



TAX RESIDENCY SELF-CERTIFICATION – NATURAL PERSON

Account- / Register No:

Name of Account --/ Register Holder

Family Name/ Surname

First/ Given Name

Current Residence Address

Street, Number

Postal Code, City/ Town

Country

Date of Birth (dd.mm.yyyy)

Place of Birth (city/ country)

Country of Residence for Tax Purposes and related Taxpayer Identification Number (TIN) or functional equivalent number

Country of Residence for Tax Purposes

Taxpayer Identification Number (TIN)

If no TIN available enter Reason **A**, **B** or **C***

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* If a TIN is unavailable please provide the appropriate reason A, B or C where appropriate:

A - The country where the Account Holder is liable to pay taxes does not issue TINs.

B - The Account Holder is otherwise unable to obtain a TIN or equivalent.

C - No TIN is required (note: only select if the authorities of the country of tax residence entered above do not require the TIN to be disclosed).

If you selected **B** above, please explain why you are unable to obtain a TIN .

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The undersigned acknowledges that the information provided herein is governed by and may be used and shared in accordance with General Terms and Conditions of European Depositary Bank SA.

The undersigned acknowledges that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be reported to the tax authorities in Luxembourg. The undersigned further acknowledges that the information provided may be exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident pursuant to inter-governmental agreements to exchange financial account information.

The undersigned authorizes European Depositary Bank SA to report all given information as described above.

The undersigned undertakes to inform European Depositary Bank SA within 30 days of any change in circumstances which affects the information provided in this form with respect to his/ her tax residency status and to provide European Depositary Bank SA with an updated self-certification without further delay.

The undersigned declare(s) that all statements made in this declaration are, to the best of his/her knowledge and belief, correct and complete.

Place, Date

Signature