



B-Fly India Opportunities Fund

APPLICATION FORM (NON-INDIVIDUAL)

(An Open Ended Scheme of B-Fly India Alternative Investment Trust,
a trust organised in India & registered with Securities and Exchange
Board of India (SEBI) as Category III Alternative Investment Fund)



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APPLICATION FORM

Please read the instructions before filling the Application Form

Distributor Code:

RM Name:

RM Mobile No:

1. CONTRIBUTOR'S DETAILS (Please fill in BLOCK LETTERS with black/blue ink)

NAME OF CONTRIBUTOR

NAME

Date of Incorporation

PAN

KIN NO.

a. Nature of Business (✓)

Private Sector Public Sector Government Professional

Others Specify

b. Gross Annual Income (₹) [Please check (✓)] Below 1 lac 1 - 5 Lacs 5 - 10 Lacs 10 - 25 Lacs >25 - 1 Crore >1 Crore OR

Networth (Mandatory for Non - Individuals) as on (Not older than 1 year)

c. 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

d. Non-individual Investors Involved/providing any of the mentioned services

Foreign Exchange/Money Changer Services Gaming/Gambling/Lottery/Casino Services Money Lending/Pawning None of the above

ADDRESS OF CONTRIBUTOR [As registered with KYC]

City State Country Pin Code

OVERSEAS ADDRESS (in case the Contributor is NRI/PIO) [P.O. Box Address is not sufficient] {Refer instructions}

City State Country Zip Code

CONTACT DETAILS OF CONTRIBUTOR (Please ensure that you fill in the contact details for us to serve you better)

Name Phone(C)

Phone(R) Mobile I/We wish to receive updates via SMS on my mobile

Fax E-Mail

2. CONTRIBUTOR'S DETAILS

Commitment Amount (In Figures) (In Words)

Initial cheque Amount Mode of Payment (Please ✓) Cheque RTGS NEFT Account Type (Please ✓) Savings Current Others Specify

Dated

Payment from Bank A/c. No. Drawn on Bank

Branch & City

APPLICATION FORM

3. BANK ACCOUNT DETAILS

Bank Name (Please provide cancelled blank cheque of the mentioned account)
[Do not abbreviate]

Account No Branch/City

Branch Address

Pin Code Account Type(Please ✓) Savings Current Others Specify MICR IFSC/NEFT Code

Please verify and ensure that the accuracy of the bank details provided above. The fund shall not be held responsible for delays or errors in processing your request if the information provided is incomplete or inaccurate, cheque should be in favour of "B-Fly India Opportunities Fund"

4. DOCUMENTS ENCLOSED (Please tick)

MOA & AOA Trust Deed Bye Laws Partnership Deed Resolution/Authorisation to invest List of Authorised signatories with Specimen Signature(S)
 PAN KRA Cancelled Cheque CKYC Forms

5. DECLARATION AND SIGNATURES

Having read and understood the contents of the Private Placement Memorandum of the Scheme; I/We hereby apply for the units of the scheme and agree to abide by the terms, conditions, rules and regulation governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulation, Notifications or Directions of the provision 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 & 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, legally belong to me/us. In the event "Know Your Customer" process is not completed by me/us to the satisfaction of the Investment Manager, I/We hereby authorize the Investment Manager, to redeem the funds invested in the Scheme, in Favour of the applicant, at the applicable NAV prevailing on the date of such redemption and undertake such other actonwith such funds that may be required by the law.

For NRIs only: I/We confirm that I am/we are Non-Residents of Indian Nationally/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/We declare that the information is to the best of my knowledge, belief, accurate and complete. I agree to notify Investment Manager immediately in the event of information changes FATCA/CRS Certification.

Declaration for Non-Individual: I/We hereby confirm that the information provided herein above is true, correct and complete to the best of my knowledge and belief and that I/We shall be solely liable and responsible for the information submitted above also confirm that have read and understood the FATCA & CRS Terms & Conditions below and hereby accept the same. I also undertake to keep the Investment Manager 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.

SIGNATURE	<div style="border: 1px solid black; border-radius: 50%; width: 30px; height: 30px; margin: 0 auto; display: flex; align-items: center; justify-content: center;">1</div> <p>Authorized Signatory(ies) [with Company/Trust/Firm/Body Corporate seal]</p>
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ACKNOWLEDGEMENT SLIP (To be filled by the Applicant)

B-Fly India Opportunities Fund
(Open ended category - III AIF)

Application No.

Received From

Cheque/RTGS/NEFT No. Dated :

Drawn on Bank & Branch

Amount Rs.

Please Note: All purchases are subject to realisation of payment instrument. This acknowledgement slip is for your reference only. Information on the form will be considered final.

KEY TERMS OF OFFER

Name of Fund	Name of Investment Manager	Name of trustee company
B-FLY INDIA OPPORTUNITIES FUND	B-FLY ASSET MANAGER LLP	IDBI TRUSTEESHIP SERVICES LIMITED
Name of the Sponsor	Name of the Registrar	
B. N. RATHI SECURITIES LIMITED	KFIN TECHNOLOGIES LIMITED	

Investment Objective : The objective and purpose of the Fund is to carry on activities of a category III AIF and for this purpose to arrange, make, manage and dispose of investments with the view to providing returns / long term capital appreciation to the Contributors in accordance with the Applicable Laws and to have optimal diversification across market capitalization with the opportunity to be overweight in large cap, mid cap or small cap stocks predominantly India-domiciled issuers at any point of time to potentially generate higher alpha.

Term: The Fund is an Open Ended Scheme

Minimum Commitment: 1 Crore

Hurdle Rate: 10%

Benchmark: S&P BSE500

Distribution Waterfall:

1. Distribution Proceeds to Class A Unitholders:

The distribution proceeds apportioned amongst the Class A Unitholders will be further allocated to each Class A Unitholder in proportion to their invested amount and will be distributed in the following manner:

- i. **Return of Capital Contributions:** First, 100% (Hundred percent) to such Class A Contributor, until such Class A Contributor has received (after taking into account all distributions made to such Contributor) an amount equal to 100% (Hundred percent) of its respective aggregate Capital Contribution;
- ii. **Preferred Rate of Return:** Second, to such Class A Contributor, until such Class A Contributor has received (after taking into account all distributions made to such Contributor) an amount equal to the Preferred Rate of Return, as applicable to Class A Unitholders on the amounts referred to in clause 1 (i) above;
- iii. **Performance Allocation:** Thereafter, Class A allocation amount shall be distributed as follows:
 - a. 20% (Twenty percent) (plus applicable Taxes, if any) to the Investment Management Entity, and
 - b. 80% (Eighty percent) to such Class A Unitholder.

2. Distribution Proceeds to Class B Unitholders:

The distribution proceeds apportioned amongst the Investment Management Entity will be further allocated to each Class B Unitholder in proportion to their invested amount and will be distributed in the following manner:

- i. **Return of Capital Contributions:** First, 100% (Hundred percent) to such Class B Contributor, until such Class B Contributor has received (after taking into account all distributions made to such Contributor) an amount equal to 100% (Hundred percent) of its respective aggregate Capital Contribution;
- ii. **Preferred Rate of Return:** Second, to such Class B Contributor, until such Class B Contributor has received (after taking into account all distributions made to such Contributor) an amount equal to the Preferred Rate of Return, as applicable to Class B Unitholders on the amounts referred to in clause 3 (ii) above;
- iii. **Performance Allocation:** Thereafter, Class B allocation amount shall be distributed as follows:
 - a. 20% (Twenty percent) (plus applicable Taxes, if any) to the Investment Management Entity, and
 - b. 80% (Eighty percent) to such Class B Unitholder.

Nature of Fees	Charges (%)
Administrative Fees*	0.45%
Set-up Fees*	0.90%
Management Fees	1.45%
ExitLoad	1 st year of investment: 3% of redeemed value 2 nd year of investment: 2% of redeemed value 3 rd year of investment: 1% of redeemed value >3 years of investment: NIL

*As per actuals

KEY TERMS OF OFFER

Name of Fund	Name of Investment Manager	Name of trustee company
B-FLY INDIA OPPORTUNITIES FUND	B-FLY ASSET MANAGER LLP	IDBI TRUSTEESHIP SERVICES LIMITED
Name of the Sponsor		Name of the Registrar
B. N. RATHI SECURITIES LIMITED		KFIN TECHNOLOGIES LIMITED

Investment Objective : The objective and purpose of the Fund is to carry on activities of a category III AIF and for this purpose to arrange, make, manage and dispose of investments with the view to providing returns / long term capital appreciation to the Contributors in accordance with the Applicable Laws and to have optimal diversification across market capitalization with the opportunity to be overweight in large cap, mid cap or small cap stocks predominantly India-domiciled issuers at any point of time to potentially generate higher alpha.

Term: The Fund is an Open Ended Scheme

Minimum Commitment: 1 Crore

Hurdle Rate: 10%

Benchmark: S&P BSE500

Distribution Waterfall:

3. Distribution to Class C Unitholders

The Distribution Proceeds attributable to the Class C Unitholders, which is equal to the 'continuing interest' to the extent required by the Regulations, shall be retained by the Fund and maintained in a separate account and distributed to the holders of Class C Units in proportion to the Class C Units held by it, at redemption or at such other time as may be prescribed by the Regulations or as may be clarified by SEBI from time to time. It is clarified that any income or returns from the 'continuing interest' shall accrue to the account of the Sponsor as and when they accrue to the Fund. Any amount higher than the 'continuing interest' shall be distributed to the Sponsor.

i Return of Capital Contributions:

First, 100% (Hundred percent) to such Class C Contributor, until such Class C Contributor has received (after taking into account all distributions made to such Contributor) an amount equal to 100% (Hundred percent) of its respective aggregate Capital Contribution;

ii Preferred Rate of Return:

Second, to such Class C Contributor, until such Class C Contributor has received (after taking into account all distributions made to such Contributor) an amount equal to the Preferred Rate of Return, as applicable to Class C Unitholders on the amounts referred to in clause 3 (i) above;

iii Performance Fee:

Thereafter, Class C allocation amount shall be distributed as follows:

- (a) 1% (One percent) (Inclusive of all applicable Taxes, if any) to the Investment Management Entity, and
- (b) 99% (Ninety-Nine percent) to such Class C Unitholder.

Nature of Fees	Charges (%)
Administrative Fees*	0.45%
Set-up Fees*	0.90%
Management Fees	1.45%
ExitLoad	1 st year of investment: 3% of redeemed value 2 nd year of investment: 2% of redeemed value 3 rd year of investment: 1% of redeemed value >3 years of investment: NIL

*As per actuals

3

(Signature of First Contributor)

(Signature of Joint Contributor)

KEY TERMS OF OFFER

Name of Fund	Name of Investment Manager	Name of trustee company
B-FLY INDIA OPPORTUNITIES FUND	B-FLY ASSET MANAGER LLP	IDBI TRUSTEESHIP SERVICES LIMITED
Name of the Sponsor	Name of the Registrar	
B. N. RATHI SECURITIES LIMITED	KFIN TECHNOLOGIES LIMITED	

Investment Objective : The objective and purpose of the Fund is to carry on activities of a category III AIF and for this purpose to arrange, make, manage and dispose of investments with the view to providing returns / long term capital appreciation to the Contributors in accordance with the Applicable Laws and to have optimal diversification across market capitalization with the opportunity to be overweight in large cap, mid cap or small cap stocks predominantly India-domiciled issuers at any point of time to potentially generate higher alpha.

Term: The Fund is an Open Ended Scheme

Minimum Commitment: 25 Lacs

Hurdle Rate: 10%

Benchmark: S&P BSE500

Distribution Waterfall:

4. Distribution to Class D Unitholders (Directors/Partners and its employees)

The distribution proceeds apportioned amongst the Class D Unitholders will be further allocated to each Class D Unitholder in proportion to their invested amount and will be distributed in the following manner.

(i) Return of Capital Contributions:

First, 100% (Hundred percent) to such Class D Contributor, until such Class D Contributor has received (after taking into account all distributions made to such Contributor) an amount equal to 100% (Hundred percent) of its respective aggregate Capital Contribution;

(ii) Preferred Rate of Return:

Second, to such Class D Contributor, until such Class D Contributor has received (after taking into account all distributions made to such Contributor) an amount equal to the Preferred Rate of Return, as applicable to Class D Unitholders on the amounts referred to in clause 4(i) above;

(iii) Performance Fee:

Thereafter, Class D allocation amount shall be distributed as follows:

- 1% (One percent) (Inclusive of all applicable Taxes, if any) to the Investment Mangement Entity, and
- 99% (Ninety Ninepercent) to such Class D Unitholders

Nature of Fees	Charges (%)
Administrative Fees*	0.45%
Set-up Fees*	0.90%
Management Fees	1.45%
ExitLoad	1 st year of investment: 3% of redeemed value 2 nd year of investment: 2% of redeemed value 3 rd year of investment: 1% of redeemed value >3 years of investment: NIL

*As per actuals

SELF DECLARATION

To,
B-FLY INDIA Opportunities Fund
6-3-652, 4th Floor, Kautilya, Amrutha Estates, Somajiguda,
Hyderabad - 500082

Dear Sir/Madam,

Sub: Investment in B-FLY INDIA OPPORTUNITIES FUND, a scheme of B-FLY India Alternative Investment Trust

I/We _____ (Name of the contributor)

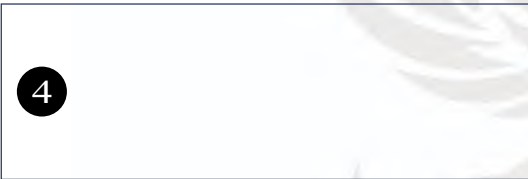
do hereby confirm that I/ We have read and understood all the terms and conditions of the Contribution Agreement (“Agreement”) and Private Placement Memorandum (“PPM”). All the terms and conditions of the Agreement and the PPM have been explained to me/us at length including following points and have been understood by me/us. The following points are without prejudice to the terms of the Agreement and the PPM. A copy of the Agreement and the PPM were provided to me/us for our perusal.

The Capital Commitment of the Contributors shall be drawn down on “as needed” basis

Type of Investment - The Fund is a Open ended fund.

Yours faithfully,

Authorized Signatory(ies) [with Company/Trust/Firm/Body Corporate seal]



Name : _____

Date : _____

Place: _____



FORM OF DECLARATION

Date:

To,

IDBI Trusteeship Services Limited

Universal Insurance Building,

Ground Floor, Sir P.M. Road,

Fort, Mumbai - 400001

DECLARATION

In connection to your request, I/we, the undersigned confirm the following to you:

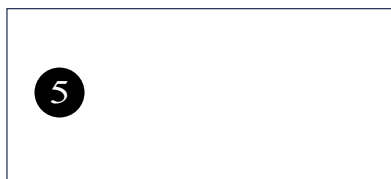
1. I/We shall include the income earned from time to time through the subscription of Beneficial Interest/units in the return of income file for all the assessment years applicable.
2. My/Our Permanent Account Number is _____ and _____
Copy of the PAN Card attached as proof
3. The tax will be paid in such manner as may be decided by the Trustees in consultation with investment Manager.

For

Name of Contributor

Name of the Authorised Signatory : _____

*In case of a beneficiary is other than an individual, please provide full name of Beneficiary and name of authorized signatory



Authorized Signatory(ies) [with Company/Trust/Firm/Body Corporate seal]



B-FLY INDIA OPPORTUNITIES FUND

FEE STRUCTURE

Nature of Fee*	Charges (%)
Administrative Fee	
Set-up Fee	
Management Fee	
Performance Fee	
Exit Load	1 st year of investment: 3% of redeemed value 2 nd year of investment: 2% of redeemed value 3 rd year of investment: 1% of redeemed value >3 years of investment: NIL

Note: As per the Private Placement Memorandum, all fees/charges are exclusive of taxes. Taxes shall be charged as applicable.

Authorized Signatory(ies) [with Company/Trust/Firm/Body Corporate seal]
6
Date



B-FLY INDIA OPPORTUNITIES FUND

DRAWDOWN SCHEDULE

PARTICULARS	AMOUNT (RS.)	DRAWDOWN (%)	TIMELINE
INITIAL CONTRIBUTION			
TRANCHE 1			
TRANCHE 2			
TRANCHE 3			

PARTICULARS	AMOUNT (RS.)	CONTRIBUTION	TIMELINE
COMMITMENT AMOUNT		100%	

Authorized Signatory(ies) [with Company/Trust/Firm/Body Corporate seal]	
7	
Date	

Know Your Client (KYC)
Application Form (For Non- Individuals Only)

Please fill the form in ENGLISH and in BLOCK letters
 Fields marked * are mandatory
 Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also



CDSL VENTURES LIMITED

....Exploring New Horizons



Application Number: _____

Application Type*: New KYC Modification KYC

1. Entity Details

PAN* _____ Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof) _____

Date of Incorporation* _____ Place of Incorporation* _____

Date of Commencement* _____ Registration Number* _____

Entity Type*
 Please Tick (✓)

<input type="checkbox"/> Private Ltd. Co.	<input type="checkbox"/> Public Ltd. Co.	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Partnership
<input type="checkbox"/> Trust/Charity/NGO	<input type="checkbox"/> HUF	<input type="checkbox"/> FPI Category I	<input type="checkbox"/> FPI Category II
<input type="checkbox"/> AOP	<input type="checkbox"/> Bank	<input type="checkbox"/> Government Body	<input type="checkbox"/> Defence Establishment
<input type="checkbox"/> Body of Individuals		<input type="checkbox"/> Society	<input type="checkbox"/> LLP
<input type="checkbox"/> Non-Government Organization			
<input type="checkbox"/> Others _____			

2. Proof of Identity⁺

Officially Valid Document(s) in respect of person authorized to transact

Certificate of Incorporation/Formation _____ Registration Certificate _____

Memorandum of Articles and Association Partnership Deed Trust Deed

Board Resolution Power of attorney granted to its manager, office, employees to transact on its behalf

Activity Proof –1* (For Sole Proprietorship Only) Activity Proof –2* (For Sole Proprietorship Only)

3. Address Details*

A. Registered Address*

Line 1* _____

Line 2 _____

Line3 _____

City/Town/Village* _____ District⁺ _____ Pin Code* _____

State* _____ Country* _____

B. Correspondence/Local Address in India (if different from above)*

Line 1* _____

Line 2 _____

Line3 _____

City/Town/Village* _____ District⁺ _____ Pin Code* _____

State* _____ Country* _____

Applicant Digital Signature (DSC)

Proof of Address* (attested copy of any one POA to be submitted—#Not more than 3 months old)

- Certificate of Incorporation/Formation Registration Certificate Other document _____
 Latest Telephone Bill* (Landline only) Latest Electricity Bill# Latest Bank Account Statement#
 Registered Lease/ Sale Agreement of Office Premises **Validity/Expiry Date of POA** (Expiry Date) ____ ____ ____
 Any other proof of address document (as listed overleaf) _____

4. Contact Details

Email ID _____ Mobile No. _____
 Email ID _____ Mobile No. _____
 Tel (off) _____ Fax _____

5. Annexures Submitted

Number of Related Persons -

6. Remarks / Additional Information**7. Applicant Declaration**

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I/We may be held liable for it.

I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.

DATE: ____ ____ ____ ____ (DD-MM-YYYY)

PLACE: _____

Applicant Digital Signature (DSC)

Applicant Wet Signature

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8. For Office Use Only

KYC carried out by*

Intermediary Details*

KYC Date ____ ____ ____ ____
 Emp. Name _____
 Emp. Code _____
 Emp. Designation _____

Self certified document copies received (Originals Verified)

True Copies of documents received (Attested)

AMC / Intermediary Name OR Code:

Employee Signature and Stamp

Employee Signature and Stamp

— This space is intentionally left blank — This space is intentionally left blank — This space is intentionally left blank — This space is intentionally left blank —

Know Your Client (KYC)
Annexure (For Non- Individuals Only)



CDSL VENTURES LIMITED
...Exploring New Horizons

Intermediary
Logo

Please fill the form in ENGLISH and in BLOCK letters

Fields marked * are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: _____

Application Type*: New KYC Modification KYC

1. Identity Details of Related Person

PAN* _____ Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof) _____

Maiden Name+ (if any) _____

Fathers/Spouse's Name* _____

Date of Birth* _____

Gender* Male Female Transgender

Nationality* Indian Other _____

Related Person Type*
 Director Promoter Karta Trustee Partner Court Appointed Official Proprietor
 Beneficiary Authorized Signatory Beneficial Owner Power of Attorney Holder
 Others _____ (please specify) DIN: _____ (mandatory if the related person is Director)



Proof of Identity (POI) submitted for PAN exempted cases (Please tick)

A — Aadhaar Card XXXX XXXX _____
 B — Passport Number _____ (Expiry Date) _____
 C — Voter ID Card _____
 D — Driving License _____ (Expiry Date) _____
 E — NREGA Job Card _____
 F — NPR _____
 Z — Others _____ (any document notified by Central Government)
Identification Number _____

2. Address Details*

A. Correspondence/ Local Address*

Line 1* _____

Line 2 _____

Line 3 _____

City/Town/Village* _____ District+ _____ Pin Code* _____

State* _____ Country* _____

Address Type* Residential/Business Residential Business Registered Office Unspecified

Applicant e-SIGN

B. Permanent residence address of applicant, if different from above A / Overseas Address* (Mandatory for NRI Applicant)

Line 1* _____
 Line 2 _____
 Line3 _____

City/Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

Address Type* Residential/Business Residential Business Registered Office Unspecified

Proof of Address* (attested copy of any 1 POA for correspondence and permanent address each to be submitted)

A — Aadhaar Card XXXX XXXX _____

B — Passport Number _____ (Expiry Date) _____

C — Voter ID Card _____

D — Driving License _____ (Expiry Date) _____

E — NREGA Job Card _____

F — NPR Letter _____

Z—Others _____ (any document notified by Central Government)

Identification Number _____

3. Contact Details

Email ID _____

Mobile No. _____

Tel (off) _____ Tel (Res) _____

4. Applicant Declaration

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I/We may be held liable for it.

I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.

DATE: _____ (DD-MM-YYYY)
 PLACE: _____

Applicant e-SIGN

Applicant Wet Signature

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5. For Office Use Only

KYC carried out by*	Intermediary Details*
KYC Date _____ Emp. Name _____ Emp. Code _____ Emp. Designation _____	<input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Employee Signature and Stamp	Institution Name and Stamp

*** Declaration for Ultimate Beneficial Ownership (UBO)**
(Mandatory for Non-Individual Applicants/Investors)

This declaration is not needed for Companies that are listed on any recognized stock exchange or is a Subsidiary of such Listed Company or is Controlled by such Listed Company

A: Applicant Details:-

PAN	<input type="text"/>	CRF No.	<input type="text" value="please specify"/>
Applicant Name	<input type="text"/>		

B: Category (please tick applicable category):-

<input type="checkbox"/> Unlisted Company	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Unincorporated Association/Body of Individuals	<input type="checkbox"/> Religious Trust
<input type="checkbox"/> Public Charitable Trust	<input type="checkbox"/> Private Trust / Trust created by a Will	<input type="checkbox"/> Others	<input type="text" value="please specify"/>	

C: Details of Ultimate Beneficial Owners:-

(Please list below each controlling person, confirming ALL countries of Tax Residency / permanent address / citizenship and ALL

Tax Identification Numbers for EACH controlling person. Please submit photocopy[#] of the PAN with photo or any other valid photo identity proof for each of the UBO specified)

If any of the UBO is resident / citizen of a Country other than India or citizen / tax resident / green card holder of United States of America (USA), please provide TaxPayer Identification Number / US Social Security Number (SSN) *

S.No	Name of Ultimate Beneficiary Owner PAN (for Residents/NRIs) ID Proof (Foreign / PAN Exempt Individuals)	Permanent Address	Country of: Birth (COB), Citizenship (COC), Nationality (CON)	Country of Tax Residency	Tax Identification Number (TIN)	UBO Code @
	Name		COB:	1.	1.	
	PAN		COC:	2.	2.	
	ID Proof		CON:	3.	3.	
	Name		COB:	1.	1.	
	PAN		COC:	2.	2.	
	ID Proof		CON:	3.	3.	
	Name		COB:	1.	1.	
	PAN		COC:	2.	2.	
	ID Proof		CON:	3.	3.	
	Name		COB:	1.	1.	
	PAN		COC:	2.	2.	
	ID Proof		CON:	3.	3.	

* - If the given rows are not sufficient, investor can submit multiple declarations covering all Beneficial Owners.

- Attached document should be self certified by the UBO and certified by the Applicant / Investor's Authorized signatory.

@ - UBO Codes

UBO Code	Description	UBO Code	Description
UBO-1	Controlling ownership interest of more than 25% of shares or capital or profits of the juridical person [Investor], where the juridical person is a company	UBO-2	Controlling ownership interest of more than 15% of the capital or profits of the juridical person [Investor], where the juridical person is a partnership
UBO-3	Controlling ownership interest of more than 15% of the property or capital or profits of the juridical person [Investor], where the juridical person is an unincorporated association or body of individuals	UBO-4	Natural person exercising control over the juridical person through other means exercised through voting rights, agreement, arrangements or in any other manner [In cases where there exists doubt under clause 4 (a) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests]
UBO-5	Natural person who holds the position of senior managing official [In case no natural person cannot be identified as above]	UBO-6	The settlor(s) of the trust
UBO-7	Trustee(s) of the Trust	UBO-8	The Protector(s) of the Trust [if applicable].
UBO-9	The beneficiaries with 15% or more interest in the trust if they are natural person(s)	UBO-10	Natural person(s) exercising ultimate effective control over the Trust through a chain of control or ownership

Declaration

I/We acknowledge and confirm that the information provided above is/are true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We aware that I/We may liable for it. I/We hereby authorize sharing of the information furnished in this form with all SEBI Registered Intermediaries and they can rely on the same. In case the above information is not provided, it will be presumed that applicant is the ultimate beneficial owner, with no declaration to submit. In such case, the concerned SEBI registered intermediary reserves the right to reject the application or reverse the allotment of units, if subsequently it is found that applicant has concealed the facts of beneficial ownership. I/We also undertake to keep you informed in writing about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required at your end.

Authorized Signatory(ies) [with Company/Trust/Firm/Body Corporate seal]

12

Date : ____/____/____

Place : _____

Ultimate Beneficial Ownership (UBO)

BACKGROUND

Pursuant to SEBI master circular vide ref. no. CIR/ISD/AML/3/2010 dated December 31, 2010 on anti money laundering standards and guidelines on identification of Beneficial Ownership issued by SEBI vide its circular ref. no. CIR/MIRSD/2/2013 dated January 24, 2013, investors (other than Individuals) are required to provide details of Ultimate Beneficial Owner(s) ("UBO(s)") and submit proof of identity (viz. PAN with photograph or any other acceptable proof of identity prescribed in common KYC form) of UBO(s).

The Ultimate Beneficial Owner means:

● **For Investor other than Trust:**

A 'Natural Person', who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of / entitlements to:

- i. more than 25% of shares or capital or profits of the juridical person, where the juridical person is a company;
- ii. more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership; or
- iii. more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.

In cases where there exists doubt as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity details should be provided of the natural person who is exercising control over the juridical person through other means (i.e. control exercised through voting rights, agreement, arrangements or in any other manner). However, where no natural person is identified, the identity of the relevant natural person who holds the position of senior managing official should be provided.

● **For Trust:**

The settler of the trust, the trustees, the protector, the beneficiaries with 15% or more of interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

Exemption in case of listed companies:

The provisions w.r.t. Identification of UBO are not applicable to the investor or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company.

Applicability for foreign investors:

The identification of beneficial ownership in case of Foreign Institutional Investors (FIIs), their sub-accounts and Multilateral Funding Agencies / Bodies Corporate incorporated outside India with the permission of Government of India / Reserve Bank of India may be guided by the clarifications issued vide SEBI circular CIR/MIRSD/11/2012 dated September 5, 2012.

Details of Promoters/Partners/Karta /Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Name of Applicant _____

PAN of the Applicant _____

Sr. No.	PAN	Name	DIN (For Directors) / Aadhaar Number (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Photograph

Place for Intermediary Logo



Date | d | d | / | m | m | / | y | y | y | y |

Name & Signature of the Authorised Signatory(es)

FATCA/CRS Declaration Form - (Non-Individual)

B-FLY INDIA OPPORTUNITIES FUND

Client Code : _____

Name: _____

* One Input is mandatory

- (a) Is the account holder a Government Body/ International Organisation/listed on any recognised stock exchange. Yes No
(If yes and you are listed please specify the name of the stock exchange, _____, If no proceed to point (b)),
- (b) Is the account holder (Entity/Financial Institution) tax resident of any country other than India Yes No
(If yes pls fill FATCA/CRS self-certification), If no proceed to point (c),
- (c) Is the account holder an Indian Financial Institution Yes No
(If yes please provide your GIIN _____,if any, If no proceed to point (d)),
- (d) Are Substantial owners or controlling persons in the entity or chain of ownership resident for tax purpose in any country outside India or not an Indian Citizen. Yes No
(If yes than please fill of FATCA/ CRS self-certification),If no pls sign the declaration).

Customer Declaration

(I) Under penalty of perjury, I/We certify that:

1. The applicant is (i) an applicant taxable as a U.S. person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate, the income of which is subject to U.S. Federal Income tax regardless of the source thereof, or (This clause is applicable only if the account holder is identified as a U.S. person)

2. The applicant is taxable as a tax resident under the laws of the country outside India (This clause is applicable only if the account holder is a tax resident outside of India)

(II) I/We understand that the Bank is relying on this information for the purpose of determining the status of the applicant in compliance with FATCA/CRS. The Bank is not able to offer any tax advice on FATCA or CRS or its impact on the applicant. I/We should seek advice from professional tax advisor for any tax questions

(III) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect

(IV) I/We agree that as may be required by regulatory authorities, the Bank may also be required to report reportable details to CDBT or close or suspend my account

(v) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

Name of the Entity

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Authorized Signatory(ies) [with Company/Trust/Firm/Body Corporate seal]

Date (DD/MM/YYYY) :

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www.b-fly.in *



No. 040 40527777 *



support@b-fly.in

Mumbai: A-Wing, 301, Gala Quest, Paranjape B Scheme, Road No.1, Opp. Mahila Sangh School,
Subhash Road, Vile Parle (East), Mumbai - 400057

Hyderabad: 6-3-652, IV Floor, "Kautilya", Amrutha Estates, Somajiguda, Hyderabad - 500 082