REDEMPTION

Scheme: _____ Plan: ☐ Direct Plan ☐ Distributor Plan

Option: ☐ Growth ☐ Dividend ☐ Dividend Option (Please Specify) _____ Please Redeem (₹): _____ or _____ Units.

To receive Redemption proceeds in a registered bank account other than your default bank account, please fill in the details below:

Registered Bank Account No.: _____ Bank Name: _____

3. SWITCH

I/We would like to Switch _____ Units or ₹ (in figures) _____ ₹ (in words) _____

From : Scheme _____ Plan: _____ Option: _____

To : Scheme _____ Plan: _____ Option: _____

4. CANCELLATION OF SIP/VIP/SWP

I/We want to cancel all the future ☐ SIP Installment / ☐ VIP Installment / ☐ SWP of Scheme _____

Plan: _____ Option: _____

Date: ☐ 1st ☐ 15th Period: From MM YYYY To MM YYYY Amount ₹ _____

5. CANCELLATION OF STP

I/We want to cancel all the future ☐ STP

From : Scheme _____ Plan: _____ Option: _____

To : Scheme _____ Plan: _____ Option: _____

Date: ☐ 1st ☐ 15th Period: From MM YYYY To MM YYYY Amount ₹ _____

DECLARATION(S) & SIGNATURE(S)

Please note that by signing this Transaction Form, the Investors also give the Important Declarations set out in the instructions section of the Transaction Form.

I/We hereby apply for the allotment / Purchase of Units of the Scheme, as indicated in this form and confirm that I/we have read, understood and are bound by the terms and conditions of this Transaction Form, including the Important Declarations in the instructions to the Transaction Form, the contents of the Key Information Memorandum, the Scheme Information Document and the Statement of Additional Information, and am/are fully capable of assessing and bearing the risks involved in purchasing the Units, and agree to abide by the terms, conditions, rules and regulations of the Scheme.

I / We hereby authorise Goldman Sachs Mutual Fund, its Investment Manager and its agents to disclose personal data / details of my investment to anyone as may be necessary or expedient for the purposes of administration of investments in the Units of the Scheme. By signing this Application Form, I / we confirm that I / we have read the Goldman Sachs India Privacy Policy which is available at www.gsam.in and agree to the collection and use of my / our personal information as provided in such policy, as it may be updated from time to time. Applicable to NRIs only.

I / We confirm that I am / We are Non-Resident of Indian Nationality/ Origin and I / We hereby confirm that funds for Subscription have been remitted from abroad through normal banking channels or from funds in my/ our Non-Resident External/ Ordinary Account/ FCNR Account.

Please (✓) ☐ Yes ☐ No If yes, ☐ Repatriation basis ☐ Non-repatriation basis

Signature

First Holder/Guardian/POA Holder

Second Holder/POA Holder

Third Holder/POA Holder

GOLDMAN SACHS MUTUAL FUND COMMON TRANSACTION FORM (For GS CNX 500 and GSIEF)

For existing Non-ETF Investors only

Application No. _____

Existing Folio No. _____ Date: _____

First / Sole Holder Name _____
(Please attach attested PAN copy and KYC Acknowledgement Letter of all Applicants / POA holders / Guardian, as applicable, if not submitted earlier)

6. CHANGE OF BANK MANDATE (FOR DEFAULT BANK ACCOUNT)

Existing bank account as per Account Statement:

Bank Name _____ Account No. _____

New bank account details

Please attach blank cancelled cheque / bank letter confirming new bank account details

Bank Name : _____ Branch _____

Account No. _____ City _____ State _____

MICR No. for ECS (9 Digit No. next to your cheque number) _____

IFSC Code. (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your local bank branch) _____

Account Type (Please tick (✓) ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others (please specify) _____

Note: Please submit a new SIP/VIP Auto Debit (ECS) Form in case you want to change the ECS bank for SIP/VIP.

7. CHANGE OF TELEPHONE NUMBER/FAX NUMBER/E-MAIL ADDRESS

Tel No. : Off.: _____ Resi.: _____ Mobile: _____

Fax : _____ E-mail : _____

I/We wish to receive the account statement/scheme wise annual report or an abridged summary thereof/statutory and other documents by physical mode in lieu of e-mail (Please ✓) ☐
(Applicable if E-mail address is mentioned above)

8. CHANGE OF DISTRIBUTOR CODE

Existing Distributor Name: _____ ARN Code: _____ Sub Broker Code : _____

New Distributor Name: _____ ARN Code: _____ Sub Broker Code : _____

DECLARATION(S) & SIGNATURE(S)

Please note that by signing this Transaction Form, the Investors also give the Important Declarations set out in the instructions section of the Transaction Form.
I/We hereby apply for the allotment / Purchase of Units of the Scheme, as indicated in this form and confirm that I/we have read, understood and are bound by the terms and conditions of this Transaction Form, including the Important Declarations in the instructions to the Transaction Form, the contents of the Key Information Memorandum, the Scheme Information Document and the Statement of Additional Information, and am/are fully capable of assessing and bearing the risks involved in purchasing the Units, and agree to abide by the terms, conditions, rules and regulations of the Scheme.

I / We hereby authorise Goldman Sachs Mutual Fund, its Investment Manager and its agents to disclose personal data / details of my investment to anyone as may be necessary or expedient for the purposes of administration of investments in the Units of the Scheme. By signing this Application Form, I / we confirm that I / we have read the Goldman Sachs India Privacy Policy which is available at www.gsam.in and agree to the collection and use of my / our personal information as provided in such policy, as it may be updated from time to time.
Applicable to NRIs only.

I / We confirm that I am / We are Non-Resident of Indian Nationality/ Origin and I / We hereby confirm that funds for Subscription have been remitted from abroad through normal banking channels or from funds in my/ our Non-Resident External/ Ordinary Account/ FCNR Account.

Please (✓) ☐ Yes ☐ No If yes, ☐ Repatriation basis ☐ Non-repatriation basis

Signature

First Holder/Guardian/POA Holder

Second Holder/POA Holder

Third Holder/POA Holder

GENERAL INSTRUCTIONS

- Please read the Scheme Information Document ("SID"), the Statement of Additional Information ("SAI") and Key Information Memorandum ("KIM") (collectively the "Offering Documents") and the Important Declarations in these Instructions carefully before filling the Common Transaction Form.
- All Investors are deemed to have read and accepted the terms in the Offering Documents and the Common Transaction Form including these Instructions subject to which this offer is being made and bind themselves to the terms thereof upon signing the Common Transaction Form.
- All Common Transaction Forms should be submitted at the Official Points of Acceptance as provided in the KIM and on our website www.gsam.in. Please ensure that the requisite details and documents have been provided, in order to avoid processing delays and / or rejection of your Common Transaction Form.
- Investors must use separate Common Transaction Forms for any additional purchases relating to each Scheme or Option of the Scheme.
- Investors shall ensure that any overwriting or correction shall be countersigned by the Investors, failing which the AMC / Mutual Fund / Trustees may at its sole discretion reject such transaction request.
- Investors should ensure to write the word 'DIRECT' in the column for 'Broker/Distributor Name' in their Common Transaction Form in cases where such applications are not routed through any distributor / broker. If the column for 'Broker/Distributor Name' is left blank in the Common Transaction Form, then the application would be considered as a 'DIRECT' application. Any subsequent change / update / removal of ARN will be based on the written request from the Unit holder and will only be on a prospective basis from the date when the Registrar accepts such written instruction.
- Investors already having an account in any of the Schemes (other than exchange traded funds of the Mutual Fund) shall provide their relevant existing folio no. and proceed to the relevant section. The personal details and bank account details as they feature in the existing folio would apply to this

investment as well and would prevail over any conflicting information furnished in this Common Transaction Form. Unit holder's name should match with the details in the existing folio, failing which the Common Transaction Form is liable to be rejected. Existing Unit holders need to enclose an attested copy of the PAN card and the KYC Acknowledgment Letter, if not provided earlier.

(viii) Permanent Account Number ("PAN"):

SEBI has made it mandatory for all applicants (in the case of application in joint names, each of the applicants) to mention his/her permanent account number (PAN) and submit a certified copy of the PAN card as the sole identification number, irrespective of the amount. Applications received without PAN / PAN card copy will be rejected. PAN card copy is not required separately if KYC Acknowledgment Letter is made available. In case of joint applicants, PAN details and certified copies of PAN card of all holders should be submitted. If a POA holder is transacting on behalf of the Investor, then the PAN details and certified copy of the PAN card of the POA holder and the Investor should be provided. However, PAN is not mandatory in the case of Investors residing in the state of Sikkim and transactions undertaken on behalf of Central Government, State Government entities and the officials appointed by the courts e.g. Official liquidator, Court receiver etc (under the category of Government) and UN entities / multilateral agencies exempt from paying taxes / filing tax returns in India for their investments in the Mutual Fund. Systematic Investment Plans ("SIPs") where aggregate of installments in a rolling 12 month period or in a financial year i.e April to March does not exceed Rs. 50,000 (to be referred as "Micro SIP" hereinafter) per year per Investor are also exempted from the requirement of PAN. Such eligible investors exempt from providing PAN should attach a copy of KYC acknowledgment letter quoting PAN Exempt KYC Reference No (PEKRN) obtained from KYC Registration Agency (KRA) along with the application of investments, eligible investors must hold only one PEKRN. The Mutual Fund reserves the right to ascertain the status of such entities with adequate supporting documents. Applications not complying with the above requirement may not be accepted/processed. For further details, please refer Section 'Permanent Account