

Application, request, contract or client number:

1 CONTRACTHOLDER'S INFORMATION

Contractholder's last name (please print) _____

Contractholder's first name (please print) _____

Date of birth:

Year

Month

Day

2 FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA)

Is the contractholder a U.S. citizen or a U.S. resident for U.S. tax purposes? Yes No

If so, indicate the contractholder's U.S. taxpayer identification number (U.S. TIN).

Identification number

3 COMMON REPORTING STANDARD (CRS)

Is the contractholder a resident of a jurisdiction other than Canada or the United States for tax purposes? Yes No

If so, enter the contractholder's country and the foreign taxpayer identification number.

Country

Identification number

4 CONTRACTHOLDER'S DECLARATION AND SIGNATURE

I declare that the information provided in this form is true and complete. I agree to notify my financial security advisor or La Capitale if any changes in circumstance cause this information to become incorrect.

Signed at _____ on this _____ day of _____ 20 _____ .

X

Signature of contractholder