

Annex 1

Checklist for Freelancers

Questionnaire for Freelance Professionals Working for **SAP Österreich GmbH** or its suppliers

Last Name, First Name

1. Please specify the legal form that you operate as.

☐ GmbH ☐ GdbR ☐ Other form of company or partnership
(for example, OHG, KG)

☐ Individual person

If you operate as a company or partnership: How many other members (not including members of your family) does the company or partnership comprise?

☐ More than 3 ☐ 3 ☐ 2 ☐ 1

2. Please answer the following questions.

a.) Do you have other customers besides SAP SE and its subsidiaries?

☐ Yes ☐ No

If so, what else do you do in the market?

If not, would further employment besides your work for SAP SE and its subsidiaries be possible in principle?

☐ Yes ☐ No

Do you receive over 80% of your revenue from SAP SE and its subsidiaries?

☐ Yes ☐ No

b.) Except for low-wage earners, do you employ anyone who is liable to pay insurance contributions?

☐ Yes ☐ No

If so, how many?

c.) Do you have an active presence in the market (for instance, do you advertise, bid for contracts, distribute marketing material)?

☐ Yes ☐ No

If you do, how do you do so and what materials do you use? (Attach copies if relevant.)

d.) Before beginning your freelance work, were you ever an employee of a company in the SAP Group?

☐ Yes ☐ No

If so, in which time period, and what was your role?

3. Please answer this question if you operate as an individual person.

Do you have a binding statement confirming your status as a freelancer?

☐ Yes (attach copy) ☐ No

4. Please provide the following details about your work for SAP.

a.) What SAP department do you do work for, and since when?

How long have your current contracts been running?

Who is the project manager?

First and last name:

b.) Where do you perform your work? (At home, in SAP's buildings, or elsewhere.)

Are you free to choose your place of work in connection with your work for SAP SE and its subsidiaries?

c.) To what extent are you obliged to follow managerial instructions?

d.) Are you free to organize and manage your own working tools, hours, vacations, and absences?

e.) Please specify the activities or projects that you are involved in at SAP.

Place, date

Name