



B #:	0821-14
Date:	April 23, 2014
To:	All Participants
Category:	Dividends
From:	International Services
Attention:	Operations, Reorg & Dividend Managers, Partners & Cashiers
Subject:	<u>Tax Relief</u> – Country: Finland STORA ENSO OYJ CUSIP: 86210M106 <u>Record Date: 04/28/2014 Payable Date: TBA</u> <u>EDS Cut-Off: 05/06/2014 8:00 P.M</u> Documentation Receipt Deadline 5/6/2014 5:00 P.M. EST

Participants can use DTC's Elective Dividend System (EDS) function over the Participant Terminal System (PTS) or Tax Relief option on the Participant Browser System (PBS) web site to certify all or a portion of their position entitled to the applicable withholding tax rate. Participants are urged to consult the PTS or PBS function TAXI or TaxInfo respectively before certifying their elections over PTS or PBS.

Important: Prior to certifying tax withholding elections, participants are urged to read, understand and comply with the information in the Legal Conditions category found on TAXI or TaxInfo in PTS or PBS respectively.

Questions regarding this Important Notice may be directed to GlobeTax 212-747-9100.

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.

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Non-Confidential

STORA ENSO OYJ has announced a cash dividend. Deutsche Bank Trust Company Americas acts as the sole Depository for the company's American Depository Receipt ("ADR") program.

Using DTC's Elective Dividend System ("EDS") function over the Participant Terminal System ("PTS"), Participants may certify all or a portion of their position entitled to the applicable withholding tax rates. Use of EDS will permit entitlement amounts to be paid through DTC.

DIVIDEND EVENT DETAILS

COUNTRY OF ISSUANCE	FINLAND
ISSUE	STORA ENSO OYJ
CUSIP#	86210M106
DEPOSITARY	DEUTSCHE BANK TRUST COMPANY AMERICAS
ADR RECORD DATE	April 28, 2014
ADR PAY DATE	TBA
ADR GROSS DIVIDEND RATE ON PAY DATE	TBA
ORD GROSS DIVIDEND RATE ON PAY DATE	EUR 0.30
RATIO	1 ORD : 1 ADR
STATUTORY WHT RATE	30%

CHARGES & DEADLINES

FILING METHOD	BATCH	PAYMENT METHOD	DEPOSITARY SERVICE CHARGE	MINIMUM SERVICE CHARGE PER BENEFICIAL OWNER	DOCUMENTATION RECEIPT DEADLINE (ALL TIMES EST)
RELIEF-AT-SOURCE (FAVORABLE)	PAYMENT ON PAY DATE	VIA DTC	\$0.005 per ADR	\$0	May 6, 2014; 5:00 P.M.
RELIEF-AT-SOURCE (EXEMPT)	PAYMENT ON PAY DATE	VIA DTC	\$0.0075 per ADR	\$0	May 6, 2014; 5:00 P.M.
QUICK REFUND	POST-EDS PROCESS; ONGOING	CHECK	\$0.01 per ADR	\$25.00	October 31, 2014; 5:00 P.M.
*LONG-FORM	POST-EDS PROCESS; ONGOING	CHECK	\$0.01 per ADR	*\$25.00	October 17, 2019

*There is a EUR 50.00 custodial fee per claim submitted, which is subtracted from the reclaim amount, before funds are converted to USD.

RELIEF-AT-SOURCE ("EDS") ELIGIBILITY MATRIX

RATE DESCRIPTION	RECLAIM RATE	ELIGIBLE RESIDENTS	DOCUMENTATION REQUIRED
UNFAVORABLE 30%	0%	NON-TREATY COUNTRIES	NONE
FAVORABLE 15%	15%	U.S. RESIDENT ENTITIES	NONE (SEE NOTE)
EXEMPT 0%	30%	U.S. PENSION FUNDS	1. COVER LETTER 2. IRS FORM 6166 3. VEROH 6160 E 4. VEROH 6203

***NOTE: Participants using the DTC EDS system agree that the following criteria have been met:**

1. The Participant has determined that the beneficial owner of the shares (individual or legal entity) is a resident of the United States who is eligible for the 15% or 0% Finnish withholding tax rate. This is not tax advice. Please consult your tax advisor.
2. The Participant hereby certifies that it will indemnify Deutsche Bank Trust Company Americas, (and its agents) for any liability it may incur as a result of reliance upon information provided by such Participant in connection with an EDS election, a claim for refund, or a failure to provide information requested by the Finnish Tax Authorities as described in item 5 below. Deutsche Bank Trust Company Americas shall not be liable for any failure to secure a refund.
3. The Participant shall be liable for any loss due to foreign exchange fluctuations.
4. The Participant agrees to immediately return to Deutsche Bank Trust Company Americas any funds erroneously received as a result of an improper EDS election or refund claim. In addition, the Participant agrees to pay any interest, additions to tax or penalties thereon.
5. If requested by the Finnish Tax Authorities (directly or indirectly), the Participant agrees to provide Deutsche Bank Trust Company Americas with beneficial ownership information regarding the depositary receipts, such as the names, entire addresses, the countries of residence for tax purposes, tax identification numbers or social security numbers, as well as the number of depositary receipts for which the reduced rate of withholding tax is certified, the rate that is applied, **and any other information that may be reasonably requested.** Such information will be provided within 30 days of the Participant being informed of the request. If requested by the Finnish Tax Authorities (directly or indirectly), the Participant also agrees to provide Deutsche Bank Trust Company Americas with a Certificate of Fiscal Residency (a Form 6166) within 90 days of the Participant being informed of the request. The Finnish Tax Authority reserves the right to request records for the 6 preceding years. Participants who submit claims on behalf of qualified pension funds that elect the 0% withholding rate need to provide this information to Deutsche Bank Trust Company Americas at the time the claim is made.

QUICK REFUND / LONG FORM ELIGIBILITY MATRIX

RATE DESCRIPTION	RECLAIM RATE	ELIGIBLE RESIDENTS	DOCUMENTATION REQUIRED
FAVORABLE 15%	15%	US RESIDENT ENTITIES	<ol style="list-style-type: none"> 1. COVER LETTER 2. IRS FORM 6166 (LONG FORM ONLY) 3. VEROH 6203 (LONG FORM ONLY) 4. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 5. POA(s) (LONG FORM ONLY)
EXEMPT U.S. 0%	30%	U.S. PENSION FUNDS (CLAIMED UNFAVORABLE THROUGH EDS)	<ol style="list-style-type: none"> 1. COVER LETTER 2. IRS FORM 6166 3. VEROH 6160 E 4. VEROH 6203 5. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 6. POA(s) (LONG FORM ONLY)
EXEMPT NON-U.S. 0%	30%	FRANCE, IRELAND, MEXICO, UNITED KINGDOM	<ol style="list-style-type: none"> 1. COVER LETTER 2. VEROH 6203 3. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 4. POA(s) (LONG FORM ONLY)
EXEMPT U.S. 0%	15%	U.S. PENSION FUNDS (CLAIMED FAVORABLE THROUGH EDS)	<ol style="list-style-type: none"> 1. COVER LETTER 2. IRS FORM 6166 3. VEROH 6160 E 4. VEROH 6203 5. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 6. POA(s) (LONG FORM ONLY)
FAVORABLE 5%	25%	ROMANIA	<ol style="list-style-type: none"> 1. COVER LETTER 2. VEROH 6203 3. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 4. POA(s) (LONG FORM ONLY)
FAVORABLE 10%	20%	AUSTRIA, AZERBAIJAN, BULGARIA, CHINA, EGYPT, GEORGIA, INDIA, MOROCCO, SINGAPORE, SWITZERLAND	<ol style="list-style-type: none"> 1. COVER LETTER 2. VEROH 6203 3. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 4. POA(s) (LONG FORM ONLY)
FAVORABLE 12%	18%	RUSSIA	<ol style="list-style-type: none"> 1. COVER LETTER 2. VEROH 6203 3. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 4. POA(s) (LONG FORM ONLY)
FAVORABLE 13%	17%	GREECE	<ol style="list-style-type: none"> 1. COVER LETTER 2. VEROH 6203 3. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 4. POA(s) (LONG FORM ONLY)

FAVORABLE 15%	15%	ARGENTINA, ARMENIA, AUSTRALIA, BARBADOS, BELARUS, BELGIUM, BOSNIA-HERZEGOVINA, CANADA, CROATIA, CYPRUS, CZECH REPUBLIC, DENMARK (INCLUDING FAROE ISLANDS), ESTONIA, GERMANY, HUNGARY, ICELAND, INDIA, INDONESIA, ISRAEL, ITALY, JAPAN, KAZAKHSTAN, KOREA (REPUBLIC OF), KYRGYZSTAN, LATVIA, LITHUANIA, LUXEMBOURG, MACEDONIA, MALAYSIA, MALTA, MOLDOVA, MONTENEGRO, NETHERLANDS, NEW ZEALAND, NORWAY, POLAND, PORTUGAL, SERBIA AND MONTENEGRO, SLOVAKIA, SLOVENIA, SOUTH AFRICA, SPAIN, SRI LANKA, SWEDEN, TAJIKISTAN, TURKEY, UKRAINE, URUGUAY, UZBEKISTAN, VIETNAM, ZAMBIA	<ol style="list-style-type: none"> 1. COVER LETTER 2. VEROH 6203 3. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 4. POA(s) (LONG FORM ONLY)
FAVORABLE 20%	10%	BRAZIL, LIECHTENSTEIN, PAKISTAN, TANZANIA, THAILAND, THE PHILIPPINES, UNITED ARAB EMIRATES	<ol style="list-style-type: none"> 1. COVER LETTER 2. VEROH 6203 3. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 4. POA(s) (LONG FORM ONLY)

DESCRIPTION OF VARIOUS DOCUMENTATION

DOCUMENT NAME	DESCRIPTION	ORIGINAL / COPY	SIGNATURE REQUIREMENT
IRS FORM 6166	Issued by the Internal Revenue Service, stating the name and Taxpayer Identification number of the beneficial owner. The "Tax Year" of the 6166 must refer to the tax year of 2014. For U.S. Pensions the 6166 must certify that the pension plan is qualified under Section 401 (A) and is tax exempt under Section 501 (A).	ORIGINAL	IRS REPRESENTATIVE
COVER LETTER (APPENDIX A)	Cover letter required for all long form claims	ORIGINAL	DTC PARTICIPANT
CERTIFICATION OF DIVIDEND PAYMENT (APPENDIX B)	Must be submitted for each beneficial owner with each long form claim, on participant letterhead	ORIGINAL	DTC PARTICIPANT
VEROH 6160 E	US Pension Affirmation Form	ORIGINAL	DTC PARTICIPANT
VEROH 6203	Application for refund of Finnish withholding tax. This form needs to be certified by the beneficial owner's local tax office for non-U.S entities.	ORIGINAL	DTC PARTICIPANT OR BENEFICIAL OWNER

POWER OF ATTORNEY (APPENDIX C)	<p>If the beneficial owner signs the VEROH 6203, then only 1 POA is required</p> <ul style="list-style-type: none"> • Between DTC participant & depository (DTC participant letterhead) <p>If the DTC participant signs the VEROH 6203 or 6160 E on behalf of the beneficial owner, then 2 POA's are required</p> <ul style="list-style-type: none"> • Between beneficial owner & DTC participant (BO letterhead) • Between DTC participant & depository (DTC participant letterhead) 	<p>COPY</p>	<p>BENEFICIAL OWNER AND/OR DTC PARTICIPANT</p>
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*** THE FINNISH TAX ADMINISTRATION HAS ANNOUNCED THAT INTEREST ON REFUNDS OF TAX WITHHELD AT SOURCE WILL BE APPLIED TO NON-RESIDENT APPLICANTS THAT ARE TAX RESIDENTS OF EU OR EEA COUNTRIES. THEY HAVE ADVISED THAT THEY WILL PROVIDE MORE DETAILED GUIDANCE TO OUTLINE THE IMPACT OF THE COURT RULING AND THE CALCULATION OF INTEREST. PLEASE BE AWARE THAT ADDITIONAL INFORMATION MAY BE REQUIRED FROM UNDERLYING HOLDERS, SUCH AS CORPORATE ACCOUNTING PERIODS.**

CONTACT DETAILS	
PRIMARY CONTACT	MAX RAMOS
DOMESTIC PHONE (U.S.)	1-800-876-0959
DOMESTIC FAX (U.S.)	1-866-888-1120
INTERNATIONAL PHONE	1-212-747-9100
INTERNATIONAL FAX	1-212-747-0029
EMAIL ADDRESS	Finnish_Reclaims@GlobeTax.com
COMPANY	DEUTSCHE BANK TRUST COMPANY AMERICAS / GLOBETAX
STREET ADDRESS	90 BROAD STREET, 16 TH FLOOR
CITY/STATE/ZIP	NEW YORK, NY 10004
ADDITIONAL CONTACTS	APRIL RICHLAND, GINA GIANNOU

ESP

powered by **GLOBETAX**

Deutsche Bank Trust Company Americas offers ESP powered by GlobeTax, which allows for the secure and simplified transfer of beneficial owner level data from the Participant to Deutsche Bank Trust Company Americas and creates applicable documentation on the Participants behalf including the VEROH 6160E and VEROH 6203. These claims should be submitted through the following website:

<https://www.globetaxesp.com/>

Please contact Mr. Max Ramos at 1-800-876-0959 or via email at Max_Ramos@GlobeTax.com if you have any questions about this process.

This system is available for At-Source, Quick Refund, and Long-Form claims.

FREQUENTLY ASKED QUESTIONS (FAQs)

QUESTION	ANSWER
CAN I SUBMIT A TRUST AGREEMENT IN LIEU OF A POA SIGNED BY THE BENEFICIAL OWNER?	YES, BUT A LIMITED POA SIGNED BY THE PARTICIPANT MUST BE ACCOMPANIED BY THE TRUST AGREEMENT.
ARE FORM 6166S WITH IRS CODE RULING 81-100 ACCEPTED?	YES, WITH A TAX DETERMINATION LETTER.
DOES THE BENEFICIARY'S NAME ON THE FORM 6166 NEED TO MATCH THE POA?	YES, THE BENEFICIARY'S NAME ON BOTH DOCUMENTS SHOULD BE IDENTICAL.
HOW LONG DOES IT TAKE FOR LONG-FORM CLAIMS TO BE PAID?	WE ESTIMATE IT TAKES 10 MONTHS FOR LONG-FORM CLAIMS TO BE PAID.
DOES THE LONG-FORM PROCESS HAVE A MINIMUM POSITION REQUIREMENT PER BENEFICIAL OWNER?	NO, THERE IS A MINIMUM FEE OF \$25 PER BENEFICIAL OWNER WHICH MAY BE WAIVED ON AN EXCEPTIONAL BASIS FOR CLIENTS RECLAIMING LESS THAN \$50. IN SUCH INSTANCES A FEE OF 50% OF THE RECLAIMED AMOUNT WILL BE APPLIED.
WHAT HAPPENS IF THE PARTICIPANT DOES NOT MAKE AN EDS ELECTION WITHIN THE SPECIFIED EDS ELECTION WINDOW?	ALL SHARES WILL BE WITHHELD AT THE 30% TAX RATE.
WHAT IS THE STATUTE OF LIMITATIONS FOR FILING FINNISH RECLAIMS?	IT IS 5 YEARS FROM THE END OF THE YEAR IN WHICH THE DIVIDEND PAYS. CLAIMS RECEIVED AFTER OUR SUBMISSION DEADLINE WILL BE FILED ON A BEST EFFORT BASIS.
WHAT HAPPENS IF THE PARTICIPANT MAKES EXEMPT ELECTIONS THROUGH DTC BUT FAILS TO SUPPLY THE REQUIRED DOCUMENTATION TO DEUTSCHE BANK TRUST COMPANY AMERICAS / GLOBE TAX BY THE DEADLINE INDICATED IN THE "CHARGES & DEADLINES" SECTION?	ALL UNSUPPORTED SHARES WILL BE MOVED TO THE 30% UNFAVORABLE RATE CATEGORY. YOU WILL HAVE AN OPPORTUNITY TO FILE THROUGH THE LONG-FORM PROCESS IF THIS TRANSPIRES.
WILL DEUTSCHE BANK TRUST COMPANY AMERICAS ACCEPT CLAIMS FILED DIRECTLY TO THEM BY THE BENEFICIAL OWNERS?	DEUTSCHE BANK TRUST COMPANY AMERICAS 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.
IS THE RELIEF-AT-SOURCE PROCESS FREE OF CHARGE?	NO. THIS TAX RELIEF-AT-SOURCE ASSISTANCE SERVICE IS WHOLLY VOLUNTARY AND DISCRETIONARY AND OUTSIDE THE TERMS AND CONDITIONS OF ANY APPLICABLE DEPOSIT AGREEMENT. FEES WILL BE CHARGED FOR THIS SERVICE OF UP TO \$0.0075 PER AMERICAN DEPOSITARY RECEIPT WITH NO MINIMUM, AND ANY OTHER CHARGES, FEES OR EXPENSES PAYABLE BY OR DUE TO DEUTSCHE BANK TRUST COMPANY AMERICAS OR ITS AGENTS, INCLUDING THE CUSTODIAN OR TO TAX AUTHORITIES OR REGULATORS. FEES PAID TO DEUTSCHE BANK TRUST COMPANY AMERICAS MAY BE SHARED WITH ITS AGENTS.

DUE TO CHANGES IN FINNISH TAX LAW, BY USING THE EDS FUNCTION THE PARTICIPANTS CERTIFY THAT THEY WILL BE ABLE TO PROVIDE ADDITIONAL DOCUMENTATION REQUESTED BY THE FINNISH TAX AUTHORITY WITHIN THE TIMEFRAMES SPECIFIED. FAILURE TO PROVIDE SUCH DOCUMENT WILL HOLD THE PARTICIPANTS LIABLE FOR ANY ADDITIONAL TAX, INTERESTS AND/OR PENALTIES.

DISCLAIMER

All tax information contained in this Important Notice is based on a good faith compilation of information obtained from multiple sources. The information is subject to change. Actual deadlines frequently vary from the statutory deadlines because of local market conditions and advanced deadlines set by local agents. To mitigate risk it is strongly advised that DTC Participants file their claims as soon as possible as the depositary and/or their agents will not be liable for claims filed less than six months before the specified deadline. In the event that local market rules, whether implemented by a local agent or a Tax Authority, conflict with the information provided in the important notice, either prior to or after publication, the local market rules will prevail.

APPENDIX A – COVER LETTER

(DTC Participant’s Letterhead)

Deutsche Bank Trust Company Americas
c/o GlobeTax
90 Broad Street, 16th floor
New York, NY 10004-2205
Attn: Max Ramos

Re: Withholding Certification for STORA ENSO OYJ ; CUSIP# 86210M106

Enclosed please find tax reclamation documents, which we are submitting on behalf of our clients who have had excess tax withheld from dividends paid on Finnish ADRs. We, (DTC Participant Name) holding shares at Cede & Co. under DTC# (DTC PTS Number) hereby state that each beneficial owner cited below held the respective amount of shares on the record date of 28 APR 2014 for the security **STORA ENSO OYJ ; CUSIP# 86210M106**.

Below is the list of beneficial owners and their holdings, which total **[TOTAL NUMBER OF ADRs CITED BELOW]** ADRs. As required the following documents are attached: Finnish claim form, Certification of payment, Certification of Residency and a Power of Attorney for each beneficial owner. **The ratio for STORA ENSO OYJ is 1 ORD : 1 ADR Shares.** The information is as follows:

Name of Beneficiary	Complete Address	Tax ID Number	# ADRs	# ORDS

We authorize the Deutsche Bank Trust Company Americas to present this documentation on the behalf of the beneficial owners listed above. Please contact the undersigned at [Signatory’s Telephone Number] should you have any questions.

Deutsche Bank Trust Company Americas shall not be liable for failure to secure the refund and shall not be liable for any loss due to foreign exchange fluctuation. Any funds erroneously received shall be immediately returned to Deutsche Bank Trust Company Americas plus any interest, additions to tax or penalties imposed thereon. This is not tax advice. Please consult your tax advisor.

[Signature of authorized signatory for DTC Participant]

[NAME AND TITLE OF AUTHORIZED OFFICER FOR DTC PARTICIPANT]

PAYMENT ADDRESS: _____

APPENDIX B – CERTIFICATION OF DIVIDEND PAYMENT
*****THIS DOCUMENT MUST BE PREPARED ON COMPANY LETTERHEAD*****

ALL AMOUNTS MUST BE IN EUROS

(Important – DTC Participants must complete a separate Certificate of Payment for each beneficial owner)

CERTIFICATION OF PAYMENT

[DTC Participant Name] hereby certifies that the following beneficial owner (holding the security **STORA ENSO OYJ** ADRs (CUSIP **86210M106**) was a holder of record on **28 APR 2014**. The beneficial owner was paid the dividend less the [Withheld %] withholding tax at source and is entitled to the [Refund %] tax refund stipulated under the provisions of the “[Residence Country of Beneficial Owner]” – Finland Tax Treaty Convention.

We hereby certify that we have paid the dividend to the beneficial owner of the following securities on TBA.

Agent:	[DTC Participant Name] [DTC Participant Number]
Beneficial Owner:	[Beneficial Owner Name] [B/O Address] [B/O City, State, Zip Code] [B/O Country of Residence]
Security:	STORA ENSO OYJ
Ordinary Pay Date:	15 MAY 2014
Shares held:	[Number of Ordinary Shares Held]
Dividend Rate:	EUR 0.30 per share
Gross Dividend:	[Gross Dividend]
Amount of Tax Withheld (%):	[Amount of Tax Withheld]
Refund Amount Due (Reclaim %):	[Amount of Refund]

Certified By		
Authorized Signature	[Sign Here] _____	Date [Today's Date]
	NAME _____	
	TITLE _____	
	INSTITUTION _____	

APPENDIX C – POWER OF ATTORNEY

*****THIS DOCUMENT MUST BE PREPARED ON COMPANY LETTERHEAD*****

POWER OF ATTORNEY

(Broker’s Letterhead)

Power of Attorney

(Name of Broker), with address in **(City, State, Country)** hereby appoints Deutsche Bank Trust Company Americas / GlobeTax (“Bank”) and/or the Bank’s designated standing proxy(ies) as its true and lawful attorney with full Power of Attorney to do all or any of the following acts with respect to the American Depository Receipts representing shares in **STORA ENSO OYJ** (“Securities”) that the Bank holds in its safe custody on behalf of the Undersigned broker/agent .

- i) To file required forms with competent tax authorities in order to secure any tax privileges and benefits such as tax reduction or tax-exemption at source.
- ii) To receive on behalf of the Undersigned tax repayments made by competent tax authorities as a result of lodging reclaim forms.

The Undersigned also authorizes the Bank and/or the Bank’s designated standing proxy(ies) to submit this power of attorney or a photocopy of it to competent tax authorities.

(The Name of the broker representative)

<Place and Date>
Place and Date

<Signature of broker representative>
Authorized Signature(s)/Title(s)

HAKEMUS SUOMEN LÄHDEVERON PALAUTTAMISEKSI APPLICATION FOR REFUND OF FINNISH WITHHOLDING TAX

HUOM! Osingon osalta tällä lomakkeella haetaan palautusta vasta osingon maksuvuoden jälkeen.

PLEASE NOTE: As far as dividends are concerned, use this form only after the year of payment.

HAKIJA / APPLICANT

Hakijan nimi (jos luonnollinen henkilö, hakijan sukunimi) / Applicant's name (if individual, applicant's family name)		
Luonnolliset henkilöt täyttävät / To be filled in by individuals		
Etunimet / Given names	<input type="checkbox"/> mies / male <input type="checkbox"/> nainen / female	Suomalainen henkilötunnus tai syntymäaika Personal ID issued by Finnish authority or date of birth
Kaikki hakijat täyttävät / To be filled in by all applicants		
Osoite (lähiosoite, postinumero, postiosoite, kaupunki tai kunta, valtio) / Address (street address, postal code, town, city or rural area, state)		
Asuinvaltio / Country of residence	Verotunniste asuinvaltiossa / Tax identification number in country of residence	Sähköpostiosoite / e-mail
Asiamiehen nimi ja osoite (ks. ohjeet) / Representative's name and address (see instructions)		

PANKKIYHTEYS (ks. ohjeet) / BANK ACCOUNT NUMBER AND NAME OF BANK (see instructions)

Tilin numero / Account number IBAN	BIC/SWIFT
Tilin omistajan nimi / Name of the account holder	
Pankin tai luottolaitoksen nimi / Name of the bank or credit institution	Pankin osoite / Address of the bank

TULOJA KOSKEVAT TIEDOT (hakemukseen on liitettävä tuloista ja veroista tosite) INCOME (enclose receipts and documents to show both income and tax)

Hakemus koskee veroa, joka on peritty The application concerns tax on	<input type="checkbox"/> osingosta / dividend	<input type="checkbox"/> palkasta / salary	<input type="checkbox"/> muusta tulosta / other income
Maksajan nimi / The name of the payer	Maksupäivä / Date of payment		
Tulon määrä Gross income €	Perityn veron määrä Amount of the withholding tax €	Palautuksen määrä *) Amount of refund €	Osakkeiden lukumäärä (jos hakemus koskee osinkoja) Number of shares

HAKEMUS / APPLICATION

Allekirjoittanut pyytää, että lähdeveroa palautetaan edellä *) mainittu määrä. Allekirjoittanut vakuuttaa, että tulo ei liity hakijalla Suomessa olevaan kiinteään toimipaikkaan. Allekirjoittanut vakuuttaa, että tulon perusteella ei ole haettu / saatu lähdeveron palautusta suomalaiselta tulon maksajalta. The undersigned asks that the amount *) mentioned above shall be refunded. The undersigned assures that the income does not originate from the applicant's permanent establishment in Finland. The undersigned assures that he has not received/requested any refund from the Finnish payer concerning this income.	
Päiväys / Date	Allekirjoitus / Signature

CERTIFICATE OF FISCAL RESIDENCE

We hereby confirm that the applicant, within the meaning of the Double Taxation Convention, was resident in the country mentioned above on the date when the income was paid.

Date	Signature and stamp of the tax authorities
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AFFIRMATION

Given by a pension fund which is resident of the United States and receives dividend income from Finland

Name of pension fund
Taxpayer Identification Number in the United States
Address in the United States
City, town or post office, state and ZIP code

The pension fund assures that

<ol style="list-style-type: none"> 1) the fund is resident of the United States of America and 2) the fund is the beneficial owner of the dividends and 3) the dividends the pension fund receives from Finland are not derived from the carrying on of a business by the pension fund or through an associated enterprise and 4) more than 50 percent of the fund's beneficiaries, members or participants are individuals resident in the United States or in Finland and 5) the fund is organized under the laws of the United States and 6) the fund is established and maintained in the United States primarily to administer or provide pensions or other similar remuneration, including social security payments, or to earn income for the benefit of one or more such arrangements and 7) the fund is exempt from tax in the United States of America with respect to the activities described in clause 6) and 8) the fund will immediately notify the custodian of the deposited shares in case of the circumstances above ceases to apply. 	
Signature of the pension fund	or Signature of Pension fund's agent or legal representative
Printed name	Printed name
Title / position	Title / position
Date and Place	If you are an agent or a legal representative signing this affirmation, please enclose your power of attorney showing your authorization to act on the pension fund's behalf.