

TAX RESIDENCE SELF-CERTIFICATION FORM FOR INDIVIDUALS & PERSONAL ENTERPRISES

Based on the Common Reporting Standard ("CRS") of the OECD and in compliance with the applicable legislative framework, the Optima bank S.A. (henceforth, "the Bank") is under the obligation to collect and report to the competent Greek authorities information about the tax residence of account holders. Even though tax residence is generally defined as the country/jurisdiction where you reside, you may be, due to special circumstances, a tax resident of more than one country/jurisdiction concurrently.

If your tax residence (or the tax residence of the account holder, if you are completing the form on its behalf) is located outside Greek jurisdiction, the bank may be under the legal obligation to provide the information contained in the present form, as well as other information about your financial accounts, to the competent Greek tax authorities, which may then send the above information to the tax authorities of another country/jurisdiction or countries/ jurisdictions in which the Account Holder has his tax residence, by virtue of inter-state treaties for the exchange of financial information.

The present form remains in force except if there ensues a change of circumstances impacting the tax status of the Account holder or other obligatory fields of the present form, rendering same inaccurate and/or incomplete. In this case, you are under the obligation to notify us thereof and file an updated self-certification form (see below, Part III).

If you are completing the present form on behalf of another person, you must attend to their notification thereof

- If the Account Holder is a minor, the form must be completed by the legal guardian on his behalf.
- In the case of co-beneficiaries or multiple beneficiaries of an account, use a separate form for each individual.
- If you are taxable person in the USA, on the basis of the regulations of the US Tax Authority (the IRS), you must also complete form W9 of the IRS.

The processing of personal data contained in the present form is made in compliance with the Bank's obligations as imposed by law, there applying the provisions of General Data Protection Regulation (GDPR) and the national data protection legislation in force. The Account holder Client declares that he has studied the document "Information of the Clients of Optima bank S.A. on the Processing of Personal Data in accordance with the General Data Protection Regulation (GDPR)" which he has understood and accepted. The above document is also available at the Bank's branches and posted on its website (www.optimabank.gr). This form specifies in detail the categories of personal data of the Client processed by the Bank and their origin, processing purposes, the recipients of the data, their possible transmission to third countries outside the European Economic Area, any automated decision making process, the retention period of such data, the Client's total rights to the protection of personal data concerning him, the way of protecting the personal data of the Client and the contact details of the Bank for any questions the Client may have regarding his personal data and for the exercise of his rights.

As a financial institution, we are not permitted to provide tax advice. For more information on the Common Reporting Standard requirements, please follow the sites of OECD (<http://www.oecd.org/tax/automatic-exchange/about-automatic-exchange/>) or the Independent Public Revenue Authority (AADE) (<http://www.aade.gr/epicheireseis/themata-diethnoys-dioiketikes-synergasias>), or contact your tax consultant.

PART I – IDENTIFICATION OF ACCOUNT HOLDER

Radical / Customer Code (to be completed by the Bank): _____

Surname: _____ Name: _____

Father's Surname: _____ Father's First Name: _____

Type of ID:

ID Card Passport Service ID Card Residence Permit Other

ID Number: _____ Date of Issue: _____

Date of Birth: _____ Place / Country of Birth: _____

Country of Residence: _____

Residence Address:

Street: _____ No: _____

Zip Code: _____ City: _____ Country: _____

Tel.: _____ Fax: _____

PART II - COUNTRY OF RESIDENCE FOR TAX PURPOSES AND RELEVANT TAXPAYER IDENTIFICATION NUMBER OR FUNCTIONAL EQUIVALENT ("TIN")

Complete the table below, determining:

- The country in which the account holder has its tax residence.
- The Taxpayer Identification Number of the account holder in each country stated.

If the account holder has a tax residence in more than three countries, use a separate page.

If the TIN is not available, state the related reason, A, B or C (where required):

Reason A: The country in which it is subject to taxation does not issue TINs for its residents.

Reason B: The account holder is unable, due to another reason, to receive a TIN or an equivalent number (if you select this reason, please explain why you are unable to receive a TIN in the table below).

Reason C: A TIN is not required. (Note: Select this reason only if the authorities of the tax residence country stated below do not require that a TIN be notified).

Country of Tax Residence	TIN Number	If there is no TIN, state reason A, B, C
1.		
2.		
3.		

If you selected Reason B above, please explain why you are unable to receive a TIN in the table below:

1.	
2.	
3.	

PART III – STATEMENTS AND SIGNATURE

I fully understand that the information I am providing is covered by all the provisions, terms and conditions that govern the relationship of the Account Holder with the Bank, which determine the ways in which the Bank may use and notify the information I provide.

I understand that the information contained in the present form and the information that concerns the Account Holder and each Reportable Account may be given to the Greek tax authorities, which may then send the above to the tax authorities of another country/jurisdiction or other countries/jurisdictions of which the Account Holder is a tax resident by virtue of inter-state agreements for the exchange of information regarding financial accounts.

I confirm that I am an Account Holder (or that I am authorised to place my signature on behalf of the Account Holder) in connection with the account or accounts encompassed in the present form. I am aware of the definitions given in detail in the Definitions / Terminology form that I have been given and which is also available at the Bank's website.

I state that the information given in the present statement is, as far as I can know and believe, full and accurate.

I undertake to notify the Bank within 30 days of any change in circumstances that impacts the tax residence status of the person stated in Part I of the present form or that results in rendering inaccurate and/or incomplete the information contained herein, and to submit to the Bank a self-certification form updated as appropriate within the same term, i.e. within 30 days from such a change in circumstances.

Signature: _____
Date: _____
Name and Surname: _____
Capacity: _____

[Signature Ratification by a Public or
Municipal Authority]

Note: If you are not the Account Holder, please state under what capacity you are signing the form. If you are signing the present form by virtue of a power of attorney, please attach a ratified copy of the power of attorney.