

Investor Information

Investor Name _____

Account # _____

Ownership Type: Non-withholding foreign Partnership¹
 Non-withholding foreign Trust²
 Other: _____

Ownership Type examples include:
¹Partnership, Foundation, Association, Charitable Organization, Investment Club
² Formal Trust

Joint Account Election

Use this option to claim joint account status for U.S. tax reporting purposes for Non-Personal, non-withholding foreign accounts.

- Designate the Non-Personal account identified above as a Joint account for U.S. tax reporting purposes
- None of the partners or beneficiaries is a U.S. person
- Within 90 days of any request, we will make available to CSI, records indicating that the Non-Personal account has obtained documentation from all partners, beneficiaries or owners

All partners or beneficiaries have provided one of the following:

- photocopy of acceptable ID
- W-8BEN (Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding)

Total Number of Partners/Beneficiaries: _____

Every partner/beneficiary must complete the following: (attach additional pages if necessary to list all partners/beneficiaries)

#1

Full Name _____

TIN (if applicable) _____

Address _____

City _____

Province _____

Postal Code _____

#2

Full Name _____

TIN (if applicable) _____

Address _____

City _____

Province _____

Postal Code _____

#3

Full Name _____

TIN (if applicable) _____

Address _____

City _____

Province _____

Postal Code _____

Withholding Statement

All indirect accounts must complete this section in conjunction with the Certificate of Foreign Intermediary, Foreign Flow-Through Entity or Certain U.S. Branches for United States Tax Withholding (W-8IMY) form.

Withholding Rate _____%. I request that CSI accept the enclosed W-8IMY form and pay any U.S. source income subject to non-resident tax, to the account identified above, at the requested withholding rate. I certify that the rate requested is based on the highest withholding rate applicable to any partner or beneficiary for this account, and is supported by the beneficial owner documentation.

Investor Authorization

By signing this document, I acknowledge that the information provided in this form is accurate and complete. I will inform Credential Direct of any changes to the information provided.

X

Investor Signature _____

Date (dd/mmm/yyyy) _____

X

Joint Investor Signature _____