



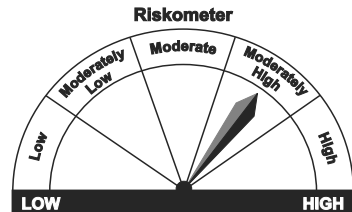
# Nippon India Mutual Fund

Wealth sets you free

## Key Information Memorandum cum Application Form

# Nippon India Nifty Smallcap 250 Index Fund

(An open ended scheme replicating/tracking Nifty Smallcap 250 Index)

Product label	
<b>This product is suitable for investors who are seeking*:</b> <ul style="list-style-type: none"> <li>Long term capital growth</li> <li>Investment in equity and equity related securities and portfolios replicating the composition of the Nifty Smallcap 250 Index, subject to tracking errors.</li> </ul> <p>*Investors should consult their financial advisers if in doubt about whether the product is suitable for them.</p>	 <p><b>Investors understand that their principal will be at Moderately High risk</b></p>

Offer of Units of Rs. 10/- each during the New Fund Offer ("NFO") and at NAV based prices during the Ongoing Offer.

<b>TRUSTEE</b> <b>Corporate Office</b> <b>Nippon Life India Trustee Limited (NLITL)</b> (Formerly known as Reliance Capital Trustee Co. Limited), CIN : U65910MH1995PLC220528 4th Floor, Tower A, Peninsula Business Park, Ganapatrao Kadam Marg, Lower Parel (W), Mumbai - 400 013. Tel No. - +91 022 6808 7000, Fax No. - +91 022 6808 7097 E-mail : <a href="mailto:customercare@nipponindiamf.com">customercare@nipponindiamf.com</a> 'Touchbase' [Customer Helpline] 18602660111 (Charges applicable)  Overseas callers need to dial 91-22-68334800 (charges applicable). Website: <a href="https://www.nipponindiamf.com">https://www.nipponindiamf.com</a>	<b>INVESTMENT MANAGER</b> <b>Registered Office</b> <b>Nippon Life India Asset Management Limited (NAM India)</b> (Formerly known as Reliance Nippon Life Asset Management Limited), CIN : L65910MH1995PLC220793 4th Floor, Tower A, Peninsula Business Park, Ganapatrao Kadam Marg, Lower Parel (W), Mumbai - 400 013. Tel No. - +91 022 6808 7000, Fax No. - +91 022 6808 7097
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New Fund Offer Opens	New Fund Offer Closes	Scheme re-opens for continuous sale & repurchase not later than
28th September 2020	9th October, 2020	23rd October 2020

This Key Information Memorandum (KIM) sets forth the information, which a prospective investor ought to know before investing. For further details of the Scheme/Mutual Fund, due diligence certificate by the AMC, Key Personnel, investors' rights & services, risk factors, penalties & pending litigations, etc., investors should, before investment, refer to the respective Scheme Information Document and Statement of Additional Information available free of cost at any of the Investor Service Centres or distributors or from the website [www.nipponindiamf.com](http://www.nipponindiamf.com)

The Scheme particulars have been prepared in accordance with Securities and Exchange Board of India (Mutual Funds) Regulations 1996, as amended till date, and filed with Securities and Exchange Board of India (SEBI). The units being offered for public subscription have not been approved or disapproved by SEBI, nor has SEBI certified the accuracy or adequacy of this KIM. This KIM is dated September 14, 2020.



9. FATCA and CRS DETAILS For Individuals (Mandatory) Non Individual Investors should mandatory fill separate FATCA/CRS details form

# Please indicate all Countries in which you are a resident for tax purpose, associated Taxpayer Identification Number and it's Identification type eg. TIN etc.

Sole/First Applicant/Guardian			Second Applicant			Third Applicant		
Country #***	Tax Payer Ref. ID No%	Identification Type	Country #	Tax Payer Ref. ID No%	Identification Type	Country #	Tax Payer Ref. ID No%	Identification Type
1			1			1		
2			2			2		
3			3			3		

In case Country of Tax Residence is only India then details of Country of Birth & Nationality need not be provided. \*In case Tax Identification Number is not available, kindly provide its functional equivalent

Sole/First Applicant/Guardian			Second Applicant			Third Applicant		
Country of Birth***			Country of Birth***			Country of Birth***		
Country of Nationality***			Country of Nationality***			Country of Nationality***		

10. ADDITIONAL KYC DETAILS

OCCUPATION***	Professional	Agriculturist	Housewife	Retired	Government Service/PublicSector	Business	Forex Dealer	Student	Private Sector Service	Others
1 <sup>st</sup> Applicant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 <sup>nd</sup> Applicant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3 <sup>rd</sup> Applicant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Guardian	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GROSS ANNUAL INCOME DETAILS^**		Below 1 Lac	1-5 Lacs	5-10 Lacs	10-25 Lacs	25 Lacs-1 Crore	>1 Crore	NET-WORTH*** in ₹	Date
1st Applicant		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	(Net worth should	D D M M Y Y Y Y
2nd Applicant		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	not be older	D D M M Y Y Y Y
3rd Applicant		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	than 1 year)	D D M M Y Y Y Y
Guardian		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		D D M M Y Y Y Y

PEP DETAILS***		1st Applicant	2 nd Applicant	3 rd Applicant	Guardian
Are you a Politically Exposed Person (PEP)^**		Yes <input type="radio"/> No <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>
Are you related to a Politically Exposed Person (PEP)^**		Yes <input type="radio"/> No <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>

11. INVESTMENT & PAYMENT DETAILS (Separate Application Form is required for investment in each Plan/Option. Multiple cheques not permitted with single application form (Refer instruction no. 19-25)

Scheme/Plan		Option	
<input checked="" type="checkbox"/> Nippon India Nifty Smallcap 250 Index Fund- Regular Plan		<input type="checkbox"/> Growth ^^	<input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Reinvestment

Mode of Payment ☐ Cheque ☐ DD ☐ Funds Transfer ☐ RTGS / NEFT

Investment Amount (₹)	DD Charges (if applicable) (₹)	Net Amount~ (₹)	Instrument No/UTR No.	Date	Drawn on Bank	Bank Branch	City
I	II	I minus II		D D M M Y Y Y Y			

^^ Default option if not selected. ~Units will be allotted for the net amount minus the transaction charges if applicable.

12. NOMINATION - I wish to Nominate ☐ Yes ☐ No (Mandatory if mode of holding is single) (Refer Instruction No. 26) In case of existing investor, nomination details mentioned in the below table will replace the existing details registered in the folio. Signature of applicants is mandatory if you do not wish to nominate.

Nominee Name & Address	PAN of Nominee (Optional)	Date of Birth of Nominee	Nominee Relation With Investor	Guardian Name (in case Nominee is Minor)	Guardian Relation with Nominee	Allocation (%)	Sign of Nominee	Sign of Guardian	Signature of Applicants
									1st Applicant
									2nd Applicant
									3rd Applicant

13. POWER OF ATTORNEY (POA) HOLDER DETAILS (Refer Instruction No. 9)

First Applicant POA Name	Mr./Ms./M/s	PAN^							
Second Applicant POA Name	Mr./Ms./M/s								
Third Applicant POA Name	Mr./Ms./M/s								

14. I WISH TO OPT FOR SIP ☐ Yes ☐ No (The first SIP Debit directly from your bank account should be on or after 09th November, 2020)

Note : It is mandatory to submit SIP Enrolment Cum Auto Debit / One Time Bank Mandate Form incase you have opted for SIP.

15. DECLARATION AND SIGNATURE

I/We would like to invest in above mentioned scheme subject to terms of the Statement of Additional Information (SAI), Scheme Information Document (SID), Key Information Memorandum (KIM) and subsequent amendments thereto. I/We have read, understood (before filling application form) and is/are bound by the details of the SAI, SID & KIM including details relating to various services including but not limited to Nippon India Any Time Money Card. I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act / Regulations / Rules / Notifications / Directions or any other Applicable Laws enacted by the Government of India or any Statutory Authority. I accept and agree to be bound by the said Terms and Conditions including those excluding/ limiting the Nippon Life India Asset Management Limited (NAM India) liability. I understand that the NAM India may, at its absolute discretion, discontinue any of the services completely or partially without any prior notice to me. I agree NAM India can debit from my folio for the service charges as applicable from time to time. 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 Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I hereby declare that the above information is given by the undersigned and particulars given by me/us are correct and complete. Further, I agree that the transaction charge (if applicable) shall be deducted from the subscription amount and the said charges shall be paid to the distributors.

☐ I confirm that I am resident of India. ☐ I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the 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. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my/ our NRE/FCNR Account. ☐ I hereby declare that the information provided in the Form is in accordance with section 285BA of the Income Tax Act, 1961 read with Rules 114F to 114H of the Income Tax Rules, 1962 and the information provided by me /us in the Form, its supporting Annexures as well as in the documentary evidence provided by me/us are, to the best of our knowledge and belief, true, correct and complete.

++ I/We, have invested in the Scheme(s) of your Mutual Fund under Direct Plan. I/We hereby give you my/our consent to share/provide the transactions data feed/ portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all Schemes Managed by you, to the above mentioned Mutual Fund Distributor / SEBI-Registered Investment Adviser. I hereby authorize the representatives of Nippon Life India Asset Management Limited and its Associates to contact me through any mode of communication. This will override registry on DND/ DNDC, as the case may be.

SIGN HERE			First / Sole Applicant / Guardian / Authorised Signatory			Second Applicant / Authorised Signatory			Third Applicant / Authorised Signatory		
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Add convenience to your life with our value added service

Simply send \*\*SMS to 966 400 1111 to avail below facilities

Types of Facilities	Single Folio	Multiple Folio
NAV	SMS mynav	SMS mynav <space> last 6 digits of folio
Balance	SMS Balance	SMS balance <space> last 6 digits of folio
Last 3 Transaction	SMS Transaction	SMS txn <space> last 6 digits of folio
Statement thru mail	SMS ESOA	SMS ESOA <space> last 6 digits of folio

\*\*SMS charges apply

Investor Service. A NIMF Virtual Branch Experience.

For more details : Visit : [www.nipponindiamf.com](http://www.nipponindiamf.com)

You can also follow us on   

DISTRIBUTOR / BROKER INFORMATION

Name & Broker Code / ARN	Sub Agent ARN Code	Sub Agent Code	*Employee Unique Identification Number	RIA Code**
ARN - 48012 (here)	ARN-		E053085	

\*Please sign alongside in case the EUIN is left blank/not provided. 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.

SIGN HERE	First / Sole Applicant / Guardian / Authorised Signatory	Second Applicant / Authorised Signatory	Third Applicant / Authorised Signatory
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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.

APPLICANT DETAILS	FOLIO NO.
Name of Sole/1st holder Mr./Ms./M/s	PAN No / PEKRN. M A N D A T O R Y KYC
Name of 2nd holder Mr./Ms.	PAN No / PEKRN. M A N D A T O R Y KYC
Name of 3rd holder Mr./Ms.	PAN No / PEKRN. M A N D A T O R Y KYC

INITIAL INVESTMENT DETAILS

Cheque/ DD No. Net Amount ₹	Bank Name:	Cheque / DD Date	Branch:	DD Charge ₹	City:
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UNITHOLDING OPTION - ☒ Demat Mode ☐ Physical Mode (Ref. Instruction No. 23) Demat Account details are compulsory if demat mode is opted.

National Securities Depository Limited (NSDL)	Central Depository Securities Limited (CDSL)
DP ID No. Beneficiary Account No. I N	Target ID No.

Enclosures (Please tick any one box) : ☐ Client Master List (CML) ☐ Transaction cum Holding Statement ☐ Cancelled Delivery Instruction Slip (DIS)

SIP DETAILS (Please refer respective SID/KIM for product labeling. The first SIP Debit directly from your bank account should be on or after 09th November, 2020)

Scheme Name & Plan	Scheme Option	Frequency (Please (·) any one)	Enrollment Period (Please (·) any one)	SIP Date (Please (·) any one)	SIP Amount
<input checked="" type="checkbox"/> Nippon India Nifty Smallcap 250 Index Fund - Regular Plan	<input type="checkbox"/> Growth** <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Reinvestment ** Default option if not selected.	<input type="checkbox"/> Monthly (Default) <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly	From To	(Any date from 1 <sup>st</sup> to 28 <sup>th</sup> of a given month)	₹ (in figures)

\$ Incase the SIP 'End Date' is incorrect/ not legible/ not mentioned by the investor, then default end date shall be considered as December 2099.

**DECLARATION:** I/We Would like to invest in above mentioned scheme subject to terms of the statement of Additional Information (SAI), Scheme Information Document (SID), Key Information Memorandum (KIM) and subsequent amendments thereto. I/We have read, understood (Before filling application form) and is/are bound by the details of the SAI, SID & KIM including details relating to various services. By filling up this form I understand that the amount towards my lumpsum / systematic investment plan (SIP) transaction will be debited from bank account details provided in my One Time Bank Mandate Form. I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act / Regulations / Rules / Notifications / Directions or any other Applicable Laws enacted by the Government of India or any Statutory Authority. I accept and agree to be bound by the said Terms and Conditions including those excluding/ limiting the Nippon Life India Asset Management Limited (NAM India) liability. I understand that the NAM India may, at its absolute discretion, discontinue any of the services completely or partially without any prior notice to me. I agree NAM India can debit from my folio for the service charges as applicable from time to time. 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 Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I hereby declare that the above information is given by the undersigned and particulars given by me/us are correct and complete. Further, I agree that the transaction charge (if applicable) shall be deducted from the subscription amount and the said charges shall be paid to the distributors.

☐ I confirm that I am resident of India. ☐ I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the 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. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my/ our NRE/FCNR Account.

++ I/We, have invested in the Scheme(s) of your Mutual Fund under Direct Plan. I/We hereby give you my/our consent to share/provide the transactions data feed/ portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all Schemes Managed by you, to the above mentioned Mutual Fund Distributor / SEBI-Registered Investment Adviser.

I hereby authorize the representatives of Nippon Life India Asset Management Limited and its Associates to contact me through any mode of communication. This will override registry on DND /DNDC, as the case may be.

SIGNATURE

By signing this SIP enrolment form I/We understand that the amount will be debited from the Bank account mentioned in One Time Bank Mandate / Invest Easy - Individuals Mandate Form.

SIGN HERE	First / Sole Applicant / Guardian / Authorised Signatory	Second Applicant / Authorised Signatory	Third Applicant / Authorised Signatory
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Investors are requested to note that the amount mentioned in One Time Bank Mandate should be the maximum amount that you would like to invest in schemes of NIMF on any transaction day.

UMRN

(For Office Use Only)

Sponsor Bank Code

(For Office Use Only)

Utility Code

(For Office Use Only)

to debit (tick ✓)

SB / CA / CC / SB-NRE / SB-NRO / Other

With Bank

(Name of Destination Bank)

an amount of Rupees

₹

DEBIT TYPE

☒ Fixed Amount ☒ Maximum Amount

FREQUENCY:

☒ Monthly ☒ Quarterly ☒ Half Yearly ☒ Yearly ☒ as & when presented

Reference 1

Reference 2

Date:

DD MM YY YY

☒ Create

☒ Modify

☒ Cancel

I/We hereby authorize

Nippon India Mutual Fund

Bank a/c number

(Destination Bank Account Number)

IFSC / MICR

1. 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. 2. This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorising the user entity/Corporate to debit my account, based on the instructions as agreed and signed by me. 3. 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.

From:

DD MM YY YY

To:

3 1 1 2 2 0 9 9

Or

☐ Until Cancelled

Phone No:

Signature of Account Holder

Signature of Account Holder

Signature of Account Holder

1

Name as in Bank Record

2

Name as in Bank Record

3

Name as in Bank Record