

(letterhead)

Dear Sirs

MusixMatch Spa

Via Timavo 34

20124 Milano

Company [REDACTED] (the "Company")

Legal Address [REDACTED]

Legal Representative (natural person):

Name [REDACTED] Surname [REDACTED]

Birth date [REDACTED]

Place of Birth [REDACTED]

Exemption / Application of the tax rate provided by the Convention for the avoidance of double taxation between Italy and Ghana

The undersigned [REDACTED] acting as legal representative of the Company

Declares

- a) that the Company is resident in Ghana (the "Country of residence") for purpose of taxation pursuant to the Convention between Italy and Country of residence for the tax period / periods **2026** (the "Convention") ;
- b) that the Company is the beneficial owner of the royalties;
- c) that the Company does not have a permanent establishment or a fixed base in Italy to which the income effectively connects;
- d) that
- the Company is subject to tax for the specified royalties in the Country of residence;
 - the Company is NOT subject to tax for the specified royalties in the Country of residence for the following reason:

e) to comply with all other necessary requirements for applying the benefits granted by the Convention regarding the income received;

f) that all information in this declaration is correct and complete, and that the undersigned shall communicate if one or more of the requirements described above ceases to be, as well as of any variations in the supplied data and information;

g) that

- the Company's Foreign TIN (Taxpayer Identification Numbers) or Italian TIN is the following:
[REDACTED]
- the Country of residence does not issue a TIN for residents or the Company cannot obtain a TIN from the Country of residence.

Requests

exemption from Italian tax or application within the limits provided by the mentioned Convention.

Therefore, the royalties you will pay us will be subject to withholding taxes of 10% as provided by the article nr. 12 paragraph 2 of the Convention.

Attached :

Form [name of the form] from the Ghanaian Tax Authority

Date _____

Legal representative _____