

Form No. BEN-2

Return to the Registrar in respect of declaration under section 90 [Pursuant to section 90(4) of the Companies Act, 2013 and rule 4 and rule 8 of the Companies (Significant Beneficial Owners) Rules, 2018]

Refer instruction kit for filing All fields marked in * are mo			
Company Information			
1 *Corporate Identity Numb	er (CIN)		
2(a) *Name of the Company			
(b) *Registered office address	ss		
(c) *email id			
3 *Purpose of filing the for	m		
For declaration of holdin Section 90	g reporting company	For declaration of	Significant Beneficial Ownership under
For change in particulars Ownership under Ownership under Section	of existing Significant Beneficians	For change Section 90	ge of existing Significant Beneficial
Change of the existing he	olding reporting company		
4 For declaration of holdin (applicable in case 'For dec	g reporting company laration of holding reporting com	pany' is selected in da	ta field 3)
(a) CIN of the holding re	porting company		
(b) Name of the holding i	reporting company		
	nificant Beneficial Ownership u laration of Significant Beneficial		on 90' is selected in data field 3)
(i) Number of Signific	ant Beneficial Owners for whom	the form is being filed	
Significant Beneficial Owner	Number of Members through being exercised	whom indirect holding	ng or right in reporting company is
SBO1			
SBO2			

5 (b) For change in particulars of Significant Beneficial Ownership under Section 90

Add row

Delete row

(applicable in case 'For change in particulars of Significant Beneficial Ownership under Section 90' is selected in data field 3)

Download excel Template

Import from Excel

(i) Number of Significant Bo	eneficial Owners for whom	particulars are to be cha	nged		
Significant Beneficial Owner	Number of Members the	nrough whom indirect h	olding or right in 1	reporting compa	any is
SBO1					
SBO2					
Add ro	Delete :	Downle	oad excel Template	Import	from Excel
5 (c) For change of existin (applicable in case 'Fo	g Significant Beneficial C or change (leading to remo			ship under Secti	on 90' is
selected in data field 3)					
(i) Number of Signific	cant Beneficial Owner to be	e changed			
		Downloa	ad excel Template	Import from E	excel
(ii) ID of the Significa	ant Beneficial Owner to be	changed			▼
(iii) Name of Significa	ant Beneficial Owner to be	changed			
(iv) Date of change of	Significant Beneficial Inte	rest (DD/MM/YYYY)			
(v) Date of declaration	s under sub-section (1) of	section 90 (DD/MM/YYY	YY)		
(vi) Date of receipt of	the declaration by the com	pany (DD/MM/YYYY)			
(vii) Whether control of	or significant influence has	ceased		Yes 🔘	No(
If yes, provide copy	of relevant document	Max 2 MB	Choose	Remove	Download
(viii) Details of direct	ct or indirect control by the	SBO after such cessation	n/change (select all	that apply)	
(i) By virtue of shares					%
(ii) By virtue of voting	rights in shares				%
(iii) By virtue of rights	on distributable dividend o	r any other distribution			%
(iv) By virtue of exercise	se of control (attach copy o	f agreement)			
Copy of Agreemen	t	Max 2 MB	Choose	Remove	wnload
(v) By virtue of exercis	e of significant influence (attach copy of agreement			
Copy of Agreement		Max 2 MB	Choose	Remove Dow	nload

[भाग II—खण्ड 3(i)] भारत का राजपत्र : असाधारण 13

	olding or right (select one or more as may be ap		ner mairec	ny or together w	any dire
	By virtue of shares				%
	By virtue of voting rights in shares				%
	By virtue of rights on distributable dividend or a	any other distribution			%
	By virtue of exercise of control (attach copy of ag	greement)			
	Copy of Agreement	Max 2 MB	Choose	Remove	ownload
	By virtue of exercise of significant influence (atta	ach copy of agreement)			
	Copy of Agreement	Max 2 MB	Choose	Remove	ownload
6B P	articulars of the Members				
(8	a) Type of Member				V
(t	o) CIN/FCRN/LLPIN or any other registration num	nber			
(c) Name of the Member				
(0	d) Address of the Member				
	(d)(i) Address Line 1				
	(ii) Address Line 2				
	(iii) Country				▼
	(iv) Pin Code/Zip code				
	(v) Area/Locality				▼
	(vi) City				
	(vii) District				
	(viii) State/UT				
(e	e) Email ID of the Member				
(f) Date of entry of name in register u/s 88 (DD/MM	M/YYYY)			
6C	Other details of the members				
(8	a) Status of the SBO				V
(t) Whether individual (SBO) has majority stake in	the			V
(0	c) Corporate Identity number (CIN) or Foreign Company or any other registration number	y Registration Number (FCRN)			
(c	I) Name of the ultimate holding company				

(e) Whether the individual (SBO):	▼	
(f) Corporate Identity number (CIN) or Foreign Company Registration Number (FCRN) or any other registration number		
(g) Name of the body corporate partner / ultimate holding company		
6D Particulars of the SBO to be added SBO1		
(a) ID of the Significant Beneficial Owner		
(a)(i) Income Tax PAN		
	Verify Income tax	
(ii) Passport Number		
(b) Name of the Significant Beneficial Owner		
(b)(i) First Name		
(ii) Middle Name		
(iii) Last Name		
(c) Father's Name (Even married women must give father's name)		
(c)(i) First Name		
(ii) Middle Name		
(iii) Last Name		
(d) Date of Birth (DD/MM/YYYY)		
(e) Nationality		
(f) Whether a citizen of India	O Yes O	No
(g) Address of Significant Beneficial Owner		
(g)(i) Address Line 1		
(ii) Address Line 2		
(iii) Country	V	
(iv) Pin Code/Zip code		
(v) Area/Locality	▼	
(vi) City		
(vii) District		
(viii) State/UT		
(ix) Email ID of the Significant Beneficial Owner		

Certificate by Practicing Professional

It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original records maintained by the Company which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed.

Category:	
Chartered accountant (in whole-time practice) or	
Cost accountant (in whole-time practice) or	
Company secretary (in whole-time practice)	
*To be digitally signed by	DSC BOX
*Whether associate or fellow:	
Associate Fellow	
*Membership number	
Certificate of practice number	
	Save
Note: Attention is drawn to provisions of Section 448 and 449 of the for false statement / certificate and punishment for false evidence res	
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