

English translation for courtesy purposes only. In case of discrepancies between the Italian version and the English version, the Italian version shall prevail

To
Banca Monte dei Paschi di Siena SpA

PROXY FORM FOR SHAREHOLDERS' MEETING

DELEGATING PARTY

I, the undersigned,
Surname Name
place of birth date of birth
resident in

or

Company name
Registered office
Tax code/social security no.
telephone e-mail

1st DELEGATED PARTY

HEREBY DELEGATE

Surname Name
place of birth date of birth
resident in

or

Company name
Registered office
Tax code/social security no.

telephone e-mail

who may in turn elect to be replaced by

2nd DELEGATED PARTY

Surname Name
place of birth date of birth
resident in

or

Company name
Registered office
Tax code/social security no.

telephone e-mail

to represent me at the Shareholders' Meeting of Banca Monte dei Paschi di Siena S.p.A., summoned on
April 12, 2017 (single call) and exercise voting rights in relation to:

(number) ordinary shares of Banca Monte Dei Paschi di Siena S.p.A.
deposited with:

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Please, provide details of valid identity document for proxy signatory; if the delegating party is a Company, please provide details and capacities of the signatory (e.g. *Chairman, Chief Executive Officer, etc.*):

Identity document (type) issued by no.
.....

Date,

Signature

I authorize the processing of my personal data in accordance to Legislative Decree no. 196 of 30 June 2003 (the Italian "Personal Data Protection Code") and its communication to Banca Monte dei Paschi di Siena S.p.A. solely for the purposes connected with the activities of the Shareholders' Meeting.

Signature