

Annexure - VI

ANNUAL REPORT ON CORPORATE SOCIAL RESPONSIBILITY (CSR) ACTIVITIES

1. Brief outline on CSR Policy of the Company.

The CSR Policy of the Bank aims to identify and support all projects/programs/subjects undertaken as part of the Bank's Corporate Social Responsibilities/commitments within the framework of the Companies Act, 2013, as amended and the Schedule VII of the said Act, as amended read with the Companies (Corporate Social Responsibility Policy) Rules, 2014, as amended, from time to time.

The Policy serves as a guiding principle/document to help identify, execute and monitor CSR projects/activities as well as formulation of the annual action plan in pursuance and in keeping with the spirit of the Policy.

The annual action plan for CSR activities of the Bank includes the list of CSR projects or programmes that are approved to be undertaken in areas or subjects specified in Schedule VII of the Act, the manner of execution of such projects or programmes, the modalities of utilisation of funds and implementation schedules for the projects or programmes, monitoring and reporting mechanism for the projects or programmes, etc.

The Bank's Annual Action Plan has been primarily focused on healthcare, education, gender equality, and environmental sustainability, and the financial year 2025-26 was no exception. During the said financial year, the Bank utilised the major portion of CSR budget towards activities aligned with these focus areas, strictly in accordance with the approved Annual Action Plan and the CSR Policy of the Bank. In addition to the four core areas, as part of the plan, the Bank also extended its CSR initiatives to other permitted areas, inter alia, eradicating hunger, poverty, and malnutrition; training to promote rural sports and nationally recognised sports; ecological balance; maintaining air quality; and promoting women empowerment. While identifying and implementing CSR projects, the Bank ensures that the benefits of these programmes reach the maximum number of deserving beneficiaries, without any discrimination on the basis of caste, creed or religion.

During the financial year 2025-26, the Bank has performed its CSR activities through own initiatives and also by partnering with various like-minded eligible charitable organisations. The Bank has also encouraged its business units or functions to seek out opportunities for performing CSR activities.

The Bank as part of CSR Policy, is committed to continue its focus towards sustainable development and responsible banking with a clear understanding that bank has a key role of job and wealth creation in the society. CSR is generally understood to be the way an organisation achieves a balance between economic, environmental and social imperatives while addressing the expectations of shareholders and stakeholders.

2. Composition of CSR Committee:

Constitution of the Corporate Social Responsibility Committee (CSR Committee) in the Bank is in line with Section 135 of the Companies Act, 2013 and rules made thereunder. The CSR Committee is empowered to monitor the CSR activities as per the CSR policy and annual action plan and the CSR Committee is responsible for overall governance of CSR activities in the Bank as per the policy.

The composition of the CSR Committee during the financial year 2025-26 was as follows:

Sl No	Name of Director	Designation / Nature of Directorship	Number of meetings of CSR Committee held during the year	Number of meetings of CSR Committee attended during the year
1.	Ms. Renu Kohli, Independent Director	Chairperson	3	3
2.	Mr. Pralay Mondal, Managing Director & CEO	Member	3	3
3.	Mr. Sumit Maheshwari, Non-Executive Director	Member	3	3
4.	Mr. Sudhin Choksey, Independent Director	Member	3	3
5.	Ms. Sharmila Abhay Karve, Independent Director	Member	3	3

*There was no change in the composition of the CSR Committee during the financial year 2025-26.

Annexure - VI (Contd.)

3. Provide the web-link(s) where Composition of CSR committee, CSR Policy and CSR projects approved by the board are disclosed on the website of the company.

Composition of CSR Committee	https://www.csb.bank.in/pdf/List-of-Sub-Committees-of-the-Board-w.e.f.06.11.2025.pdf
CSR Policy	https://www.csb.bank.in/sites/default/files/annexure-III_3_csr_policy.pdf
CSR projects approved by the Board	https://www.csb.bank.in/pdf/csr_projects_fy_2025-26.pdf

4. Provide the executive summary along with web-link(s) of Impact Assessment of CSR Projects carried out in pursuance of sub-rule (3) of rule 8, if applicable.

During the financial year 2025-26, the Bank conducted impact assessments, through independent external agency, in respect of two CSR projects implemented during FY 2022-23, the details of which are as follows:

Sl.No.	Name of the Project	Implementing Agency	Address
1	Project Dialysis	Fairfax India Charitable Foundation	324, Dr. D.N. Road, Fort, Mumbai, Maharashtra 400001.
2	Maha-Arogya Shibir	RK HIV AIDS Research & Care Centre	7A/G5, Juhu Sangita Apartments, Juhu Tara Road, Mumbai, Maharashtra 400049.

The executive summaries of the impact assessments of the aforesaid projects are set out in Annexure I to the Annual Report on CSR Activities.

Impact assessment reports on the above projects are available at https://www.csb.bank.in/pdf/csr_impact_assessment_fy_2025-26.pdf

5. (a) Average net profit of the company as per sub-section (5) of section 135.	₹ 7,64,85,25,725.99
(b) Two percent of average net profit of the company as per sub-section (5) of section 135.	₹ 15,29,70,514.52
(c) Surplus arising out of the CSR Projects or programmes or activities of the previous financial years.	NIL
(d) Amount required to be set-off for the financial year, if any.	NIL
(e) Total CSR obligation for the financial year [(b)+(c)-(d)]	₹ 15,29,70,514.52

6. (a) Amount spent on CSR Projects (both Ongoing Project and other than Ongoing Project).	Ongoing Projects : NIL* Other than ongoing projects : ₹ 5,60,95,200.00
(b) Amount spent in Administrative Overheads.	₹ 11,800.00
(c) Amount spent on Impact Assessment, if applicable.	₹ 13,71,487.00
(d) Total amount spent for the Financial Year [(a)+(b)+(c)].	₹ 5,74,78,487.00

(e) CSR amount spent or unspent for the financial year:

Total Amount Spent for the Financial Year (in ₹)	Amount Unspent (in ₹)				
	Total Amount transferred to Unspent CSR Account as per section 135(6).		Amount transferred to any fund specified under Schedule VII as per second proviso to sub-section (5) of section 135.		
	Amount	Date of transfer	Name of the Fund	Amount	Date of transfer
₹ 5,74,78,487.00	₹ 9,55,21,513.00	April 24, 2026		— Nil —	

Annexure - VI (Contd.)

(f) Excess amount for set off, if any

Sl. No.	Particular	Amount (in ₹)
(1)	(2)	(3)
(i)	Two percent of average net profit of the company as per sub-section (5) of section 135	₹ 15,29,70,514.52
(ii)	Total amount spent for the Financial Year	₹ 5,74,78,487.00*
(iii)	Excess amount spent for the financial year [(ii)-(i)]	Nil
(iv)	Surplus arising out of the CSR projects or programmes or activities of the previous financial years, if any	Nil
(v)	Amount available for set off in succeeding financial years [(iii)-(iv)]	Nil

*excludes an amount of ₹ 9,55,21,513 budgeted for the ongoing project, viz., Project Dialysis, which was transferred to the Unspent CSR Account for the financial year 2025-26 on April 24, 2026, and shall be utilised on or before March 31, 2027, in accordance with the terms of the arrangement.

7. Details of Unspent Corporate Social Responsibility amount for the preceding three financial years:

Sl. No.	Preceding Financial Year(s)	Amount transferred to Unspent CSR Account under section 135 (6) (in ₹)	Balance Amount in Unspent CSR Account under Section 135(6) (in ₹).	Amount Spent in The Financial Year (in Rs)	Amount transferred to a fund as specified under Schedule VII as per second proviso to section 135(5), if any.		Amount remaining to be spent in succeeding financial years. (in ₹)	Deficiency, if any
					Amount (in ₹)	Date of transfer		
1.	FY 2024-25	₹ 7,78,93,000.00 [#]	₹ 7,78,93,000.00	₹ 7,78,93,000.00	Nil	NA	Nil	Nil
2.	FY 2023-24	₹ 3,79,04,186.00 [@]	Nil	NA	NA	NA	NA	NA
3.	FY 2022-23	Nil						

[#] Spent during the FY 2025-26

[@] Spent during the FY 2024-25

8. Whether any capital assets have been created or acquired through Corporate Social Responsibility amount spent in the Financial Year:

☐ Yes ☒ No

If Yes, enter the number of Capital assets created/ acquired

Furnish the details relating to such asset(s) so created or acquired through Corporate Social Responsibility amount spent in the Financial Year:

Sl. No.	Short Particulars of the property or asset(s) [including complete address and location of the property]	Pincode of the property or asset(s)	Date of creation	Amount of CSR amount spent	Details of entity/ Authority/ beneficiary of the registered owner		
(1)	(2)	(3)	(4)	(5)	(6)		
					CSR Registration Number, if applicable	Name	Registered Address

-----Not Applicable-----

(All the fields should be captured as appearing in the revenue record, flat no, house no, Municipal Office/Municipal Corporation/ Gram Panchayat are to be specified and also the area of the immovable property as well as boundaries)

Annexure - VI (Contd.)

9. Specify the reason(s), if the company has failed to spend two percent of the average net profit as per section 135(5).

The Bank has spent two percent of the average net profit as per section 135 (5) of the Companies Act, 2013.

Sd/-

Pralay Mondal

Managing Director & CEO
(DIN: 00117994)

Sd/-

Renu Kohli

Chairperson – CSR Committee
(DIN: 07981627)

Sd/-

Biswamohan Mahapatra

Chairperson
(DIN: 06990345)

Place: Thrissur

Date: June 25, 2026

ANNEXURE 1: SUMMARY OF IMPACT ASSESSMENT STUDIES CONDUCTED DURING FY 2026 THROUGH EXTERNAL AGENCIES

1. Impact Assessment of 'Project Dialysis' – CSB Bank partnered with Fairfax India Charitable Foundation, Mumbai, Amount Spent: ₹ 1.82 crore

CSB Bank Limited, in partnership with Fairfax India Charitable Foundation, implemented Project Dialysis, a CSR healthcare intervention aimed at enhancing access to affordable and quality dialysis services for renal patients across underserved regions in India. With a total contribution of ₹ 1.82 crore, the project was designed to address critical gaps in dialysis infrastructure and affordability, particularly in areas where such services are limited or non-existent.

The initiative focuses on mitigating the high cost of dialysis treatment, which averages approximately ₹ 2.4 lakh per annum and increases significantly in remote regions due to additional expenses such as transportation, loss of wages, and caregiver support. By facilitating access to free and subsidized dialysis services closer to patients' homes, the project has contributed to reducing the financial burden on patients while addressing the demand-supply imbalance in dialysis availability.

In terms of service delivery, the project supports the establishment and operation of dialysis centres mainly at district-level hospitals, thereby strengthening healthcare infrastructure in rural and semi-urban areas. It also fosters public-private partnerships and generates employment opportunities for local doctors, technicians, and paramedical staff, contributing to capacity building in the healthcare ecosystem.

The intervention demonstrated strong inclusivity by extending services to economically weaker sections, including BPL patients as well as individuals affected by HIV, HCV, and HBV with kidney failure. By bringing essential healthcare services closer to underserved populations, the project has improved accessibility and continuity of life-saving treatment.

A key outcome of the intervention has been the delivery of 1,36,418 free dialysis sessions across ten states, supported through 34 dialysis centres, thereby positively impacting 348 patients.

Key findings of the assessment were:

- The implementation of Project Dialysis significantly enhanced access to affordable and quality dialysis services, particularly in underserved and remote regions where dialysis infrastructure was limited or unavailable. The project contributed to indirect socio-economic benefits, including savings in transportation costs, reduced wage losses, and improved productivity of patients and caregivers.
- The establishment and support of 34 dialysis centres strengthened district-level healthcare infrastructure and enabled patients to access treatment closer to their homes, reducing dependency on urban facilities.
- The intervention effectively mitigated the high cost of dialysis treatment (approximately ₹ 2.4 lakh per annum), thereby reducing the financial burden on patients and minimizing out-of-pocket expenditure for economically weaker sections.
- The initiative addressed the demand-supply gap in dialysis services, improving availability of treatment slots and reducing waiting time for patients requiring urgent care.
- The intervention fostered public-private partnership and local capacity building, generating employment opportunities for doctors, technicians, and paramedical staff while strengthening healthcare delivery systems.

Annexure - VI (Contd.)

- the project delivered substantial social value by improving access to life-saving dialysis services and strengthening rural healthcare ecosystems, with strong potential for scalability and sustained impact.
- A significant proportion of dialysis machines funded under the project are currently operating beyond the original Annual Maintenance Contract (AMC) period, which may lead to maintenance challenges and potential service disruptions. It is recommended that the implementing agency leverage its scale to engage with OEMs for rationalised pricing for maintenance and service support, while also developing a long-term strategy for timely replacement of ageing machines to prevent erosion of capacity and ensure continuity of services.
- Bundling critical components like RO plants and Dialyzer Reprocessing Machines along with dialysis units presents an opportunity to improve service quality, reduce operational costs, and ensure more reliable and sustainable dialysis delivery.
- The estimated Social Return on Investment (SROI) from the intervention 8.06, indicating that the project generates multiple-fold social and economic value for every rupee invested, driven by cost savings, improved health outcomes, and productivity gains.

2. **Impact Assessment of Project 'Maha Arogya Shibir' – a Mega Health Camp conducted by RK HIV & AIDS Research and Care Centre -Amount Spent: ₹ 2.5 crore**

CSB Bank Limited, in partnership with RK HIV & AIDS Research & Care Centre (RKHIVRC), conducted 'Maha Arogya Shibir', a large-scale CSR health intervention aimed at enhancing access to preventive and curative healthcare services for underserved populations in Mumbai. The project, with an overall outlay of ₹ 2.5 crore, was designed to address critical gaps in healthcare accessibility and affordability, particularly among lower- and middle-income groups who often face barriers to timely medical care. The camp successfully conducted on different dates, reached/benefited over 1,00,000 beneficiaries. The programme adopted an integrated service delivery model, combining consultations, diagnostics, free medicines, health awareness, and referral support.

In terms of service delivery, the project mobilised over 500 doctors, supported by nurses, paramedical staff, and volunteers. A structured and systematic process—from registration and primary screening to specialist consultation, diagnostics, and referral—enabled efficient and large-scale service delivery. The inclusion of multiple systems of medicine, along with preventive healthcare interventions, enhanced the relevance, acceptability, and comprehensiveness of services offered.

The intervention demonstrated strong outreach and community engagement through multi-channel mobilisation strategies involving NGOs, educational institutions, trade unions, and local community networks. This approach ensured effective penetration among vulnerable and underserved sections, including women, children, persons with disabilities, and individuals engaged in the informal sector. Balanced gender participation and a high uptake of diagnostic and screening services indicate enhanced accessibility and community trust in the initiative.

A key outcome of the intervention was its contribution to early detection and improved health outcomes. Large-scale screening facilitated the identification of serious health conditions, including cancer, chronic diseases, and visual impairments. Evidence suggests that early diagnosis and timely referral led to life-saving interventions and significant improvements in quality of life. Additionally, awareness programmes conducted during the camp contributed to behavioural change, particularly in the area of substance abuse, with approximately 10-15% of identified users opting for de-addiction support.

Key findings of the assessment were:

- The organisation of the Maha Arogya Shibir Health Camp significantly enhanced access to comprehensive and free healthcare services, enabling timely diagnosis and treatment for a large number of beneficiaries from underserved communities.
- The camp facilitated screening, consultation, and treatment of a substantial number of patients across multiple specialties, leading to early identification of chronic and acute health conditions and improving overall health outcomes.
- The provision of diagnostic services and free medicines enabled immediate medical intervention for beneficiaries, reducing dependency on delayed or unaffordable healthcare alternatives.
- The initiative strengthened preventive healthcare awareness, with beneficiaries receiving guidance on disease prevention, hygiene, and lifestyle modifications, thereby promoting long-term community health improvement.
- The availability of trained medical professionals and coordinated volunteer support ensured efficient service delivery and effective patient management, resulting in high levels of beneficiary satisfaction.

Annexure - VI (Contd.)

- The camp operations contributed to streamlined patient handling and reduced burden on local healthcare facilities, particularly in managing general ailments and preliminary screenings.
- Certain operational challenges were observed, including high patient inflow leading to waiting times and the need for enhanced crowd management mechanisms during peak periods.
- The absence of a structured post-camp follow-up system limited continuity of care for patients requiring long-term treatment or specialized medical attention.
- Data collection and documentation processes were functional; however, improvements are required in digital record-keeping and impact tracking systems to strengthen monitoring and evaluation.
- The assessment highlights the need to strengthen continuity of care through structured follow-up systems, improved referral mechanisms, and expanded mobile healthcare outreach, to ensure sustained patient outcomes beyond initial intervention.
- The assessment underscores the need to increase the frequency of camps and strengthen stakeholder partnerships, enabling continuity of care, improved trust among beneficiaries, and better alignment with public healthcare systems for sustained impact.
- There exists a significant opportunity to institutionalise impact measurement, enhance inclusivity, scale preventive health interventions, and deepen partnerships with public health systems, thereby improving accessibility, equity, and long-term effectiveness of the programme.
- The assessment noted the absence of a clearly defined Theory of Change (ToC) and structured results framework, which limited systematic impact evaluation and measurement of long-term project outcomes.
- Overall, the intervention delivered significant social value by bridging healthcare accessibility gaps, and the estimated impact indicates substantial long-term benefits, with strong potential for enhanced outcomes through sustained engagement and follow-up initiatives.

