COMPENSATION FORM (PAGE 1 OF 1)

Fill out this compensation form. Send the compensation form together with the bank documentation by email to contact@brain-plus.com no later than 15 April 2024. The bank documentation consists of:

- (1) Documentation of sales transactions for BRAINP TO3 warrants between 13 June 2023 and 6 March 2024
- (2) Documentation of repurchase transactions for BRAINP TO3 warrants between 7 March and 20 March 2024

3) Documentatio	n of exercise transact	cions for BRAINP TO3	warrants between 12	1 March and 22 March 20
Bank and invest	or details			
Investor name/C	Company name			
Social security no	umber (if applicable)			
Corporation num	nber (if applicable)			
ull address:				
Name of bank:				
Reg. no. (if Danis	sh bank)			
Account number	(if non- Danish			
account)				
BAN (if non-Dan	nish account)			
BIC (if non-Danish account)				
SWIFT (if non-Danish account)				
All sales of BRAI	NP TO3 warrants bet	ween 13 June 2023 a	nd 6 March 2024	
Date of sale	Time of sale	No. of TO3	Price per	Amount (DKK)
		warrants	warrant	
All repurchases	of BRAINP TO3 warra	nts between 7 March	and 20 March 2024	
Date of	Time of	No. of TO3	Price per	Amount (DKK)
repurchase	repurchase	warrants	warrant	
Number of total	BRAINP TO3 warrant	s executed		
	mentation for all BRA		•	
exercises enclos	ed the email to conta	ct@brain-plus.com?	(Yes/No)	
•			<u>~</u>	the above bank account a
ansactions. I also	o confirm that the end	closed documentation	is copies of the origi	inal transaction documen
gnature:				

The compensation is liable to tax payments. The receiver of the compensation is obliged to inform the tax authorities of the compensation received.