



# Know Your Client (KYC) Change Form

(This form is for use only with B2B Bank Securities Services Inc. ("B2BSSI") accounts)

## 1. APPLICANT/ANNUITANT INFORMATION

ACCOUNT NUMBER \_\_\_\_\_ (Check one)  INVESTMENT  REGISTERED  TFSA

1-MR. 2-MRS.  
3-MISS 4-MS.  
5-DR. 6-PROF. LAST NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_ INITIALS \_\_\_\_\_

ADDRESS \_\_\_\_\_ APT. \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

RESIDENCE TELEPHONE NUMBER \_\_\_\_\_ BUSINESS TELEPHONE NUMBER \_\_\_\_\_

COUNTRY\* \_\_\_\_\_ CITIZENSHIP \_\_\_\_\_

MAILING ADDRESS IF DIFFERENT FROM ABOVE \_\_\_\_\_ APT. \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

# OF DEPENDANTS \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

\* Any person who resides outside Canada is required to provide proof of citizenship. Contributions to a tax-free savings account by non-residents of Canada are subject to tax.

EMPLOYER'S NAME \_\_\_\_\_

LANGUAGE PREFERENCE:  ENGLISH  FRENCH

EMPLOYER'S ADDRESS \_\_\_\_\_ APT. \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

INDUSTRY/TYPE OF BUSINESS (examples: entertainment, food service) \_\_\_\_\_

EMPLOYER'S PHONE NUMBER \_\_\_\_\_ YEARS WITH EMPLOYER \_\_\_\_\_

NATURE OF PRINCIPAL BUSINESS OR OCCUPATION \_\_\_\_\_

STATUS (examples: employed, unemployed, retired, student, never worked)  
\*If status is either Retired or Unemployed please provide previous Industry/Type of Business and Detailed occupation.

DETAILED OCCUPATION (examples: actor, cook) \_\_\_\_\_

Do you: (i) beneficially own; or (ii) have control or direction over; or (iii) have a combination of beneficial ownership of, and control or direction over, directly or indirectly, securities of an Issuer carrying more than 10% of the voting rights attached to all of the Issuer's outstanding voting securities?  NO  YES

Are you designated as a Pro (licensed to sell securities)?  NO  YES

Are you: (i) an officer or director of a reporting issuer or any other issuer whose securities are publicly traded (e.g. and entity whose securities are traded on a stock exchange or an over-the-counter market) (an "Issuer"); or (ii) an officer or director of a person or company which is itself an insider or a subsidiary of such Issuer?  NO  YES

If yes, please list the Issuer(s): \_\_\_\_\_

If yes, please list the Issuer(s): \_\_\_\_\_

Do you or as part of a group, hold or control an Issuer?  NO  YES

If yes, please list the Issuer(s): \_\_\_\_\_

Is the Applicant a PEFP or is the Applicant a PEFP because the Applicant is a PFM of a PEFP or is the Applicant closely associated, for personal or business reasons, with a PEFP?  NO  YES

Is the Applicant a PEDP or is the Applicant a PEDP because the Applicant is a PFM of a PEDP or is the Applicant closely associated, for personal or business reasons, with a PEDP?  NO  YES

Is the Applicant a HIO or is the Applicant a HIO because the Applicant is a PFM of a HIO or is the Applicant closely associated, for personal or business reasons, with a HIO?  NO  YES

If the answer is "yes" to at least one question, please complete and attach the supplemental form - Politically Exposed Foreign or Domestic Person or Head of an International Organization Statement.

## 2. CO-APPLICANT INFORMATION

Check box if separate sheet attached with additional applicants  
Is the Co-Applicant the spouse/common law partner of the Applicant?  NO  YES

1-MR. 2-MRS.  
3-MISS 4-MS.  
5-DR. 6-PROF. LAST NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_ INITIALS \_\_\_\_\_

Address:  Same as Applicant, or

ADDRESS \_\_\_\_\_ APT. \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

RESIDENCE TELEPHONE NUMBER \_\_\_\_\_ BUSINESS TELEPHONE NUMBER \_\_\_\_\_

COUNTRY\* \_\_\_\_\_ CITIZENSHIP \_\_\_\_\_

# OF DEPENDANTS \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

\* Any person who resides outside Canada is required to provide proof of citizenship

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S PHONE NUMBER \_\_\_\_\_ YEARS WITH EMPLOYER \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_ APT. \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

INDUSTRY/TYPE OF BUSINESS (examples: entertainment, food service)

STATUS (examples: employed, unemployed, retired, student, never worked)
\*If status is either Retired or Unemployed please provide previous Industry/Type of Business and Detailed occupation.

NATURE OF PRINCIPAL BUSINESS OR OCCUPATION

DETAILED OCCUPATION (examples: actor, cook)

Are you designated as a Pro (licensed to sell securities)? [ ] NO [ ] YES

Do you: (i) beneficially own; or (ii) have control or direction over; or (iii) have a combination of beneficial ownership of, and control or direction over, directly or indirectly, securities of an Issuer carrying more than 10% of the voting rights attached to all of the Issuer's outstanding voting securities? [ ] NO [ ] YES

Are you: (i) an officer or director of a reporting issuer or any other issuer whose securities are publicly traded (e.g. and entity whose securities are traded on a stock exchange or an over-the-counter market) (an "Issuer"); or (ii) an officer or director of a person or company which is itself an insider or a subsidiary of such Issuer? [ ] NO [ ] YES

If yes, please list the Issuer(s): \_\_\_\_\_

If yes, please list the Issuer(s): \_\_\_\_\_

Do you or as part of a group, hold or control an Issuer? [ ] NO [ ] YES

If yes, please list the Issuer(s): \_\_\_\_\_

Is the Co-Applicant a PEFP or is the Co-Applicant a PEFP because the Co-Applicant is a PFM of a PEFP or is the Co-Applicant closely associated, for personal or business reasons, with a PEFP? [ ] NO [ ] YES

Is the Co-Applicant a PEDP or is the Co-Applicant a PEDP because the Co-Applicant is a PFM of a PEDP or is the Co-Applicant closely associated, for personal or business reasons, with a PEDP? [ ] NO [ ] YES

Is the Co-Applicant a HIO or is the Co-Applicant a HIO because the Co-Applicant is a PFM of a HIO or is the Co-Applicant closely associated, for personal or business reasons, with a HIO? [ ] NO [ ] YES

If the answer is "yes" to at least one question, please complete and attach the supplemental form - Politically Exposed Foreign or Domestic Person or Head of an International Organization Statement.

3. SPOUSAL INFORMATION Applicant/Annuitant Information (Complete if spouse is not a Co-Applicant) Do you have a spouse/common law partner? If yes, complete this section [ ] NO [ ] YES

[ ] 1-MR. 2-MRS. 3-MISS 4-MS. 5-DR. 6-PROF. LAST NAME

FIRST NAME

Address: [ ] Same as Applicant/Annuitant, or

ADDRESS APT.

CITY PROVINCE POSTAL CODE

COUNTRY CITIZENSHIP

DATE OF BIRTH (mm/dd/yyyy) SOCIAL INSURANCE NUMBER

EMPLOYER'S NAME

EMPLOYER'S PHONE NUMBER YEARS WITH EMPLOYER

EMPLOYER'S ADDRESS APT.

CITY PROVINCE POSTAL CODE

INDUSTRY/TYPE OF BUSINESS (examples: entertainment, food service)

STATUS (examples: employed, unemployed, retired, student, never worked) \*If status is either Retired or Unemployed please provide previous Industry/Type of Business and Detailed occupation.

NATURE OF PRINCIPAL BUSINESS OR OCCUPATION

DETAILED OCCUPATION (examples: actor, cook)

Are you designated as a Pro (licensed to sell securities)? [ ] NO [ ] YES

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If yes, please list the Issuer(s): \_\_\_\_\_

If yes, please list the Issuer(s): \_\_\_\_\_

Do you or as part of a group, hold or control an Issuer? [ ] NO [ ] YES

If yes, please list the Issuer(s): \_\_\_\_\_

**Co-Applicant's Information (Complete if Co-Applicant is not Applicant's spouse)**

Do you have a spouse/common law partner? If yes, complete this section  NO  YES

Check box if separate sheet attached with information on additional co-applicants.

1-MR. 2-MRS.  
 3-MISS 4-MS.  
 5-DR. 6-PROF. LAST NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_

Address:  Same as Co-Applicant, or

ADDRESS \_\_\_\_\_ APT. \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

COUNTRY \_\_\_\_\_ CITIZENSHIP \_\_\_\_\_

DATE OF BIRTH (mm/dd/yyyy) \_\_\_\_\_ SOCIAL INSURANCE NUMBER \_\_\_\_\_

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S PHONE NUMBER \_\_\_\_\_ YEARS WITH EMPLOYER \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_ APT. \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

INDUSTRY/TYPE OF BUSINESS (examples: entertainment, food service) \_\_\_\_\_

STATUS (examples: employed, unemployed, retired, student, never worked)  
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NATURE OF PRINCIPAL BUSINESS OR OCCUPATION \_\_\_\_\_

DETAILED OCCUPATION (examples: actor, cook) \_\_\_\_\_

Are you designated as a Pro (licensed to sell securities)?  NO  YES

Are you: (i) an officer or director of a reporting issuer or any other issuer whose securities are publicly traded (e.g. and entity whose securities are traded on a stock exchange or an over-the-counter market) (an "Issuer"); or  
 (ii) an officer or director of a person or company which is itself an insider or a subsidiary of such Issuer?  NO  YES

Do you: (i) beneficially own; or  
 (ii) have control or direction over; or  
 (iii) have a combination of beneficial ownership of, and control or direction over, directly or indirectly, securities of an Issuer carrying more than 10% of the voting rights attached to all of the Issuer's outstanding voting securities?  NO  YES

If yes, please list the Issuer(s): \_\_\_\_\_

If yes, please list the Issuer(s): \_\_\_\_\_

Do you or as part of a group, hold or control an Issuer?  NO  YES

If yes, please list the Issuer(s): \_\_\_\_\_

**4. FINANCIAL INFORMATION AND INVESTMENT EXPERIENCE**

Include information on you, your Co-Applicant(s) and your spouse(s). For non-personal accounts, include information on the company or organization.

**a) Gross annual income from all sources:**

\$0-\$24,999  \$25,000-\$49,999  \$50,000-\$99,999  
 \$100,000-\$149,999  \$150,000+

**b) Estimated liquid assets: (bank accounts, T-Bills, and other assets that can be readily converted to cash without risk of loss or penalty.)**

\$0-\$24,999  \$25,000-\$49,999  \$50,000-\$99,999  
 \$100,000-\$149,999  \$150,000+

**c) Estimated fixed assets: (the value of all your fixed assets including real estate, securities.)**

\$0-\$24,999  \$25,000-\$74,999  \$75,000-\$149,999  
 \$150,000-\$299,999  \$300,000+

**d) Estimated financial obligations (i.e. All debts including mortgages)**

\$0-\$24,999  \$25,000-\$74,999  \$75,000-\$149,999  
 \$150,000-\$299,999  \$300,000+

**e) Estimated net worth: (e = b + c - d)**

\$0-\$24,999  \$25,000-\$74,999  \$75,000-\$149,999  
 \$150,000-\$299,999  \$300,000+

**f) Applicant/Annuitant's investment knowledge:**

Low  Low-Medium  Medium  Medium-High  High

**g) Co-Applicant's investment knowledge:**

Low  Low-Medium  Medium  Medium-High  High

**h) Investment Time Horizon:**

Less than 1 year  1 year to less than 3 years  
 3 years to less than 5 years  5 years to less than 10 years  
 10 years or more

**i) In the short term, how likely is it that you will need to withdraw the investments in this account in whole or in part to meet financial obligations?**

None  
 Low - I am confident that I can face any unexpected financial obligations without using the investments in this account.  
 Medium - I may require using investments in this account for any unexpected financial obligations.  
 High - I probably will require using investments in this account for any unexpected financial obligations.

**j) Will a leveraging strategy or borrowing to finance the purchase of investments be used in this account?**

Yes  No

**k) List investment objectives:**

\_\_\_\_\_ % Liquidity  
 \_\_\_\_\_ % Safety/Capital Preservation  
 \_\_\_\_\_ % Income  
 \_\_\_\_\_ % Long-term Growth  
 \_\_\_\_\_ % Short-term Trading  
 \_\_\_\_\_ % Speculative  
 \_\_\_\_\_ % Inflation Hedging  
 = 100 %

**l) Risk profile:**

Low  Low-Medium  Medium  Medium-High  High

## 5. ACCOUNT INFORMATION

- a) Is this Account to be used by or on behalf of a third party(ies)?  
This includes a person who has a financial interest in the Account or who exerts control over the assets in the Account.  NO  YES  
If yes, please complete and attach the supplemental form – Third Party Determination Statement.
- b) Does anyone other than you, the Applicant(s)/Annuitant, have any financial interest in this account?  NO  YES  
(If yes, name the party \_\_\_\_\_)
- c) Do you have any accounts with other brokerage firms?  NO  YES  
Account type(s): \_\_\_\_\_
- d) Do you, the Applicant(s)/Annuitant, control the trading in any other B2BBSSI accounts? (If yes, indicate account numbers below):  NO  YES  
\_\_\_\_\_  
Account # Account #

## 6. SHAREHOLDER COMMUNICATION INFORMATION

I agree that the choices indicated by me apply to all of the securities held in the account.

### Part 1 – Receiving Security Holder Materials

Please mark the corresponding box to show whether you WANT to receive ALL materials sent to beneficial owners of securities, or whether you DECLINE to receive both proxy-related materials for meetings at which only routine business is to be conducted, and materials sent to security holders that are not required by corporate securities law to be sent.

- I WANT to receive ALL security holder materials sent to beneficial owners of securities.
- I DECLINE to receive proxy-related materials for meetings at which only routine business to be conducted, and materials sent to security holders that are not required by corporate or securities law to be sent.  
(Note that the above instructions do not apply to any specific request you give or may have given to a reporting issuer concerning the sending of interim financial statements of the reporting issuer.)

### Part 2 – Disclosure of Beneficial Ownership Information

Please mark the corresponding box to show whether you DO NOT OBJECT to us disclosing your name, address and securities holdings to issuers of securities you hold with us and to other persons or companies in accordance with securities law. If you indicate that you OBJECT, we are entitled to charge you the reasonable costs incurred by us to forward security holder materials to you in accordance with securities law.

- I DO NOT OBJECT to you disclosing the information described above.
- I OBJECT to you disclosing the information described above.

## 7. CHANGE AUTHORIZATION

DEALER # \_\_\_\_\_ ADVISOR # \_\_\_\_\_

<b>X</b> _____ SIGNATURE OF APPLICANT/ANNUITANT	_____ DATE (mm/dd/yyyy)	<b>X</b> _____ SIGNATURE OF FINANCIAL ADVISOR	_____ DATE (mm/dd/yyyy)
<b>X</b> _____ SIGNATURE OF CO-APPLICANT	_____ DATE (mm/dd/yyyy)	<b>X</b> _____ BRANCH MANAGER APPROVAL	_____ DATE (mm/dd/yyyy)
		<b>X</b> _____ PARTNER'S OR DIRECTOR'S ACCEPTANCE	_____ DATE (mm/dd/yyyy)

## DEFINITIONS

### Investment Knowledge

Your general understanding and experience in investing, investment products, financial products and their associated risks and rewards.

#### **Low Investment Knowledge:**

You have little or no investment experience and do not have the knowledge to properly assess the risks and merits of investing.

#### **Low to Medium Investment Knowledge:**

You have some investment experience and a basic understanding of investments including a basic understanding of the risks and rewards of investing.

#### **Medium Investment Knowledge:**

You have several years of investment experience and are reasonably knowledgeable about investments including a moderate understanding of the risks and rewards of investing.

#### **Medium to High Investment Knowledge:**

You have many years of investment experience and are quite knowledgeable and familiar with a wide variety of investments including a good understanding of the risks and rewards of investing.

#### **High Investment Knowledge:**

You have extensive investing experience in a wide variety of investment products and strategies and fully understand the associated risks and rewards of investing.

### Investment Time Horizon

The length of time until you expect to access a significant portion (1/3) of the money invested in the account.

### Risk Profile

This reflects your willingness to accept risk and withstand volatility in your investments.

#### **Low Risk Profile:**

You seek an expected rate of return on your investments with low volatility. You do not want to risk losing money over the short or long term and are willing to accept lower returns for greater safety of capital (i.e. Investments such as GICs, saving bonds and money market mutual funds).

#### **Low to Medium Risk Profile:**

You seek less than normal returns on your investments with low to medium volatility. You have a higher risk tolerance than an investor described as low risk (i.e. Investments such as bond and balanced mutual funds, and certain fixed income products such as provincial and corporate bonds).

#### **Medium Risk Profile:**

You seek medium growth on your investments in the medium to long term and are willing to accept a normal level of risk and volatility (i.e. Investments such Canadian dividend, Canadian, US equity and certain international equity mutual funds and equities).

#### **Medium to High Risk Profile:**

You seek an above average rate of return over the medium to long term and are willing to accept a medium to high level of risk and volatility (i.e. Investments that invested in smaller companies or specific geographic areas).

#### **High Risk Profile:**

You are growth oriented and are willing to accept a high level of volatility and significant short term fluctuations in your portfolio value in exchange for potentially higher long term returns. You are willing to take substantial risks and understand that a significant portion of the capital invested may be lost (i.e. Investments such as venture capital, and investments focused on specific market sector or geographic areas such as emerging markets, science and technologies or investments engaged in speculative trading strategies such as the use of derivatives, short selling, and leveraging).

### Investment Objectives

The financial goal you want to achieve with the investments in your account.

#### **Liquidity:**

Your objective for your investments or a portion of your investments is to be quickly and easily converted into cash with little or no risk of loss.

#### **Safety/Capital Preservation:**

Your objective for your investments or a portion of your investments is to maintain its original principal amount and to minimize risk.

#### **Income:**

Your objective for your investments or a portion of your investments is to generate regular income and you are less concerned with capital appreciation.

#### **Long Term Growth:**

Your objective for your investments or a portion of your investments is capital appreciation. You are less concerned with generating income and accept increased risk and volatility of your investments returns.

#### **Speculative:**

Your objective for your investments or a portion of your investments is to maximize the eventual return of your capital. You are willing to accept a higher level of volatility and risk on your investments including the potential loss of your principal for the possibility of higher returns.

#### **Short Term Trading:**

Your objective for your investments or a portion of your investments is to maximize returns in a short period of time, usually accepting a higher level of risk for the potential of greater returns.

#### **Inflation Hedging:**

Your objective for your investments or a portion of your investments is to reduce the risk of volatility of your investments caused by inflation.