RYSA INDIA GROWTH OPPORTUNITY FUND

RYSA WEALTH
Building wealth with Wisdom

FATCA-CRS Declaration & Supplemental KYC Information
Declaration Form for Entities
Please seek appropriate advice from your tax professional on your tax residency and related FATCA & CRS guidance

Part - A

Tax ID of the Firm		Date of Incorporation	D D M M Y Y Y Y
Name			
Address type [for KYC address]	☐ Residential ☐ Residential/Business ☐ Business ☐ Registered Office		
Place of Incorporation		Country of Incorporation	
Gross Annual Income Details in USD	☐ Below 1 million ☐ 1 to 5 million ☐ Below 1 million ☐ 1 to 5 million	Net worth in USD million Net Worth as of	_____ D D M M Y Y Y Y
Is the entity involved in / providing any of the following services:	☐ Foreign Exchange / Money Changer Services ☐ Gaming / Gambling / Lottery Services [e.g. casinos, betting syndicates] ☐ Money Laundering / Pawning	Any other Information [if applicable]	[Please Specify]

Is "Entity" a tax resident of any country other than India - ☐ Yes ☐ No
(If 'Yes', please provide countries in which the entity is a resident for tax purpose and the associated TIN)

Sr. No.	Country of Tax Residency	Tax Payer Identification Number/ Functional Equivalent / Company Identification Number or Global Entity Identification Number	Identification Type [TIN or other, please specify]
1			
2			
3			

In case the Entity's Country of Incorporation / Tax Residence is US but Entity is not a Specified US person, mention Entity's exemption code here _____ (Refer Instructions o)

Authorized Signatory-1	Authorized Signatory-2	Authorized Signatory-3
Name	Name	Name
Date: D D M M Y Y Y Y	Date: D D M M Y Y Y Y	Date: D D M M Y Y Y Y

We are a	GIIN (Global Intermediary Identification Number):
☐ Financial Institution / FFI *[refer instruction a.]*	*Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below* Name of the Sponsoring Entity
☐ Direct Reporting NFFE *[refer instruction b.]*	GIIN not available [tick any one] ☐ Applied for ☐ Not required to apply for - specify sub-category code ☐☐ [refer instruction c.] ☐ Not obtained - Not participating FFI

1	Is the entity is a listed company *[whose shares are regularly traded on a recognized stock exchange]* *[refer instructions d.]*	☐ No ☐ Yes *(If Yes, Please specify any one Stock Exchange on which the stock is traded regularly)* Name of the Stock Exchange: _____
2	Is the entity a 'Related Entity' of a listed company *[whose shares are regularly traded on a recognized stock exchange]* *[refer instructions e.]*	☐ No ☐ Yes *(If Yes, (Please specify the name of the listed company and one stock exchange on which stock is traded regularly)* Name of the listed company: _____ Nature of Relation: ☐ Subsidiary ☐ Controlled Name of the Stock Exchange: _____
3	Is the entity an Active NFE?	☐ No ☐ Yes - Nature of business _____ Please specify sub-category of Active NFE ☐☐ [refer instruction g.]
4	If the entity a Passive NFE: *[refer instructions h.]*	☐ No ☐ Yes - Nature of business _____ If Yes, fill UBO declaration in the next section

if Passive NFE, please provide the below additional details for each of the Controlling person. *(Please attach additional sheets if necessary)*

Sr. No.	Name of UBO	Taxpayer Identification Number/ Equivalent ID Number~	Place & Country of Birth	Country of Tax Residency*	Occupation Type [Service, Business, Others]	Nationality	Father's Name	Date of Birth (dd/mm/yyyy)	Gender [Male, Female, Others]
1									
2									
3									
4									

 # Additional details to be filled by controlling persons with tax residency I permanent residency I citizenship I Green Card in any country other than India
~ In case TIN is not available, kindly provided functional equivalent
**If UBO has more than one tax residency outside India, details to be provided in separate rows for each of the tax residency countries*

Declaration:
I/We acknowledge and confirm that the information provided above is 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 am/are aware that I/We may liable for it. I/We hereby authorize you [Fund/Other participating entities] to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to I any of the Alternative Investment Fund, its Sponsor, Asset Management Company, trustees, their employees I RTAs ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities I agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me/us of the same. Further, I/We authorize to share the given information to other SEBI Registered Intermediaries /or any regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days and also undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/ tax authorities. I/We authorize Fund/ AMC/RT A to provide relevant information to upstream payors to enable withholding to occur and pay out any sums from my account or close or suspend my account(s) without any obligation of advising me of the same. We also confirm that we have read and understood the FATCA & CRS Terms and Conditions given below and hereby accept the same.

Signature with relevant seal:

Authorized Signatory-1	Authorized Signatory-2	Authorized Signatory-3

Place: _____

Date: D D M M Y Y Y Y

FATCA & CRS Terms & Conditions

Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which require Indian financial institutions such as the Banks/other financial entities to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

If you have any questions about your tax residency, please contact your tax advisor. If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the US Tax Identification Number. It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

Please note that you may receive more than one request for information if you have multiple relationships with Alf or its group entities / related parties. Therefore, it is important that you respond to such request, even if you believe you have already supplied any previously requested information.

****

Acknowledgement

We on behalf of participating Alternative Investment Fund] acknowledge the receipt of FATCA/CRS declaration form duly filled and signed from M/s. _____ Tax ID _____ on: dd/mm/yyyy

_____

Date: _____ Signature with Name, Emp. ID & Seal