

*In original by mail to*

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VAT-ID No. ATU69303158,  
Data Processing Register No. 4014540  
BIC OCSDATWWXXX

Version 2.0

## Annex 5 to the GTC of OeKB CSD Provision/Modification Customer Master Data

- We **provide** the **Customer Master Data** as follows:
- We request the **modification** of the **Customer Master Data** as indicated below:

### 1. General Information

<b>1.1. Name of institute:</b>	
<b>1.2. Legal form:</b>	
<b>1.3. Registered office (address):</b>	
<b>1.4. The registered office is the location of the central administration:</b> <input type="radio"/> yes <input type="radio"/> no <b>If no, address of the central administration:</b>	
<b>1.5. VAT-ID No.:</b>	
<b>1.6. Company Register No. or equivalent:</b>	
<b>1.7. Legal Entity Identifier (LEI):</b>	
<b>1.8. Beneficial owner<sup>1</sup>:</b>	
<b>1.9. Purpose of business activity:</b>	

<sup>1</sup> The **beneficial owner** is the natural person(s) who directly or indirectly holds 25% or more of the shares in the company. If other legal entities hold shares in the company, the entire chain of ownership must be disclosed down to the last natural person, stating the amount of the shareholding. If necessary, a graphic representation must be submitted, showing the shareholdings and their size. If the beneficial owner is a country, a state or another organization (e.g. a stock exchange or a cooperative etc.) where no natural person can be identified, the management of the company owned by the country/state etc. (usually the board of directors of an AG or management of a GmbH) must be reported.

## 2. Information on Bank Identifier Code (BIC)

**Not** to be completed by issuers who have notified a paying agent to OeKB CSD.

2.1. BIC-code:

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2.2. Test-BIC-code:

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## 3. Information regarding the US withholding tax

**Only** to be completed by those who would like to become or are participants of OeKB CSD.

### 3.1. FATCA status

GIIN:

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PFFI

active NFFE

passive NFFE (under dominating US influence)

exempt FFI

exempt NFFE

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### 3.2. QI status

QI

QI-EIN:

NQI

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By signing this form, we confirm,

- a) the accuracy of the data provided and the attachments submitted,
- b) to have read and taken note of the General Terms and Conditions of OeKB CSD GmbH in their current version (available at [www.oekb.csd](http://www.oekb.csd) → **General Terms and Conditions**) and to agree to their validity for the provision of services agreed with us within the scope of the business relationship and
- c) to have read and taken note of the information on data processing in accordance with Articles 13 and 14 of Regulation (EU) 2016/679 (Data Protection Regulation - DSGVO; available at [www.oekb-csd.at](http://www.oekb-csd.at) → **Privacy Policy**).

\_\_\_\_\_  
Place, Date

\_\_\_\_\_  
Place, Date

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Name in Capital Letters

\_\_\_\_\_  
Name in Capital Letters

## 4. Attachments

- **Current excerpt from the company register** (not older than 6 weeks), in the case of company headquarters outside Austria in non-German-speaking countries, if necessary equivalent, certified translation in German or English
- **Extended excerpt from the WiEReG** (only for Austrian applicants); excerpt from the respective foreign register of beneficial owners, if existing (for non-Austrian applicants from the EU area) or equivalent (applicants from third countries) in the case of company headquarters outside Austria in non-German speaking countries, certified translation in German or English
- **Copy of an official photo ID and proof of the power of representation** of the persons signing Annex 5 (Provision/Modification Customer Master Data)
- **Copy of the official photo identification/s<sup>2</sup> of the beneficial owner(s)**

### 4.1. Additional attachments

**Not** to be completed by issuers who have notified a paying agent to OeKB CSD.

- **Current articles of association of the company** (if necessary confirmed by a notary public or equivalent for non-Austrian applicants)
- **Latest annual report**
- → **Wolfsberg-FCC Questionnaire** (to be provided by banks and brokers)

### 4.2. Additional attachments

**Only** to be provided by those who would like to become or are participants of OeKB CSD.

- US-Tax/FATCA (W-8IMY for banks, W-8BEN-E for non-banks or banks in case of own stock)

*OeKB CSD GmbH reserves the right to request further documents.*

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<sup>2</sup> Passport or identity card with the following criteria: non-exchangeable header picture, date of birth, citizenship, issuing authority, signature

## 5. Contact person for OeKB CSD

### 5.1. General

Address:	<input type="radio"/> Mr	<input type="radio"/> Ms	<input type="radio"/> general
First and last name or name of group address:			
Phone:			
E-mail:			
Receive mailings:	<input type="radio"/> yes	<input type="radio"/> no	

### 5.2. Notary Services & Safekeeping

Address:	<input type="radio"/> Mr	<input type="radio"/> Ms	<input type="radio"/> general
First and last name or name of group address:			
Phone:			
E-mail:			
Receive mailings:	<input type="radio"/> yes	<input type="radio"/> no	

### 5.3. Securities Account Administration

Address:	<input type="radio"/> Mr	<input type="radio"/> Ms	<input type="radio"/> general
First and last name or name of group address:			
Phone:			
E-mail:			
Receive mailings:	<input type="radio"/> yes	<input type="radio"/> no	

### 5.4. Cash Account Administration

Address:	<input type="radio"/> Mr	<input type="radio"/> Ms	<input type="radio"/> general
First and last name or name of group address:			
Phone:			
E-mail:			
Receive mailings:	<input type="radio"/> yes	<input type="radio"/> no	

**5.5. Settlement**

Address:	<input type="radio"/> Mr <input type="radio"/> Ms <input type="radio"/> general
First and last name or name of group address:	<input type="text"/>
Phone:	<input type="text"/>
E-mail:	<input type="text"/>
Receive mailings:	<input type="radio"/> yes <input type="radio"/> no

**5.6. Asset Servicing**

Address:	<input type="radio"/> Mr <input type="radio"/> Ms <input type="radio"/> general
First and last name or name of group address:	<input type="text"/>
Phone:	<input type="text"/>
E-mail:	<input type="text"/>
Receive mailings:	<input type="radio"/> yes <input type="radio"/> no

**5.7. Tax**

Address:	<input type="radio"/> Mr <input type="radio"/> Ms <input type="radio"/> general
First and last name or name of group address:	<input type="text"/>
Phone:	<input type="text"/>
E-mail:	<input type="text"/>
Receive mailings:	<input type="radio"/> yes <input type="radio"/> no

**5.8. Technical issues (IT)**

Address:	<input type="radio"/> Mr <input type="radio"/> Ms <input type="radio"/> general
First and last name or name of group address:	<input type="text"/>
Phone:	<input type="text"/>
E-mail:	<input type="text"/>
Receive mailings:	<input type="radio"/> yes <input type="radio"/> no