

B #:	0222-15
Date:	March 12, 2015
To:	All Participants
Category:	Dividends
From:	International Services
Attention:	Operations, Reorg & Dividend Managers, Partners & Cashiers
Subject:	<u>Tax Relief</u> – Country: Finland Amer Sports Corporation CUSIP: 023512205
	Record Date: 03/16/2015 Payable Date: TBA
	EDS Cut-Off: 03/17/2015 8:00 PM EST. Documentation Cut-Off: 3/17/2015 5:00 PM 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.

The ADR Depositaries and GlobeTax always endeavor to provide the marketplace with as much time as possible to file At-Source refunds in markets where this type of service is available.

In certain situations, short deadlines imposed by our agents in the local markets necessitates a one day EDS window, most notably in Finland. (Hungary, Norway, and Sweden -The relevant country will be input as necessary)

We continue to work with our local market agents and Issuers to provide the marketplace with the maximum amount of time to make EDS elections.

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.



AMER SPORTS CORPORATION has announced a cash dividend. Deutsche Bank Trust Company Americas acts as the sole Depositary for the company's American Depositary 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 withholding tax rates. Use of EDS will permit entitlement amounts to be paid through DTC. By electing, Participants agree to the Agreements, Representations and Indemnification below.

FDIVIDEND EVENT DETAILS			
COUNTRY OF ISSUANCE	FINLAND		
ISSUE	AMER SPORTS CORPORATION		
CUSIP#	023512205		
DEPOSITARY	DEUTSCHE BANK TRUST COMPANY AMERICAS		
ADR RECORD DATE	March 16, 2015		
ADR PAY DATE	TBA		
ORD GROSS DIVIDEND RATE ON PAY DATE	EUR 0.45		
RATIO	1 ORD : 2 ADR		
STATUTORY WHT RATE	30%		

CHARGES & DEADLINES					
FILING METHOD	ВАТСН	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	March 17, 2015; 5:00 P.M.
RELIEF-AT- SOURCE (EXEMPT)	PAYMENT ON PAY DATE	VIA DTC	\$0.0075 per ADR	\$0	March 17, 2015; 5:00 P.M.
QUICK REFUND	POST-EDS PROCESS; ONGOING	CHECK	\$0.01 per ADR	\$25.00	October 31, 2015; 5:00 P.M.
LONG-FORM	POST-EDS PROCESS; ONGOING	CHECK	\$0.01 per ADR	\$25.00 Tax Relief Fee and up to 50.00 EUR Custodial Fee	October 17, 2020

Agreements, Representations and Indemnification

We hereby agree that this tax reclaim assistance service is wholly voluntary and discretionary and outside the terms and conditions of any applicable deposit agreement. We hereby accept and agree to pay the fees of Deutsche Bank of up to \$0.0075 per Depositary Receipt for Relief at Source, Quick Refund (with a minimum of \$25.00), and standard Long Form tax reclaims (with a minimum of \$25.00), and any other charges, fees or expenses payable by or due to Deutsche Bank or its agents, including the (respective) 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 Deutsche Bank'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 agree that fees paid to Deutsche Bank may be shared with its agents and affiliates.

We hereby agree that in addition to statutory and documentation requirements and the deduction of fees, tax reclaim benefits will be subject to review and approval by the applicable custodian and the applicable tax regulators, and that Deutsche Bank 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.

We certify that to the best of our knowledge each of the beneficial holders identified hereby are eligible for the preferential rates as stated herein 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 holders.

We will be fully liable for any and all claims, penalties and / or interest, including without limitation, any foreign exchange fluctuations associated therewith. Deutsche Bank shall not be liable for the failure to secure any refund. In consideration of the assistance of Deutsche Bank and the custodian in processing such claims, we expressly agree that Deutsche Bank and its agents or affiliates shall not have any liability for, and we shall indemnify, defend and hold each of Deutsche Bank and its agents and affiliates harmless from and against, any and all loss, liability, damage, judgment, 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.

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	

Participating in Relief at Source is wholly voluntary and discretionary; however, it is the only way to obtain the reduced withholding tax rate on the payable date.

*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	1. COVER LETTER 2. IRS FORM 6166 (LONG FORM ONLY) 3. VEROH 6163 E AND CERTIFICATE OF TAX RESIDENCY (NON- INDIVIDUALS) <u>OR</u> VEROH 6164 E (INDIVIDUALS) (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)	1. COVER LETTER 2. IRS FORM 6166 3. VEROH 6160 E 4. VEROH 6163 E 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	1. COVER LETTER 2. VEROH 6163 E AND CERTIFICATE OF TAX RESIDENCY (NON- INDIVIDUALS) OR VEROH 6164 E (INDIVIDUALS) 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)	 COVER LETTER IRS FORM 6166 VEROH 6160 E VEROH 6163 E CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) POA(s) (LONG FORM ONLY) 		
FAVORABLE 5%	25%	ROMANIA	1. COVER LETTER 2. VEROH 6163 E AND CERTIFICATE OF TAX RESIDENCY (NON- INDIVIDUALS) OR VEROH 6164 E (INDIVIDUALS) 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	1. COVER LETTER 2. VEROH 6163 E AND CERTIFICATE OF TAX RESIDENCY (NON- INDIVIDUALS) OR VEROH 6164 E (INDIVIDUALS) 3. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 4. POA(s) (LONG FORM ONLY)		
FAVORABLE 12%	18%	RUSSIA	1. COVER LETTER 2. VEROH 6163 E AND CERTIFICATE OF TAX RESIDENCY (NON- INDIVIDUALS) OR VEROH 6164 E (INDIVIDUALS) 3. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY)		

			4. POA(s) (LONG FORM ONLY)
FAVORABLE 13%	17%	GREECE	1. COVER LETTER 2. VEROH 6163 E AND CERTIFICATE OF TAX RESIDENCY (NON- INDIVIDUALS) OR VEROH 6164 E (INDIVIDUALS) 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, 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	1. COVER LETTER 2. VEROH 6163 E AND CERTIFICATE OF TAX RESIDENCY (NON- INDIVIDUALS) OR VEROH 6164 E (INDIVIDUALS) 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	1. COVER LETTER 2. VEROH 6163 E AND CERTIFICATE OF TAX RESIDENCY (NON- INDIVIDUALS) OR VEROH 6164 E (INDIVIDUALS) 3. CERTIFICATION OF DIVIDEND PAYMENT (LONG FORM ONLY) 4. POA(s) (LONG FORM ONLY)

NOTE:

CORPORATIONS WITH RESIDENCE IN NON-TREATY COUNTRIES MAY BE ELIGIBLE FOR A 20% RECLAIM. THESE CLAIMS CAN ONLY BE FILED VIA THE LONG FORM PROCESS AND WILL BE REVIEWED BY THE FINNISH TAX ADMINISTRATION ON A CASE BY CASE BASIS.

	DESCRIPTION OF VARIOUS DOCU	JMENTATION	
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 2015. 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 PARTICPANT
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, required for all US Pension entities.	ORIGINAL	DTC PARTICIPANT
VEROH 6163 E (NON- INDIVIDUALS)	Application for refund of Finnish withholding tax for non-individuals (corporations, pensions, trusts, partnerships, charities, or investment funds). For non-US entities, a certificate of tax residence should also be provided	ORIGINAL	BENEFICIAL OWNER OR DTC PARTICIPANT (WITH POA
VEROH 6164 E (INDIVIDUALS)	Application for refund of Finnish withholding tax for individuals. Confirmation of the residency and domicile for Irish & UK residents required. Also, for non-US individuals, this form should be certified by the local tax office (stamp), or a certificate of tax residence should be provided.	ORIGINAL	BENEFICIAL OWNER OR DTC PARTICIPANT (WITH POA)
CERTIFICATE OF TAX RESIDENCY (NON-US)	Required for all non-US, non-individual entities, issued by the local tax authority. For non-US individuals, this is required only if the VEROH 6163 E is not stamped by the local tax authority. The "Tax Year" of the COR must refer to the tax year of 2015.	ORIGINAL	LOCAL TAX AUTHORITY
POWER OF ATTORNEY (APPENDIX C)	If the beneficial owner signs the VEROH 6203, then only 1 POA is required • Between DTC participant & depositary (DTC participant letterhead) If the DTC participant signs the VEROH 6203 or 6160 E on behalf of the beneficial owner, then 2 POA's are required • Between beneficial owner & DTC participant (BO letterhead) • Between DTC participant & depositary (DTC participant letterhead)	COPY	BENEFICIAL OWNER AND/OR DTC PARTICIPANT

CONTACT DETAILS			
PRIMARY CONTACT	JEANISE SYLVAIN		
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	GREGG LEWIS		

ESP



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://esp.globetax.com/

Please contact Ms. Jeanise Sylvain at 1-800-876-0959 or via email at <u>Jeanise Sylvain@GlobeTax.com</u> 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 THAT CITE IRS REVENUE RULING 81-100 ACCEPTED?	YES, WITH A TREASURY 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 HAPPENS.
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.
IS THE PROCESS FOR TAX RELIEF OFFERED BY DEUTSCHE BANK TRUST COMPANY AMERICAS AN OPTIONAL PROCESS?	YES, THIS IS A DISCRETIONARY, OPTIONAL SERVICE. CLAIMS (SUCH AS CLAIMS FILED UNDER A EUROPEAN COURT OF JUSTICE ("ECJ") RULING) MAY BE FILED DIRECTLY TO THE FINNISH TAX AUTHORITIES WITH THE PROPER FORMS. SOME FORMS ALSO MUST BE SECURED BY THE DEPOSITARY AND ARE SUBJECT TO THE STANDARD TAX RELIEF FEE OF UP TO \$ 0.01 PER ADR.
IS THIS LONG-FORM PROCESS FREE OF CHARGE?	NO. THIS TAX RECLAIM ASSISTANCE SERVICE IS WHOLLY VOLUNTARY AND DISCRETIONARY AND OUTSIDE THE TERMS AND CONDITIONS OF ANY APPLICABLE DEPOSIT AGREEMENT. FEES WILL BE CHARGED FOR THIS ASSISTANCE SERVICE OF UP TO \$0.01 PER ADR FOR STANDARD LONG-FORM RECLAIMS WITH A MINIMUM OF \$25.00. IN ADDITION, THERE IS A EUR 50.00 CUSTODIAL FEE PER CLAIM SUBMITTED, WHICH IS SUBTRACTED FROM THE TOTAL RECLAIM, BEFORE FUNDS ARE CONVERTED TO USD. RECLAIMS RECEIVED POST DEADLINE CANNOT BE ASSURED AND MAY BE SUBJECT TO A PER BENEFICIARY FEE AS WELL AS OTHER CHARGES, FEES OR EXPENSES PAYABLE BY OR DUE TO DEUTSCHE BANK TRUST COMPANY AMERICAS OR ITS AGENTS, INCLUDING THE CUSTODIAN OR TAX AUTHORITIES. IN ADDITION, CHARGES MAY APPLY TO ANY LONG-FORM CLAIMS REJECTED OR NOT ACCEPTED BY THE CUSTODIAN. 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: Jeanise Sylvain

Re: Withholding Certification for AMER SPORTS CORPORATION ; CUSIP# 023512205							
Enclosed please find tax recexcess tax withheld from div. Co. under DTC# (DTC Famount of shares on the reco23512205.	vidends paid on Finnish A PTS Number) hereby st	DRs. We, <u>(DTC</u> tate that each be	C Participant Name) Eneficial owner cited belo	_holding shares ow held the res	at Cede & pective		
Below is the list of beneficia ADRs. As required the follow Residency and a Power of A ORD: 2 ADR Shares. The	wing documents are attac Attorney for each beneficia	thed: Finnish cla al owner. The ra	aim form, Certification of	payment, Cert	ification of		
Name of Beneficiary	Complete A	ddress	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 sig	natory for DTC Participan	<u>t]</u>					
[NAME AND TITLE OF AUT	THORIZED OFFICER FO	R DTC PARTIC	IPANT]				
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 AMER SPORTS CORPORATION) ADRs (CUSIP 023512205) was a holder of record on MAR 16 2015. 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:	AMER SPORTS CORPORATION
Ordinary Pay Date:	01 APR 2015
Shares held:	[Number of Ordinary Shares Held]
Dividend Rate:	EUR 0.45 per share
Gross Dividend:	[Gross Dividend]
Amount of Tax Withheld (%):	[Amount of Tax Withheld]
Refund Amount Due (Reclaim %):	[Amount of Refund]
NAME -	Date [Today's Date]

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 <u>Deutsche Bank Trust Company Americas / GlobeTax ("Bank")</u> 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 <u>AMER SPORTS CORPORATION</u> ("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>	<signature broker="" of="" representative=""></signature>
Place and Date	Authorized Signature(s)/Title(s)

APPLICATION FOR REFUND OF FINNISH WITHHOLDING **TAX ON DIVIDENDS**

(Individual applicant)

			Refunds ca	n be re	equested	after th	e calendar year of payment.		
1 APPLICANT									
1.1 Family name	amily name			1.2 Given names					
1.3 Finnish personal identity	code or date of birt	h (ddmmyyyy)							
1.4 Postal address			1.5 Postal o	ode	1.6 Pos	t office			
1.7 Country of residence		1.8 Tax id. no. in co				1.9 Tele	Telephone number		
1.10 Have you asked for a r	refund earlier?			he 'L' c und de	ode (Applecision	licant's r	reg. no. in Finland) from your		
2 Information on the ag	ent signing this a	application fo	rm (Enclose le	tter of	authori	sation))		
2.1 Representative's name				2.2 e-mail					
2.3 Address				2.4	4 Telepho	per			
3 INFORMATION ON DIN If the application concerns m	_	ent of dividends.	please enclose s	eparate	e spreadsl	heets wi	th the facts in section 3.		
3.1 Receipt of dividence			·	•					
3.2 Dividends are being pai		ilcant's unect sin	3.3 Official nam	e of fur	nd or narti	nershin			
l * -			0.0 Omolal Ham	C OI IUI	ia or parti	поготпр			
through a fund 3.4 TIN of fund or partnersh	through a partne		 D of fund or partn	orchin		3 6 Ca	untry of tax residence of fund or		
3.4 This or fund or partifersh	ip (ii avaliable)	(if available)	D of furid of partir	cisilip		partners			
3.7 Name of payer		1	3.8 Payer is sto	ck-excl	hange list	ed	3.9 Date of payment		
3.10 Number of shares	f shares			tax with	no nheld €	3.13 Amount requested as refund €			
4 BANK ACCOUNT NUM	MBER FOR THE F	REFUND	•						
4.1 IBAN acc. number (or o	ther int'l format)	4.2 BIC	or SWIFT code	4.3 Na	me of acc	count ho	lder		
4.4 Name of bank		4.5 Ad	dress of bank						
The undersigned - declares that the divide - assures that he/she has		-	•						
Date	Signature				Name ii	n printed	d letters		
Mandatory enclosures: - certificate of tax residency i - agent's letter of authorisation		orities on this for	rm or a separate a	attachm	nent		VEROH 6164e 5.201-		
CERTIFICATE OF FI	e applicant, within the	e meaning of the	e Double Taxation	Conve	ention, wa	s reside	nt in the country mentioned above		
- as well as domiciled, if co				ne date	when the	= iricome	e was paid.		
	Signature and stamp of the tax authorities								

APPLICATION FOR REFUND OF FINNISH WITHHOLDING TAX ON DIVIDENDS (Individual applicant)

INSTRUCTIONS

Please fill in the fields that concern you and show the form to the tax authorities of your country. Ask them to complete the "Certificate of Fiscal Residence" section. This means that they give an affirmation that you have been a tax resident of that country at the time when you received the dividends (concerned by the refund request). Instead of completing the "Certificate of Fiscal Residence" section on this form, your tax authority may give you another type of certificate that establishes your status of residence at the time.

During the calendar year when the dividends were paid the payer is the only party who can pay you a refund (in other words, adjust the withheld amount). To claim this adjustment, you must give the payer the necessary details. If the payer has not paid you a refund i.e. adjusted the withheld amount, you may use this form to request it from us **after the calendar year of payment has ended**.

Enclose a voucher that shows the payment of dividends and what was withheld on them. Ask the payer to give you such a voucher if you do not have one. The Tax Administration may require you to show all the vouchers and documentation, in order to establish the entire audit trail, if you received the dividends through an account operator or asset management

If you are a resident of an EEA country, you are entitled to request the refund in case the Finnish tax withheld at source cannot be fully credited in your country. Include an adequate explanation of the reasons why you are entitled to the refund, and enclose Form 6161e (Certificate of tax treatment concerning dividends) or other documentation that establishes how the dividends had been taxed in your country.

If too much tax has been withheld at source, you may ask for a refund during the five calendar years that follow the year of payment and withholding. If excess withholding only amounts to €5 per year or less, we will not pay a refund. The euro is the currency we use for the preparation of your refund decision.

If you have authorised someone to request the refund on your behalf, they must enclose a letter of authorisation.

For more information on the taxation of nonresidents' income, visit tax.fi > Further resources > International situations > Tax rates on dividends and other payments to nonresidents.

Send completed form to: Helsinki Area Tax Office PO Box 400 FI-00052 VERO FINLAND

APPLICATION FOR REFUND OF FINNISH WITHHOLDING TAX ON DIVIDENDS

(Non-individual applicant, e.g. a corporate entity)

Refunds can be requested after the calendar year of payment.

1 APPLICANT

1.1 Applicant's official name (beneficial owner)										
1.2 Applicant is stock-exchange listed			1.3 ISIN-	1.3 ISIN-code						
yes no			1.55							
1.4 Postal address			1.5 Posta	al cod	de	1.6 Pos	st offic	e		
1.7 Telephone number				1.8 e-ma	ıil					
The recognition of the recognition	1.7 Telephone number			1.0 0 1110	1.0 e-mail					
1.9 Country of residence	nce 1.10 Tax id. no. in that country			1.11 Busi	1.11 Business id. no. in that country 1.12 Finnish Business ID					
1.13 The applicant is 2 State, Municipality or other Association Institution or Fund 5 Charity										
6 UCITS Collective investment										
1.14 Please describe the applica		001151	una			o musi		9 ⊑8	state 10 Other	
1.15 Has the applicant asked for	a refund earlier?					e 'L' code (A nd decision	Applicant	's reg	. no. in Finland) from applicant's	
yes no				ľ						
2 Information on the agent s	signing this applica	tion for	m ((Enclose	lette	r of autho	orisatio	n)		
2.1 Representative's name					2.2 e-mail					
2.3 Address					2.4 Telephone number					
2 INFORMATION ON DIVIDE	NDO									
If the application concerns more to		ridends, į	oleas	se enclose :	sepa	rate spread	dsheets v	with th	ne facts in section 3.	
3.1 Accounting period	20									
2020 3.2 Receipt of dividends is due					3.3 Official name of fund or partnership					
shareholding							of tax residence of fund or			
	3.4 TIN of fund or partnership (if available) 3.5 Business ID of fund or partnership (if available) 3.6 Country of tax residence of fund or partnership partnership									
3.7 Beneficiary is a company, and the shares are its investment assets 3.8 1				The benefi I holds at le	The beneficiary is a company referred to in Parent-Subsidiary Directive, holds at least 10% of the capital of the distributing company					
yes no			yes	no						
3.9 Name of payer			3.10	Payer is s	tock-	1	listed	3.11	Date of payment	
3.12 Number of shares 3.13	Gross amount of divide	ends €	3.14	yes 4 Amount o	f tax	no withheld €		3.15	Amount requested as refund €	
	o. 12 Namber of Shares									
4 BANK ACCOUNT NUMBER FOR THE REFUND										
4.1 IBAN account number (or other int'l format) 4.2 BIC or SWIFT code 4.3 Name of account holder										
4.4 Name of bank 4.5 Address of			of bank							
The undersigned										
- declares that the dividend income is not effectively connected with the applicant's permanent establishment in Finland assures that the applicant has not received or requested any refund from the Finnish payer of dividend income concerning this										
dividend income. Date Signature				Name in printed letters				ers		
Details of the right to sign for the	Details of the right to sign for the applicant				Position or job title					
By letter of By proper right to sign for the appl				plicant		. Solution of job and				
authorisation	(see instructions)									

- Mandatory enclosures:
 certificate of tax residency issued by local authorities
 agent's letter of authorisation
 receipt on dividend income and withheld tax on source.



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							
the fund is resident of the United States of America	and						
the fund is the beneficial owner of the dividends and	2) the fund is the beneficial owner of the dividends and						
 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 							
 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							
the fund is established and maintained in the United provide pensions or other similar remuneration, incluearn income for the benefit of one or more such array.	uding social security payments, or to						
 the fund is exempt from tax in the United States of America with respect to the activities decribed in clause 6) and 							
the fund will immediately notify the custodian of the circumstances above ceases to apply.	deposited shares in case of the						
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.						

APPLICATION FOR REFUND OF FINNISH WITHHOLDING TAX ON DIVIDENDS (Non-individual applicant, e.g. a corporate entity)

INSTRUCTIONS

This form is for applicants who are not natural persons (including corporate entities, funds, other legal persons), and who are treated as beneficial owners of dividends for tax purposes.

When the year of payment of the dividends has not yet ended, the only party capable of refunding or correcting the withheld tax at source is the payer of the dividends. To obtain refund this way, the applicant must give adequate details to the payer. If the payer has made no refund correction, the applicant may complete this application form in order to ask the Tax Administration for a refund, on the condition that the year of payment of the dividends has ended.

Enclose the mandatory documentation as instructed on this form. If necessary, the Tax Administration may ask you to present the entire chain of financial records in order to establish audit trail, if there were several custodians or depositaries that transferred the dividends to the beneficiary.

If the applicant's country of residence is in the European Economic Area, and claims refund by virtue of being comparable with a tax-exempted Finnish entity, the following additional enclosures are required:

- A specific enclosure listing the reasons for the applicant's comparability with a tax-exempted Finnish entity that has similar operations as the applicant.
- Either Form 6161e Certificate of tax treatment concerning dividends from Finland, or a document issued by the tax authorities of the country of residence, establishing that they are unable to give the applicant a full credit for the tax at source withheld in Finland.

If too much tax has been withheld at source, you may ask for a refund during the five calendar years that follow the year of payment and withholding. If excess withholding only amounts to €5 or less, we will not pay a refund. The euro is the currency we use for the preparation of your refund decision.

For more information on the taxation of nonresidents' income, visit tax.fi > Further resources > International situations > Tax rates on dividends and other payments to nonresidents.

Send completed form to: Uusimaa Corporate Tax Office PO Box 30 FI-00052 VERO FINLAND

Detailed instructions

Line 1.1

Normally only the beneficial owner may be the applicant. If the applicant is another party, you must enclose an explanation with the reasons that justify payment of the refund to the applicant, not to the beneficial owner.

Lines 1.13 to 1.14

Tick the appropriate box. Add a more precise description of the applicant's legal entity form as necessary.

Example 1: The applicant is a limited-liability company. Under section 1.13, tick 1 (Corporate entity), and enter "Limited-liability company" in 1.14 as an additional description.

Example 2: The applicant is an investment fund. Tick either the 6 (UCITS) box or the 7 (non-UCITS) box, and enter an additional description, such as "Investment company with variable capital", in 1.14.

Section 3 of the form

If the application concerns more than one payment of dividends, enclose a specification with the details required in section 3 (line 3.1 to line 3.15) separately for each one of them.

Line 3.1

Enter the applicant's accounting period that relates to the distribution of the dividends.

Line 3.2

Tick "Receipt of dividends is due on the applicant's direct shareholding" if it is appropriate. Move on to line 3.7. If the dividends were paid through an investment fund or a partnership, tick the box as appropriate and give the necessary details on lines 3.3 to 3.6. If any changes have been made to the name of the fund or partnership, please give the old and the current names.

Line 3.7

'Investment assets' means the securities obtained by a financial institution, an insurance company, a pension institution for the purpose of investment (as provided in § 11, Business Tax Act).

Right to sign for the applicant

If the applicant has given the agent permission to sign the completed form, tick the "Letter of authorisation" box, and enclose the letter of authorisation.

If the party filing this form may sign for the applicant as it is entered in the Trade Register, tick "Proper right to sign for the applicant".