



**SALES FORM**  
**Shares bought after the Annual General Meeting**

**Request to sell Danfoss A/S B-shares worth DKK 100 each**

Name ..... Deposit no. ....

Surname ..... TIN No. ....

Private address .....

.....

.....

**(Please write in capital letters)**

I hereby wish to sell

..... (number of shares) B-shares worth DKK 100, at the price of DKK 10.717 each, totalling DKK .....

..... the .....(date and location)

.....  
signature

Together with this form, below proof of identity documentation must **ALWAYS** be submitted:

- 1) A copy of your passport or driving license. The copy must be duly verified by two witnesses (see page 2) - please note that the witnesses cannot be family members or persons having the same residential address as you; **AND**
- 2) Documentation from a public authority, e.g. water/gas/electricity bill or bank/tax statement in your country confirming your name and private address. The date on this public documentation cannot be older than 6 months.

If we receive the form and the above-mentioned documentation no later than April 16<sup>th</sup>, 2021, the amount will be transferred to the related dividend account as soon as possible after this deadline.

**Please send to: Danfoss A/S, Att.: Legal Department, A-839, 6430 Nordborg, Denmark or per E-Mail: [Shareholderrelations@danfoss.com](mailto:Shareholderrelations@danfoss.com)**

Name .....

Custody account .....

Insert a copy of your passport or driving license here

SWIFT address of your bank:

Name and address of your bank:

IBAN and account number in your bank:

Routing number of your bank (US only)

The account number in Danske Bank:

TIN number:

Your name and private address:

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Date .....

Witness to the signature:

Name \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Signature .....

.....

# TAX RESIDENCY

Private individuals



Denmark has entered into agreements with the US, the EU and OECD countries stipulating that, as of 1 July 2014, Danish banks and other financial institutions must identify and register whether customers are tax resident (i.e. fully tax liable) in countries other than Denmark. We therefore request that you inform us in which country or countries you are tax resident as well as your tax identification number (TIN). You may be liable to pay tax in the US, for example, because you were born there, have US citizenship or have a work permit there (known as a green card).

## Personal data

First name and surname(s)	
CPR No.	Date of birth (if no Danish CPR No.)

## Tax residency in Denmark

A)	Are you fully tax liable in Denmark?	<input type="checkbox"/> Yes <input type="checkbox"/> No
B)	Answer this question only if you answered No to the preceding question (A). In what country are you liable to pay tax? What is your TIN? If no TIN, please explain why not in the next section (C). Country _____ TIN _____	
C)	Answer this question only if you have not stated your TIN in the preceding section (B). <input type="checkbox"/> The country where I am liable to pay tax does not issue TINs. <input type="checkbox"/> I cannot be assigned a TIN for other reasons. State the reason(s). _____ Date of birth: _____	

## Tax residency in the US

Are you fully tax liable in the US (because you have US citizenship or another reason)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, state your US TIN. _____	

## Tax residency in other countries than DK and US

A)	Are you fully tax liable in countries other than those listed above?	<input type="checkbox"/> Yes <input type="checkbox"/> No
B)	Answer this question only if you answered Yes to the preceding question (A). State the country and TIN. If you have no TIN, please explain why not in the next section (C). Country _____ TIN _____ Country _____ TIN _____	
C)	Answer this question only if you have not stated your TIN in the preceding section (B). <input type="checkbox"/> The country where I am liable to pay tax does not issue TINs. <input type="checkbox"/> I cannot be assigned a TIN for other reasons. State the reason(s). _____ State country, city and date of birth: _____	

## Signature

I solemnly declare that the information above is correct and that I will contact Danske Bank if my circumstances change.	
Place and date	Signature