



Important Notice
The Depository Trust Company

B #:	20094-24
Date:	May 6, 2024
To:	All Participants
Category:	Tax Relief, Distributions
From:	International Services
Attention:	Operations, Reorg & Dividend Managers, Partners & Cashiers
Subject:	<u>Tax Relief</u> – Country: FRANCE <u>Security:</u> BNP PARIBAS 144A <u>CUSIP:</u> 05565A103 <u>Record Date:</u> 05/20/2024 <u>Payable Date:</u> 06/24/2024 <u>CA Web Cut-Off:</u> 05/28/2024 8:00 P.M. ET

Participants can use DTC’s Corporate Actions Web (CA Web) service to certify all or a portion of their position entitled to the applicable withholding tax rate. Participants are urged to consult TaxInfo respectively before certifying their instructions over the CA Web.

Important: Prior to certifying tax withholding instructions, participants are urged to read, understand and comply with the information in the Legal Conditions category found on TaxInfo on the CA Web.

Questions regarding this Important Notice may be directed to Goal Global Recoveries Inc. (212) 248 - 9130.

Important Legal Information: *The Depository Trust Company (“DTC”) does not represent or warrant the accuracy, adequacy, timeliness, completeness or fitness for any particular purpose of the information contained in this communication, which is based in part on information obtained from third parties and not independently verified by DTC and which is provided as is. The information contained in this communication is not intended to be a substitute for obtaining tax advice from an appropriate professional advisor. In providing this communication, DTC shall not be liable for (1) any loss resulting directly or indirectly from mistakes, errors, omissions, interruptions, delays or defects in such communication, unless caused directly by gross negligence or willful misconduct on the part of DTC, and (2) any special, consequential, exemplary, incidental or punitive damages. To ensure compliance with Internal Revenue Service Circular 230, you are hereby notified that: (a) any discussion of federal tax issues contained or referred to herein is not intended or written to be used, and cannot be used, for the purpose of avoiding penalties that may be imposed under the Internal Revenue Code; and (b) as a matter of policy, DTC does not provide tax, legal or accounting advice and accordingly, you should consult your own tax, legal and accounting advisor before engaging in any transaction.*

DTCC offers enhanced access to all important notices via a Web-based subscription service. The notification system leverages RSS Newsfeeds, providing significant benefits including real-time updates and customizable delivery. To learn more and to set up your own DTCC RSS alerts, visit http://www.dtcc.com/subscription_form.php.

JPMorgan Chase, as DR depository gives notice with respect to an upcoming cash dividend payment for **BNP Paribas 144A**. DR holders of **BNP Paribas 144A** as at DR Record Date are eligible to receive the dividend payment and may be entitled to a reduced rate of withholding tax as described in the below notice.

JPMorgan Chase has appointed Goal Global Recoveries Inc. (as tax agent) to support holders of the DR by providing assistance in obtaining tax relief services.

Participants are able to certify all or a percentage of their total position in accordance with the relevant withholding tax rate through the DTC Corporate Actions Web (“CA Web”). The CA Web election also requires a submission via ADRoit. This will enable entitlement amounts to be paid through DTC. As such eligible holders will have the possibility to receive their full treaty entitlements on DR pay date. Holders not qualifying for a reduced or exempt tax rate through CA Web will receive the dividend payment net of the default French statutory withholding tax rate of 25%. Eligible holders will have the opportunity to make a reclaim utilizing the standard long form process.

DIVIDEND EVENT DETAILS	
NAME OF ISSUER	BNP PARIBAS 144A
COUNTRY OF ISSUANCE	FRANCE
DR PROGRAM TYPE	SPONSORED
DEPOSITARY	JPMORGAN CHASE
CUSIP	05565A103
UNDERLYING ISIN	FR0000131104
RATIO (DR: ORD)	1:1
DR RECORD DATE	20 MAY 2024
DR PAYMENT DATE	24 JUNE 2024
ORD PAYMENT DATE	23 MAY 2024
DR GROSS DIVIDEND RATE	2.49113 USD (APPROXIMATE)
ORD GROSS DIVIDEND RATE	EUR 4.60
STATUTORY WITHHOLDING TAX RATE	25%
METHODS OF RECLAIM FILING AVAILABLE	RELIEF AT SOURCE LONG FORM RECLAIM

RELIEF AT SOURCE	
CA WEB OPENS	21 MAY 2024 - 6:00 AM (EST)
CA WEB DEADLINE	28 MAY 2024 - 8:00 PM (EST)
GOAL ADRoit OPENS	21 MAY 2024 - 6:00 AM (EST)
GOAL ADRoit DEADLINE	28 MAY 2024 - 8:00 PM (EST)
LONG FORM RECLAIMS	
GOAL ADRoit OPENS FOR LONG FORM RECLAIM	29 MAY 2024 - 9:00 AM (EST)
GOAL ADRoit DEADLINE FOR LONG FORM RECLAIM	30 SEPTEMBER 2025 – 5:00 PM (EST)

FEES AND PAYMENT METHOD					
FILING METHOD	PAYMENT METHOD	SHARE MINIMUM	CUSTODIAL FEE	TAX RELIEF FEE	MINIMUM FEE
RELIEF AT SOURCE	DTC	N/A	0.00	UP TO \$0.012/DR	\$0.00
LONG FORM RECLAIM	CHECK OR ACH	N/A	35 EUR	UP TO \$0.012/DR	\$25.00/BENEFICIAL OWNER

DOCUMENTATION SUBMISSION DEADLINES

RELIEF AT SOURCE	<u>CA WEB INSTRUCTIONS DEADLINE:</u> 28 MAY 2024; 8:00 P.M. ET
	<u>DOCUMENTATION DEADLINE AT GOAL</u> 21 JUNE 2024; 5:00 P.M. ET
LONG FORM RECLAIM	30 SEPTEMBER 2025 RECLAIMS RECEIVED POST DEADLINE CANNOT BE ASSURED AND MAY BE SUBJECT TO A 1,000.00 EUR PER BENEFICIARY CUSTODIAL FEE REGARDLESS OF SUCCESS

Agreements, Fees, Representations and Indemnification from Participants and Beneficial Owners

We hereby agree that this tax relief assistance service is wholly voluntary and discretionary and outside the terms and conditions of any applicable deposit agreement. JPMorgan Chase undertakes no duty or obligation to provide this service, and may reject or decline any or all proposed electing participants or holders in its sole discretion. We hereby accept and agree to pay the fees of JPMorgan Chase of up to \$0.012 per Depositary Receipt for Relief at Source, or up to \$0.012 per Depositary Receipt for Long Form (with a minimum of \$25), and any other charges, fees or expenses payable by or due to JPMorgan Chase or its agents, including any custodian, in connection with the tax reclaim process, or to tax authorities or regulators (which fees, charges or expenses may be deducted from the dividend or any other distribution or by billing or otherwise in JPMorgan Chase's discretion). We hereby agree that any such fees, charges or expenses may be due and payable whether or not a successful reduction in rate or reclamation is obtained. We hereby acknowledge that fees paid to JPMorgan Chase may be shared with its agents and affiliates. We hereby confirm that we have the applicable Forms on file and agree to obtain and retain all underlying documentation required to support the tax relief benefits, and to provide such documentation to you and/or the French Tax Authorities upon your or the French Tax Authorities request.

We hereby agree that in addition to statutory and documentation requirements and the deduction of fees, tax relief benefits will be subject to review and approval, and potential audits by the applicable custodian and the applicable tax regulators, and that JPMorgan Chase is not providing any legal, tax, accounting or other professional advice on these matters and has expressly disclaimed any liability whatsoever for any loss howsoever arising from or in reliance hereto. Participants and/or investors should seek advice based upon their own particular circumstances from an independent tax advisor.

We certify that to the best of our knowledge each of the beneficial owners identified are eligible for the preferential rates as stated and we declare that we have performed all the necessary due diligence to satisfy ourselves as to the accuracy of the information submitted to us by these beneficial owners.

We will be fully liable for any and all claims, penalties and/or interest, including without limitation, any foreign exchange fluctuations associated therewith. JPMorgan Chase shall not be liable for the failure to secure any tax relief. We expressly agree that JPMorgan Chase and its agents or affiliates shall not have any liability for, and we shall indemnify, defend and hold each of JPMorgan Chase and its agents and affiliates harmless from and against, any and all loss, liability, damage, judgement, settlement, fine, penalty, demand, claim, cost or expense (including without limitation fees and expenses of defending itself or enforcing this agreement) arising out of or in connection herewith.

PLEASE NOTE:

- THE STATUTORY RATE OF 12.8% IS OFFERED FOR THIS EVENT (SEE ELIGIBILITY MATRIX BELOW)
- U.S. MUTUAL FUNDS ELECTING AT THE FAVORABLE RATE MUST PROVIDE A COPY OF THEIR 8802 FROM THE SAME TAX YEAR AS THE DIVIDEND PAYMENT
- ALL 6166s SUBMITTED MUST BE FROM THE SAME TAX YEAR AS THE DIVIDEND PAYMENT
- ALL IRA 6166 FORMS MUST REFER TO 401(a), 401(b) OR 457 TO BE ELIGIBLE FOR RELIEF AT SOURCE OR LONG FORM

ELIGIBILITY MATRIX – RELIEF AT SOURCE

RATE DESCRIPTION	RECLAIM RATE	ELIGIBLE RESIDENTS	DOCUMENTATION REQUIRED
UNFAVORABLE 25%	0%	NON-TREATY COUNTRIES AND ENTITIES NOT LISTED AS FAVORABLE OR EXEMPT BELOW	1. N/A
FAVORABLE 15%	10%	U.S. CORPORATIONS*	ADROIT SUBMISSION ONLY (NO DOCUMENTATION REQUIRED)
		U.S. PENSION FUNDS (UNDER SECTIONS 401(a), 401(b), 403(b), & 457 ONLY) U.S. NOT-FOR-PROFIT ORGANIZATIONS (UNDER SECTION 501(c)(3) ONLY) U.S. IRAs (UNDER SECTIONS 401(a), 401(b) & 457; EXCLUDING ROTH & ROLLOVER) U.S. GOVERNMENT ENTITIES	1. APPENDIX B.1 2. APPENDIX B.2 3. APPENDIX C1 OR C2 4. IRS FORM 6166 (SAME TAX YEAR OF DIV. PAYMENT) 5. COVER LETTER
		U.S. REGULATED INVESTMENT COMPANIES (RICs) REAL ESTATE INVESTMENT TRUSTS (REITs) REAL ESTATE MORTGAGE INVESTMENT CONDUITS (REMICs)	1. APPENDIX B.1 2. APPENDIX B.2 3. APPENDIX C1 OR C2 4. IRS FORM 6166 (SAME TAX YEAR OF DIV. PAYMENT) 5. IRS FORM 8802 (SAME TAX YEAR OF DIV. PAYMENT) 6. COVER LETTER
		CANADIAN CORPORATIONS	1. APPENDIX B.1 2. APPENDIX B.2 3. APPENDIX D1 OR D2 4. 5000 – EN FORM 5. COVER LETTER
REDUCED STATUTORY RATE 12.8%	12.2%	U.S. INDIVIDUALS*	ADROIT SUBMISSION ONLY (NO DOCUMENTATION REQUIRED)
		NON-RESIDENT INDIVIDUALS (EXCLUDING U.S.)	1. APPENDIX B.1 2. APPENDIX B.2 3. APPENDIX D2 4. CERTIFICATE OF RESIDENCE (SAME TAX YEAR OF DIV. PAYMENT) 5. COVER LETTER
EXEMPT 0%	25%	CANADIAN PENSIONS	1. APPENDIX B.1 2. APPENDIX B.3 3. APPENDIX D1 OR D2 4. APPENDIX E1 OR E2 5. 5000 – EN FORM 6. COVER LETTER
		FOREIGN QUALIFYING COLLECTIVE INVESTMENT VEHICLES (INCLUDING UCITS)	7. FORM RPPM (ANNEX 2 OR 3)

*An IRS 6166 form is not required for U.S. Individuals and U.S. Corporations; however, the French Tax Authorities (FTA) reserve the right to request one. Furthermore, although a Cover Letter is not required for either U.S. Individuals or U.S. Corporations, copies will still be generated to confirm the list of Beneficial Owners submitted. Please note that in order to avoid a chargeback from the FTA, the tax year on the 6166 supplied should match the year of the ordinary dividend payment (and should be an original version).

ELIGIBILITY MATRIX – LONG FORM RECLAIM

RATE DESCRIPTION	RECLAIM RATE	ELIGIBLE RESIDENTS	DOCUMENTATION REQUIRED
UNFAVORABLE 25%	0%	NON-TREATY COUNTRIES AND ENTITIES NOT LISTED AS FAVORABLE OR EXEMPT BELOW	1. N/A
FAVORABLE 15%	10%	U.S. CORPORATIONS*	<ol style="list-style-type: none"> APPENDIX B.1 APPENDIX B.2 APPENDIX C1 OR C2 IRS FORM 6166 (SAME TAX YEAR OF DIV. PAYMENT) LETTER OF AUTHORIZATION POWER OF ATTORNEY 5000 – EN FORM 5001 – EN FORM COVER LETTER CERTIFICATE OF DIVIDEND PAYMENT
		U.S. PENSION FUNDS (UNDER SECTIONS 401(a), 401(b), 403(b), & 457 ONLY) U.S. NOT-FOR-PROFIT ORGANIZATIONS (UNDER SECTION 501(c)(3) ONLY) U.S. IRAs (UNDER SECTIONS 401(a), 401(b) & 457; EXCLUDING ROTH & ROLLOVER) U.S. GOVERNMENT ENTITIES	<ol style="list-style-type: none"> APPENDIX B.1 APPENDIX B.2 APPENDIX C1 OR C2 IRS FORM 6166 (SAME TAX YEAR OF DIV. PAYMENT) LETTER OF AUTHORIZATION POWER OF ATTORNEY 5000 – EN FORM 5001 – EN FORM COVER LETTER CERTIFICATE OF DIVIDEND PAYMENT
		U.S. REGULATED INVESTMENT COMPANIES (RICs) REAL ESTATE INVESTMENT TRUSTS (REITs) REAL ESTATE MORTGAGE INVESTMENT CONDUITS (REMICs)	<ol style="list-style-type: none"> APPENDIX B.1 APPENDIX B.2 APPENDIX C1 OR C2 IRS FORM 6166 (SAME TAX YEAR OF DIV. PAYMENT) IRS FORM 8802 (SAME TAX YEAR OF DIV. PAYMENT) LETTER OF AUTHORIZATION POWER OF ATTORNEY 5000 – EN FORM 5001 – EN FORM COVER LETTER CERTIFICATE OF DIVIDEND PAYMENT
		CANADIAN CORPORATIONS	<ol style="list-style-type: none"> APPENDIX B.1 APPENDIX B.2 APPENDIX D1 OR D2 LETTER OF AUTHORIZATION POWER OF ATTORNEY 5000 – EN FORM 5001 – EN FORM COVER LETTER CERTIFICATE OF DIVIDEND PAYMENT
REDUCED STATUTORY RATE 12.8%	12.2%	U.S. INDIVIDUALS*	<ol style="list-style-type: none"> APPENDIX B.1 APPENDIX B.2 APPENDIX C2 IRS FORM 6166 (SAME TAX YEAR OF DIV. PAYMENT) LETTER OF AUTHORIZATION POWER OF ATTORNEY 5000 – EN FORM 5001 – EN FORM COVER LETTER CERTIFICATE OF DIVIDEND PAYMENT

		NON-RESIDENT INDIVIDUALS (EXCLUDING U.S.)	<ol style="list-style-type: none"> 1. APPENDIX B.1 2. APPENDIX B.2 3. APPENDIX D2 4. LETTER OF AUTHORIZATION 5. POWER OF ATTORNEY 6. 5000 – EN FORM 7. 5001 – EN FORM 8. COVER LETTER 9. CERTIFICATE OF DIVIDEND PAYMENT
EXEMPT 0%	25%	CANADIAN PENSIONS	<ol style="list-style-type: none"> 1. APPENDIX B.1 2. APPENDIX B.3 3. APPENDIX D1 OR D2 4. APPENDIX E1 OR E2 5. LETTER OF AUTHORIZATION 6. POWER OF ATTORNEY 7. 5000 – EN FORM 8. 5001 – EN FORM 9. COVER LETTER 10. CERTIFICATE OF DIVIDEND PAYMENT
		FOREIGN QUALIFYING COLLECTIVE INVESTMENT VEHICLES (INCLUDING UCITS)	<ol style="list-style-type: none"> 11. FORM RPPM (ANNEX 2 OR 3)
<p>*An IRS 6166 form is not required for U.S. individuals and corporations; however, the FTA reserve the right to request one. Please note that in order to avoid a chargeback from the FTA, the tax year on the 6166 supplied should match the year of the ordinary dividend payment (and should be an original version).</p>			

TAX DOCUMENTATION REQUIREMENTS FOR RELIEF AT SOURCE & LONG FORM RECLAIM

DOCUMENT REQUIRED	PURPOSE OF DOCUMENT	SIGNATURES	DOCUMENT GENERATION
APPENDIX B.1	- DTC Participant Information	N/A	Generated by the Goal ADRoit system
APPENDIX B.2	- Summary of all entity types elected	N/A	Generated by the Goal ADRoit system
APPENDIX B.3	- Summary of all Canadian pensions elected	N/A	Generated by the Goal ADRoit system
APPENDIX C1 OR C2 (ANNEX III)	- Signature and stamp (medallion or other) of the DTC participant - Appendix C1 preferred	DTCC Participant	Generated by the Goal ADRoit system
APPENDIX D1 OR D2 (ANNEX IV)	- Signature and stamp (medallion or other) of the DTC Participant - Appendix D1 preferred	DTCC Participant	Generated by the Goal ADRoit system
APPENDIX E1 OR E2 (ANNEX I OR II)	- An attestation must be filled for each beneficiary - Must be certified by the Canadian Revenue Agency - Appendix E1 preferred - May be signed by legal representative with POA	Beneficial Owner	Generated by the Goal ADRoit system
LETTER OF AUTHORIZATION	- Authorization enabling Goal and Depository Bank to apply for a long form reclaim on behalf of the Beneficial Owner	Beneficial Owner	Goal ADRoit system
POWER OF ATTORNEY (POA)	- Power of Attorney from the Beneficial Owner to the DTCC Participant	Beneficial Owner	N/A
5000-EN FORM	- Submit the "FOR USE BY THE FRENCH TAX AUTHORITY" version only; indicated in upper left-hand corner of the form - Section III Date, signature & stamp (medallion or other) of the DTC Participant - Section IV To be certified by local tax office: https://www.impots.gouv.fr/portail/files/formulaires/5000-sd/2017/5000-sd_1874.pdf	DTCC Participant (if valid POA is in place)	Goal ADRoit system
5001-EN FORM	- Calculation of withholding tax on dividends form (attachment to Form 5000)	DTCC Participant (if valid POA is in place)	Goal ADRoit system
IRS FORM 6166	- Issued by the Internal revenue service, stating the name and tax payer identification number of the beneficial owner https://www.irs.gov/individuals/internationaltaxpayers/form-6166-certification-of-u-s-tax-residency	N/A	To be obtained from the Internal Revenue Service (IRS)
IRS FORM 8802	- Application for United States residency certification	N/A	To be obtained from the Internal Revenue Service (IRS)
CERTIFICATE OF DIVIDEND PAYMENT	- Document certifying that the dividend was paid to the Beneficial Owner less withholding tax	DTCC Participant	N/A
COVER LETTER	- Listing of all beneficial owners elected	N/A	Generated by the Goal ADRoit system
CERTIFICATE OF RESIDENCE (COR)	- Confirmation of the residency of the Beneficial Owner domiciled within a treaty country. This must be signed and bear the stamp or seal of the local tax authority	Beneficial Owner's local tax authority	Beneficial Owner's local tax authority
ANNEX 2 – FORM RPPM (FR VERSION)	- Application for exemption from withholding tax on distributed income paid to foreign qualifying CIVs, including foreign UCITS (French version)	Beneficial Owner or Legal Representative	N/A
ANNEX 3 – FORM RPPM (EN VERSION)	- Application for exemption from withholding tax on distributed income paid to foreign qualifying CIVs, including foreign UCITS (English version)	Beneficial Owner or Legal Representative	N/A

ADRoit by Goal Global Recoveries Inc.



JPMorgan Chase offers the ADRoit system as a secure platform for the submission of the beneficial owner data and the creation of the requisite documentation.

The system will automatically generate the necessary documentation which the participant can easily access, complete, sign and submit to JPMorgan Chase/Goal Global Recoveries Inc. The system also contains a bulk upload feature which allows for multiple relief at source events to be submitted within a single file.

A one-time registration process is required in order to use ADRoit. For registration purposes **only** please contact adroitregistration@goalgroup.com. For all other ADR related enquiries please contact adroit@goalgroup.com or call Goal Global Recoveries Inc. on +1 (212) 248- 9130

GENERAL FREQUENTLY ASKED QUESTIONS (FAQs)

How long do beneficial owners have to file for reclaim on this dividend?	Generally, two years from the end of the year in which the ordinary dividend was paid, however it may depend on the residency of the beneficial owner.
Is there any way to reclaim the funds I was charged back for?	Yes. The standard long form process. Please refer to the depository contact details section of this notice for assistance.
Will Goal accept claims filed directly to them by beneficial owners?	Goal only accepts claims filed by the DTC participant who was holding the securities through DTC and only to the extent that DTC has reported these holdings to us as valid record date holdings. Beneficial owners are required to file their claims through the custody chain to the DTC participant of record. All claims not received directly from the DTC participant will be returned to the beneficial owner.
Where should the physical documentation be sent	All original documentation should be sent to the New York office of Goal Global Recoveries Inc. at 5 Hanover Square, Suite 2300, New York NY 10004, U.S.A. The documentation must be received by the deadline dates as specified at the beginning of this notice. For the avoidance of documentation being lost in transit we strongly recommend that the documents are sent via a secure method such as FedEx, UPS, DHL (for example) and that the tracking number of the package is recorded.

RELIEF AT SOURCE FAQs

Does the IRS 6166 form have to be for the tax year in which the dividend is paid out and must it be original?	It is highly recommended that the tax year on the 6166 supplied matches the year of the ordinary dividend payment and that the 6166 supplied is an original. If you choose to submit outdated or copies of 6166s, it is recommended that you request a more current one from the IRS at the time the election is made and submit it to the French custodian upon receipt to avoid a potential chargeback.
What happens if I do not send in the documentation and/or submit a file whose share position totals more than my CA Web elections?	This will result in a chargeback for the number of shares not supported by the documentation. The favorable or exempt shares elected will be adjusted to your unfavorable position and result in a debit to your DTC participant account. Submitting share amounts exceeding your CA Web elections may result in a chargeback of the total election.
Why are Forms 8802 being requested for U.S. Regulated Investment Companies (RICs), Real Estate Investment Trusts (REITs) and Real Estate Mortgage Investment Conduits (REMICS)?	The IRS 6166 form does not differentiate between corporations and Regulated Investment Companies (RICs), Real Estate Investment Trusts (REITs) and Real Estate Mortgage Investment Conduits (REMICS). In order for the French Tax Authorities to validate entities, these forms are being requested.
Are Canadian mutual funds eligible for reclaim through the relief at source process?	No. Only through the standard long form process.
Are partnerships/LLCs, or U.S. trust accounts eligible for reclaim the relief at source process?	No. Only through the standard long form process.
Why would the French Tax Authorities request an IRS 6166 form for individuals or corporations if it is not required?	If they have any doubts regarding the status of the beneficial owner, they are entitled to validate their suspicion by requesting the 6166.

How long does it take to receive payment with the relief at source process?	On DR pay date.
What happens if I do not send in the documentation and/or submit a file whose share position totals more than my CA Web elections?	This will result in a chargeback for the number of shares not supported by the documentation. The favorable or exempt shares elected will be adjusted to your unfavorable position and result in a debit to your DTC participant account. Submitting share amounts exceeding your CA Web elections will result in a chargeback of the total election.
What if I fail to provide a COR or a Certified form 5000 to support elections for the reduced statutory rate (12.8%)?	All shares elected at the statutory rate 12.8% will be moved to the unfavorable 25% tax bracket without the required supporting documentation.
LONG FORM RECLAIM FAQs	
How long does it take to receive payment on standard long form process?	Generally, 6 months to 1 year.
Does form 5000 has to be sign, stamped and dated?	Yes, Box III on the form 5000 has to be signed, stamped, dated and contain the place.
When do I have to stamp the Box VI of the form 5000?	Box VI has to be stamped when the 6166/COR is not provided with the claim submission.

CONTACT DETAILS	
Primary Contact	Shing Lee
Secondary Contact	Michelle Nieves
Contact Telephone Number	+1 (212) 248 9130
E-Mail Address	adroit@goalgroup.com
Company Name	Goal Global Recoveries Inc.
Street Address	5 Hanover Square, Suite 2300
City/State/ZIP	New York NY 10004

JPMorgan Chase Warning and Disclaimer:

The undersigned hereby indemnifies J.P. Morgan Chase Bank, N.A. (“J.P. Morgan”), and its affiliates, agents, directors or employees acting in their capacities as such (each an “Indemnified Party”), for any losses or liabilities suffered by an Indemnified Party on account of (i) a failure to secure a refund; or (ii) funds erroneously received by J.P. Morgan or the undersigned or their clients; or (iii) funds claimed as a refund by J.P. Morgan or the undersigned or their clients, including any tax charges, penalties, interests that is or becomes payable by an Indemnified Party in respect thereon, (iv) funds claimed by any statutory or government authority or administrative department or tax authority as charges, penalties, interests or otherwise in respect of a tax reclaim by the undersigned, and agree that such amounts shall be promptly remitted by the undersigned to J. P. Morgan on request. This indemnity shall survive any termination of the letter.

For the avoidance of doubt and notwithstanding the above, J. P. Morgan shall be entitled to require a prompt remittance by the undersigned of any amounts claimed by any statutory or government authority or administrative department or tax authority as charges, penalties, interests or otherwise in respect of a tax reclaim by the undersigned.

J.P. Morgan is not liable for failure to secure a refund or for any charges, penalties, interests or otherwise payable or paid in respect of a tax reclaim by the undersigned. Any funds erroneously claimed or received shall be immediately returned to J.P. Morgan, including any interest, additions to tax or penalties or charges in respect thereon. Nothing herein constitutes tax advice. Please consult your tax advisor prior to engaging our services.

Goal Global Recoveries Inc. Disclaimer:

All information contained in this Important Notice, including, but not limited to tax information, has been compiled in good faith from multiple third-party sources. While all reasonable care has been taken in the compilation and publication of the contents of this Important Notice, the information is subject to change.

Local market conditions and possible advanced deadlines imposed by local agents may cause actual deadlines to frequently vary from statutory deadlines. Therefore, to minimize risk, it is strongly advised that DTC Participants file their claims as soon as possible because the depository agents and/or their agents will not be liable for claims filed less than six months before the specified deadline. In the circumstance where local market rules, whether imposed by a local agent or a Tax Authority, cause any conflict with the information provided in the Important Notice (prior to or after publication), the local market rules shall prevail.

The information contained herein is for informational purposes only and is not intended to be a substitute for obtaining tax, accounting, or financial advice from an appropriate professional advisor.

Appendix B.1 – Format For Broker Details

First Page of Each List: (Bilingual Document French/English)

To be completed by DTC participant:

IDENTITE ET DRESSE COMPLETE ET NUMERO DE MEMBRE DE DTC DE L'ETABLISSEMENT QUI GERE LE COMPTE-TITRES A L'ETRANGER:

Name of DTC participant:

Address of DTC participant:

DTC participant number:

NOM, NUMERO DE TELEPHONE ET NUMERO DE TELECOPIEUR D'UN EMPLOYE DE L'ETABLISSEMENT MEMBRE DE DTC:

Name of DTC participant's Employee:

Telephone number:

Telecopier number:

To be Supplied by DR Bank:

IDENTITE DE LA SOCIETE DISTRIBUTRICE FRANCAISE: **[SECURITY NAME]**

Name of the French company paying the dividend: **[SECURITY NAME]**

NATURE DES TITRES DETENUS: AP= actions au porteur, AN= actions nominatives: **AP**

Type of share held: AP= bearer shares, AN= registered shares: **AP**

RATIO DU NOMBRE D'DRS PAR RAPPORT AU NOMBRE D' ACTIONS: **[DR : ORD]**

The ratio of the DRs to the ordinary shares: **[DR : ORD]**

DATE DE MISE EN PAIEMENT: **[ORD PD]**

Payment date of the dividend: **[ORD PD]**

VALEUR UNITAIRE DU COUPON:

Dividend amount per ordinary share in EURO (100%): **[ORDINARY DIVIDEND AMOUNT]**

Dividend amount per ordinary share after 15% withholding in EURO: **[ORDINARY DIVIDEND AMNT*0.85]**

Amount of the 15% withholding tax per ordinary share in EURO: **[ORDINARY DIVIDEND AMNT*0.15]**

Dividend Amount per ordinary share after 12.8% withholding in **[ORDINARY DIVIDEND AMNT*0.872]**

Amount of the 12.8% withholding tax per ordinary share in **[ORDINARY DIVIDEND AMNT*0.128]**

**Appendix B.2 – Summary Page for all entity types other than Canadian Pension Funds
(One should be submitted for each entity type)**

This summary page template should be used for all entity types with the exception of Canadian Pension Funds.

At the End of Each List, a **summary page** with French and English captions showing:

Name of French Issuer: [SECURITY NAME] Ordinary Payment Date: [ORD PD]

DTC participant Name & Number: _____ Page No. _____

NOMBRE D'ACTIONNAIRES CONCERNES:

Number of beneficial owners listed on this list:

NOMBRE TOTAL DE COUPONS PAYES A CES ACTIONNAIRES:

Total number of ordinary shares listed on this list (ORD shares = DR shares ÷ **RATIO**):

Total number of DRs listed on this list:

MONTANT TOTAL DES DIVIDENDES AVANT ET APRES RETENUE A LA SOURCE:

Total amount of dividends allocable to these beneficial owners at 100% (ORD share amount × (ORDINARY **DIVIDEND AMNT**):

Total amount of withholding tax for these beneficial owners at 15% (Above amount × 15%):

A summary page must be attached to each shareholder category.

Do not use this summary page for Canadian Pension Funds.

Attach to Each List:

- Appendix C (Annex III of the French regulation) declaration for U.S. Entities signed by an officer or partner of the DTC participant, and sealed with DTC participant seal (Medallion or other).

- Appendix D (Annex IV of the French regulation) declaration for Canadian Entities signed by an Officer or partner of the DTC participant, and sealed by DTC participant seal (Medallion or other).

Appendix B.3 – Summary Page for Canadian Pension Funds

This summary page template should be used solely for Canadian Pension Funds.

At the End of your Canadian Pension Fund List, a summary page with French and English captions showing:

Name of French Issuer: [SECURITY NAME] Ordinary Payment Date: [ORD PD]

DTC participant Name & Number: _____ **Page No.** _____

NOMBRE D'ACTIONNAIRES CONCERNES:

Number of beneficial owners listed on this list:

NOMBRE TOTAL DE COUPONS PAYES A CES ACTIONNAIRES:

Total number of ordinary shares listed on this list (ORD shares = DR shares ÷ **RATIO**):

Total number of DRs listed on this list:

MONTANT TOTAL DES DIVIDENDES AVANT ET APRES RETENUE A LA SOURCE:

Total amount of dividends allocable to these beneficial owners at 100% (ORD share amount x (ORDINARY **DIVIDEND AMNT**)):

This summary page must be attached to your Canadian Pension Fund list.

Attach to your Canadian Pension Fund List:

- Appendix D (Annex IV of the French regulation) declaration for Canadian Entities signed by an officer or partner of the DTC participant, and sealed by DTC participant seal (Medallion or other).
- Appendices E1 or E2 (Canadian Pension Fund attestation) should be submitted per beneficial owner, and must be certified by Revenue Canada. The French versions are preferred.

APPENDIX C1: ANNEXE III ATTESTATION

A produire par l'établissement financier qui gère aux Etats-Unis le compte titre du non-résident et qui souhaite être dispensé de la présentation d'un formulaire 5052 RF 1 - EU par bénéficiaire (1)

En vue de la réduction de l'impôt français sur les dividendes, conformément à la convention fiscale du 31 août 1994 entre la France et les Etats-Unis et l'instruction administrative du 14 février 2005 :

Je, soussigné _____

_____ (nom et adresse), agissant en qualité de gestionnaire à l'étranger de comptes titres ouverts au nom de résidents des Etats-Unis, demande le bénéfice de la procédure simplifiée prévue par l'instruction administrative 14 février 2005 pour l'application aux actionnaires qui sont des résidents des Etats-Unis des avantages prévus par la convention en ce qui concerne les dividendes payés par la ou les sociétés française (nom de la ou des sociétés distributrices), le (préciser l'année de mise en paiement).

Je déclare, en ce qui concerne les fonds de pension ou l'organisme charitable, qu'au vu de l'attestation reçue par chacun d'eux et transmise à l'administration fiscale française par l'intermédiaire de l'établissement payeur en France, chacun des organismes mentionnés sur la liste ci-jointe a été créé et fonctionne conformément aux dispositions des sections 401 (a) ou 401 (b) ou 403 (b) ou 457 ou 501 (c) 3 du code fédéral des impôts américain(2) ;

Je déclare, en ce qui concerne les « Regulated Investment Companies », « Real Estate Investment Trusts » et « Real Estate Mortgage Investment Conduits » que chacun des bénéficiaires mentionnés sur la liste ci-jointe remplit les conditions prévues au paragraphe 2 b) iii de l'article 4 de la convention fiscale franco-américaine du 31 août 1994 et que j'ai joint à cette liste _____ (indiquer le nombre) attestations de l'administration fiscale américaine de la qualité de RIC, REIT et REMIC des bénéficiaires/la liste des RIC, REIT et REMIC établie par l'administration fiscale américaine(2) ;

Je déclare, qu'à ma connaissance, chaque actionnaire (autre qu'un fonds de pension, organisme charitable, RIC, REIT ou REMIC) mentionné sur la liste ci-jointe, est un résident des Etats-Unis et que les mentions portées sur cette liste sont exactes (2).

J'atteste qu'à ma connaissance, toutes les personnes ci-dessus satisfont à l'ensemble des conditions requises pour bénéficier des avantages qu'elles demandent (et notamment ne possèdent pas en France un établissement stable ou une base fixe auxquels se rattache effectivement la participation génératrice des dividendes) et je déclare avoir fait toute diligences pour m'assurer de l'exactitude des informations que ces personnes m'ont communiquées à ce sujet ; au cas ou néanmoins je viendrais à apprendre que certaines d'entre elles ont bénéficié d'un avantage indu, je m'engage à en informer spontanément l'administration fiscale française et l'établissement payeur en France ;

Je m'engage par ailleurs solidairement avec cet établissement payeur à restituer au Trésor français, soit spontanément, soit sur demande de l'administration fiscale française, tout montant correspondant à un avantage dont une personne aurait bénéficié indûment.

Fait à _____ le _____

(cachet) (nom et qualité du signataire)

(1) Produire l'imprimé dans la langue de votre choix.

(2) Cocher la case adéquate.

APPENDIX C2: ANNEXE III ATTESTATION

To be produced by financial institutions managing a non-resident's securities account in the United States that wish to be exempted from filing a 5052 RF 1 – EU form for each beneficiary (1)

For the purpose of the reduction of French dividend tax granted under the tax treaty of 31 August 1994 between France and the United States and Administrative Instruction of 14 February 2005:

I, the undersigned, _____
_____ (name and address), acting in my capacity
as the foreign manager of securities accounts held residents of the United States, hereby request that the simplified procedure stipulated in the Administrative Instruction of 14 February 2005 be applied to grant shareholders residing in the United States the advantages stipulated in the tax treaty with regard to dividends paid by the French company(ies)
_____ (name(s) of the company (ies)), in
_____ (year in which dividends are paid).

I hereby declare that each of the pension funds and charitable organisations on this list, according to the certificates received by each and transmitted to the French tax administration through the paying institution in France, was created and operates in compliance with the provisions of Sections 401 (a) or 401 (b) or 403 (b) or 457 or 501 (c) 3 of the American Federal Tax Code(2);

I hereby declare that each of the Regulated Investment Companies, Real Estate Investment Trusts and Real Estate Mortgage Investment Conduits on this list complies with the requirements set out in Paragraph 2 b) iii of Article 4 of the tax treaty of 31 August 1994 between France and the United States and that I have appended to this list _____ (specify the number) certificates from the American tax administration certifying the RIC, REIT or REMIC status of the beneficiaries/the list of RICs, REITs or REMICs drawn up by the American tax administration(2);

I hereby declare that, to the best of my knowledge, each shareholder (other than pension funds, charitable organisation, RICs, REITs or REMICs) on this list is a resident of the United States and that the information provided in this list is accurate(2). I hereby certify that, to the best of my knowledge, all of the persons listed above comply with all of the requirements for obtaining the advantages being requested (and more specifically, they do not have a permanent establishment or fixed base in France to which the equity shares generating the dividends belong) and

I hereby declare that I have undertaken all due diligence to make sure that the information that these persons have given me on this subject is accurate; in the event I should learn that any of them have benefited from an improper advantage,

I hereby undertake to inform the French tax administration and the paying institution of my own accord. I also hereby commit myself jointly and severally with the paying institution to compensating the French Treasury, of my own accord or at the request of the French tax administration, for the amounts corresponding to any advantage improperly obtained.

Done at _____ on _____

(seal) (name and title of signatory)

(1) Fill in the form in the language of your choice.

(2) Check the appropriate box.

APPENDIX D1: ANNEXE IV ATTESTATION

A produire par la personne qui gère à l'étranger le compte titre du non-résident (1)

En vue de la réduction de l'impôt français sur les dividendes, conformément à la convention fiscale entre la France et : _____ :

Je, soussigné _____
_____ (nom et adresse),
agissant en qualité de gestionnaire hors de France de comptes titres ouverts au nom de residents de
_____, demande le bénéfice de la procédure simplifiée prévue par l'instruction
administrative du 14 Février 2005 pour
l'application aux actionnaires qui sont des residents de _____ des avantages prévus par
la convention fiscale précitée en ce qui concerne les dividendes payés par la ou les sociétés françaises

_____ (nom de la ou des sociétés distributrices), le
_____ (préciser l'année de mise en paiement).

Je déclare avoir reçu pour chaque bénéficiaire des dividendes mentionnés sur la liste ci-jointe, l'original des attestations requises dûment complétées et avoir joint à cette liste les attestations/une copie conforme des attestations (2), soit un total de _____ attestations/copies (**indiquer le nombre d'attestations ou de copies d'attestations jointes**)

Au cas où une des personnes mentionnées sur la liste bénéficierait d'un avantage indu, je m'engage solidairement avec l'établissement payeur en France, à restituer les montants en cause au Trésor français, soit spontanément, si je venais à en avoir connaissance, soit sur demande de l'administration fiscale française.

Fait à _____ le _____

(cachet) (nom et qualité du signataire)

(1) Produire l'imprimé dans la langue de votre choix.

(2) Rayer la mention inutile.

APPENDIX D2: ANNEXE IV CERTIFICATION

To be produced by the person in a foreign country Managing a non-resident's securities account (1)

For the purpose of the reduction of French dividend tax granted under the tax treaty between France and

_____ :

I, the undersigned, _____

_____ (name and address),

acting in my capacity as the manager outside of France of securities accounts held by residents of _____, hereby request that the simplified procedure stipulated by the Administrative Instruction of 14 February 2005 be applied to grant shareholders residing in _____ the advantages stipulated in the above mentioned tax treaty with regard to dividends paid by the French company(ies) _____

(name (s) of the company (ies)), in _____ (year in which dividends are paid).

I hereby declare that I have received from each shareholder receiving the dividends on this list, the original certificates required, duly completed, and have appended the certificates/certified copies of the certificates (2), making a total of _____ certificates/copies **(specify the number of certificates or copies of certificates appended)**;

In the event that any of the persons on the list were to receive an advantage improperly, I hereby commit myself jointly and severally with the paying institution in France to compensating the French Treasury for the amounts in question, of my own accord if I discover improperly obtained advantages, or at the request of the French tax administration.

Done _____ at on _____

(seal)

(name and title of signatory)

(1) Fill in the form in the language of your choice.

(2) Check the appropriate box.

APPENDIX E1: ANNEXE I (CANADIAN PENSIONS)

Attestation à produire par les organismes canadiens visés à l'article 29, paragraphe 7, alinéa b

En vue de l'exonération de l'impôt français sur les dividendes de source française payés à ces organismes gérés exclusivement au Canada aux fins d'administrer des fonds ou de verser des prestations en vertu d'un ou de plusieurs régimes de pension ou de retraite et qui y sont exonérés d'impôt, conformément à la convention fiscale entre la France et le Canada du 2 mai 1975 telle que modifiée par l'avenant du 30 novembre 1995.

Le soussigné.....(nom et adresse du fiduciaire / administrateur) certifie que l'organisme.....(dénomination et adresse) a été constitué au Canada le....., est établi au Canada et est

- (a) (a) une fiducie régie par un régime de pension agréé canadien (RPA) ou une société de gestion d'un RPA
dont :

- le numéro d'agrément du régime est; et
- le numéro de compte de la fiducie ou de la société de gestion est, ou

le soussigné..... (nom et adresse du fiduciaire/administrateur de la société de fiducie) certifie que l'organisme(dénomination et adresse) a été constitué au Canada le....., est établi au Canada et est (ou les organismes sont)

- (b) (b) un ou des régimes enregistrés d'épargne-retraite pour lequel la société de fiducie est l'émetteur du ou des régimes , et :

- le numéro d'identification du modèle de régime est; et
- le numéro de compte de la société de fiducie est, ou

- (c) (c) un ou des fonds enregistrés de revenu de retraite pour lequel la société de fiducie est l'émetteur du ou des fonds et :

- le numéro d'identification du modèle de fonds est, et
- le numéro de compte de la société de fiducie est,

qui remplit les conditions prévues à l'alinéa b, i, ii et iii du paragraphe 7 de l'article 29 de la convention fiscale franco-canadienne pour bénéficier de l'exonération de l'impôt français prélevé par voie de retenue à la source sur ces dividendes.

Le soussigné s'engage à restituer au Trésor français, spontanément ou sur demande de l'administration fiscale française, tout montant correspondant à un avantage dont l'organisme aurait bénéficié indûment.

Lieu et date

Signature d'un agent autorisé du fiduciaire, de la société de gestion ou de la société de fiducie

Attestation des autorités fiscales de l'état de résidence du bénéficiaire

Le soussigné atteste que les renseignements fournis par le requérant dans la présente demande sont, à sa connaissance, exacts, à l'exception de la conformité aux conditions prévues à l'alinéa b, ii et iii du paragraphe 7 de l'article 29 de la convention qui n'a pas été vérifiée.

Lieu et date

Signature de la personne autorisée des autorités fiscales Canadiennes

APPENDIX E2 : ANNEX II (CANADIAN PENSIONS)

Statement to be completed by Canadian organizations contemplated in article 29, paragraph 7, subparagraph b

For the exemption of French tax on French dividends paid to these organizations operated in Canada exclusively to administer or provide benefits from one or more pension or retirement plans and that are exempt from tax, in accordance with the France-Canada Tax Convention of May 2, 1975, as amended by the Protocol dated November 30, 1995.

The undersigned..... (name and address of trustee/administrator) hereby certifies that the organization(name and address) constituted in Canada the....., established in Canada and is:

(a) a trust governed by a Canadian registered pension plan (RPP) or a pension corporation whose

- plan registration number is....., and
- the account number of the trust or pension corporation is.....; or

the undersigned..... (name and address of trustee/administrator of the corporate trustee) hereby certifies that the organization(name and address) constituted in Canada the , established in Canada and is (or the organizations are)

(b) a registered retirement savings plan(s) for which the corporate trustee is the issuer of the plan(s) and

- the specimen plan identification number is....., and
- the account number of the corporate trustee is.....; or

(c) a registered retirement income fund(s) for which the corporate trustee is the issuer of the fund(s) and

- the specimen fund identification number is , and
- the account number of the corporate trustee is

which satisfies the conditions set out in subparagraph b, i, ii, and iii, of paragraph 7 of article 29 of the France- Canada Tax Convention in order to be exempted from French tax levied by withholding tax dividends.

The undersigned agrees to restore to the French treasury, spontaneously or at the request of the French tax authorities, any amount corresponding to a benefit the organization has unduly received.

Location and date

Signature of an officer authorized by the trustee, the pension corporation, or the corporate trustee

Statement of the tax authorities of the recipient's receiving State

The undersigned hereby certifies that the information provided by the applicant in this application is, to the best of his/her knowledge, accurate, except the compliance with the conditions set out in subparagraph b, ii an iii of paragraph 7 of article 29 which was not verified.

Location and date

Signature of the person authorized by the Canadian tax authorities