For filings with the FSA include the annex For filings with issuer exclude the annex

TR-1: Notifications of Major Interests in Shares

1. Identity of the issuer or the underlying issuer of existing shares to which voting are attached:	India Capital Growth Fund LTD			
2. Reason for notification (yes/no)				
An acquisition or disposal of voting rights		yes		
An acquisition or disposal of financial instruments which may result in the acquisition of shares already issued to which voting rights are attached				
An event changing the breakdown of voting rights				
Other (please specify):				
3. Full name of person(s) subject to notification obligation:	Arbite	r Partners, LP		
4. Full name of shareholder(s) (if different from 3):				
5. Date of transaction (and date on which the threshold is crossed or reached if different):	May 28	3, 2008		
6. Date on which issuer notified:	May 29	9, 2008		
7. Threshold(s) that is/are crossed or reached:	7%			

A: Voting ri	giilo allac		u. 00				
Class/type of shares If possible use	Situation previous to the triggering transaction		Resulting situation after the triggering transaction				
ISIN code	Number	Number	Number	Number of	voting	Percenta	ge of voting
GB00B0P8RJ60	of shares	of voting	of shares	rights		rights	
	4 505 000	rights		D:	In Proceed	D'	In Process
	4,525,000	4,525,000		Direct	Indirect	Direct	Indirect
		4,323,000	5,300,000	5,300,000		7.07%	

B: Financial	Instruments					
Resulting situation after the triggering transaction						
Type of financial instrument	Expiration date	Exercise/ conversion period/date	No. of voting rights that may be acquired (if the instrument exercised/converted)	Percentage of voting rights		

Total (A+B)	
Number of voting rights	Percentage of voting rights
5,300,000	7.07%

9. Chain of controlled undertakings the financial instruments are effectively h	rough which the voting rights and /or the leld, if applicable:					
The interest of 5,300,000 shares are held directly by Arbiter Partners, LP						
	,					
Proxy Voting:						
10. Name of proxy holder:	NA					
11. Number of voting rights proxy holder will cease to hold:	NA					
12. Date on which proxy holder will cease to hold voting rights:	NA					
13. Additional information:						
14 Contact name:	Peter Kennedy					
15. Contact telephone name:	212-650-4668					

For notes on how to complete form TR-1 please see the FSA website.