# Attestation

This attestation requests the application at source of the withholding tax exemption for dividends paid by Ageas NV/SA under Article 10,(3),(b) of the Belgium – United Kingdom Double taxation Convention of 1 June 1987 (the "**Tax Treaty**").

**Identification of the issuer of the income:**

– Full name and legal form: Ageas SA/NV

– Registered office: Avenue du Boulevard 21, 1210 Brussels, Belgium

– Enterprise number: 0451.406.524

– ISIN code: BE0974264930

**Description of the income:**

– Number and form of the Ageas SA/NV shares in relation to which the dividend withholding tax exemption is being claimed:……………………………………………………(hereinafter the "**Shares**").

– Dividend pay date: 07/06/2024

– Coupon number: 16…………………………………………………………………………

– Number of coupons:………………………………………………………………………..

– Net dividend per coupon:…………………………………………………………………

– Total net dividend:……………………………………………………………………....

The dividends as described above, to which this attestation relates, are hereinafter referred to as the **"Dividends"**.

**The undersigned, acting on behalf of:**

– Full name and legal form: ………………………………………………………………..….

– Registered office or seat of management: …………………………………………………...

– Tax identification number (TIN) , if applicable: ………………………………………………

Hereinafter the "**Pension Fund**";

**Confirms, with respect to the application of the withholding tax exemption under Article 10,(3),(b) of the Tax Treaty, that:**

– the Pension Fund is entitled to claim the withholding tax exemption laid down in Article 10,(3),(b) of the Tax Treaty;

–      with regard to the Dividends, the Form 276 Div.-Aut.[1] is attached to the present attestation and has been duly completed; and,

–      on the date the Dividends are attributed or made payable,

       (i)      the Pension Fund qualifies as a "pension scheme" in the meaning of Article 3,(1),(l) of the Tax Treaty; and

       (ii)      the Dividends are not derived from the carrying on of a business by the Pension Fund or through an associated enterprise.

Place and date of signature: at ……………………………………….., on ……./……../………..

Name, capacity and address of the duly authorised representative : .................................................
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……………………………………………………………………………………………………………….

Signature(s):………………………

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[1]    This form can be downloaded from the Ageas SA/NV website or the website of the Federal Public Service Finance of Belgium (https://eservices.minfin.fgov.be/).