	FORM OPI: Section A									
	(For the half year ended March/ September)									
Portf	Note: To be filed by a person resident in India, other than a resident individual, making any Overseas Portfolio Investment (OPI) or transferring such investment during the reporting period (Only relevant sections of this form, as applicable, may be used)									
All ar	All amounts should be in actuals									
	Name and Code of Reporting AD bank:									
11	Particulars of the Indian Entity/N	Iutual Fund (MF)								
i.	Name of Indian entity/ MF									
ii.	LEI of Indian entity/ MF									
iii.	PAN									
iv.	Address of Indian entity/ MF									
v.	City									
vi.	State									
vii.	PIN code									
	Net worth in INR (in case of Indian entity) as per last audited balance sheet		As on date (Please mention date)							
ix	Whether the IE is listed	Yes / No								
х	Contact person									
	(name & designation)									
xi	Mobile number									
xii	E-mail ID									
Α. (OPI by Indian entity (Please refer	to Schedule II & F	Proviso 2(iii) of	Schedule V of	OI Rules)					
				USD	INR					
i	Net Amount of Investment held al basis	broad (opening bala	ance) at cost							
ii	Investments made during the half	nvestment)								
iii	Sale/disinvestment made during t									
iv	Net amount of Investment held at	proad (closing balar	nce) (I+II-III)							
	Remittance amount									
	Repatriation amount									

B. OPI by resident individuals by way of ESOP/ Employee Benefits Scheme (EBS) (Please refer to Para 1 (2) (iii)(h) and para 3 of Schedule III of OI Rules) (reporting to be made by by the company/ branch/ office, as the case may be

									USI)		INR	
i	Net Amount of E Balance) at cost		BS Inv	restme	nt held	l abroad	(Openir	ng					
ii Investments made during the Half Year (including reinvestment)													
iii Disinvestments made during the Half Year *													
iv Net amount of Investments held abroad (Closing Balance) (I+II-III)													
Remittance Amount													
	Repatriation Ar	nount											
	nsolidated detail ould be reported					-	•	-	-	-		ts Sch	neme
a. V	Ve,				(Ind	ian Com	pany / C	Office /	Branc	h), her	eby de	clare t	hat:
equ	ity capital/ % inter ng the half year a	rest to c	our emp										re)
(i) E	equity capital/% in	terest a	llotted:										
(ii) I	(ii) Number of employees/ Directors who accepted shares/ interest:												
b. V	Ve,				(Ind	ian Com	pany / C	Office /	Branc	h), her	eby de	clare t	hat:
(nat	M/s (foreign company) has repurchased (nature) equity capital from our employees /directors under ESOP/ Employee Benefits Scheme during the half year as under:												
(i) e	quity capital repu	rchased	1:										
(ii) I	Number of employ	vees / D	irector	s who	sold ec	quity cap	ital/ inte	rest:					
C. (OPI by Mutual Fu	nds (p	ease r	efer to	Para	2 of Scl	nedule I	V of O	I Rule	s)			
		Opening					osing	-			Repatriati		
		balance acquired disinvested* bala		lance	e	from India		on to India					
		USD	INR	USD	INR	USD	INR	USD	INR	USD	INR	USD	INR

i	Equity						
ï	Debt Instruments						
iii	ADR/GDR						
iv	ETF (Securities)						
V	Mutual Funds						
vi	Others (Specify)						
	Total (C)						

* The disinvestment amount should correspond to the actual investment amount made and not the sale/market value on which disinvestment took place

Form OPI: Section B								
Reporting of the Overseas Portfolio Investment (OPI) by Venture Capital Fund (VCF)/ Alternate Investment Fund (AIF)								
	Particulars of the Indian entity/ residence of the second	dent individual (RI) who has promoted/ invested in VCF/ AIF (Attach Indian entities/ RIs)						
i.	Name of the Indian entity/ RI							
	LEI of Indian entity							
iii.	PAN							
iv.	Group to which the entity belongs							
۷.	Activity code of the Indian entity	(1987 NIC code at 3-digit level)						
		(2008 NIC code at 5- digit level)						
vi.	Address of the Indian entity/ RI							
vii.	City							
viii.	State							
ix.	PIN code							
X.	Name of the contact person							
xi.	Designation of the contact person							
xii.	Telephone No.							
xiii.	Mobile No. of the contact person							
	Fax No.							
	Email							
	Particulars of the Indian Company/ F	RI who manages the VCF/ AIF						
	Name of the Indian entity/ RI							
ii.	PAN							
iii.	Group to which the entity belongs							
iv.	Activity code of the Indian Company	(1987 NIC at 3-digit level						
		(2008 NIC at 5-digit level)						
۷.	Address of the Indian entity/ RI							
vi.	City							
vii.	State							
viii.	PIN code							
ix.	Name of the contact person							
х.	Designation of the contact person							
xi.	Telephone No.							

xii.	Mobile No. of the contact person	
xiii.	.Fax No.	
xiv.	Email	
	Particulars of the VCF/ AIF	
i.	Name of the VCF/AIF	
ii.	. Date of the SEBI Approval	
	Limit of the Overseas investment granted by SEBI (Amount in actuals in USD)	

IV OPI by VCF/AIF (please refer to Para 2 of Schedule IV of OI Rules)													
			ening lance		hase/ luired	disinv	Sale/ ested		osing lance	Remit from	tance India		triation to India
		USD	INR	USD	INR	USD	INR	USD	INR	USD	INR	USD	INR
i	Equity												
ii	Equity linked instrument												
iii	Other permissible instrument (furnish the details of instrument)												
	Total												

Section C

Certificate from Indian entity/ Mutual Fund/AIF/VCF (Strike out whichever is not applicable)

We, the Indian entity/ Mutual Fund/ AIF/ VCF further confirm that the investment made as above are in compliance with the provisions contained in OI Rules.

All the transactions effected during the half year are included above and we hereby certify that the information furnished above are true and correct. <u>We also duly acknowledge that if any information</u> <u>furnished by us is found to be false and/or incorrect, it shall be construed that the reporting</u> <u>requirements under FEMA,1999 have not been complied with.</u>

entity approv	f the authorized official of the Indian ved by the Board or equivalent body, se may be/ Mutual Fund/ AIF/ VCF	Stamp/Seal	
	signation of the Authorized Official of an entity/ Mutual Fund/ AIF/ VCF		
Place		Date	
Telephone No.		Email ID	

Instructions for filling up Form OPI

- 1) In the case of Mutual Funds, the details of Indian entity responsible for filing the Form OPI (i.e Promoter/AMC of that Mutual Fund, as decided by the Mutual Fund), may be indicated in Section A (details of Indian entity), along with mentioning the name of the Mutual Fund.
- 2) Section C for Mutual Fund/ AIF/ VCF may be filled in by the Indian entity responsible to file the Form OPI (as designated by the fund).
- 3) The date may be mentioned in format DD/MM/YYYY format.
- 4) All amounts should be in actuals only.