| Approved by: | |
|--------------------|----------|
| Compliance Officer | Date |

Lincluden Mutual Fund Dealer Inc.

"KNOW YOUR CLIENT" INFORMATION (FOR INDIVIDUALS AND IN-TRUST ACCOUNTS)

| | | STATUS | ☐ INFORMATION UPDATE |
|--|--|---|---|
| New Client Relationship I confirm that my TIME HORIZON , INVESTMENT OBJECTIVES , and RISK TOLERANCE indicated below relate to each of the accounts I am opening at this time with Lincluden. Otherwise, I will provide the information by account. | | | |
| I am currently a Lincluden client and want to open a new type of account. I confirm that my TIME HORIZON, INVESTMENT OBJECTIVES, and RISK TOLERANCE indicated below (or previously provided to you in the "Know Your Client" form that I executed | | | |
| My existing account nun | nbers are as follows: | | |
| Types of Accounts Cover | red by This Document – F | Please Check | |
| Non-RegisteredLocked-in RSP/LIRASpousal RIF | | avings Plan (RSP) cked-In Savings Pl und (LIF)/RRIF | Spousal RSP an (RLSP) Retirement Income Fund (RIF) Restricted LIF |
| | C | LIENT INFORMATIO | V |
| Name of Registered Unit | tholder: | | |
| items marked in blue below | v is specific to: | | oth investors. The information provided relative to the named JOINT ACCOUNTS. |
| | | | DUIRED TO ASCERTAIN CLIENT IDENTITY ¹ |
| | | | |
| Date of Birth (DD/MM/YYY | Y) | Occupat | on |
| Name of Spouse | | Number | of Dependants |
| Will any other person(s) ha | ave a financial interest in thi | is account? \(\sum \) | es No |
| | Residency For Tax Purpos Canada Yes U.S. Yes | ses Citizens No Canada No U.S. | nip Yes No Yes No |

Lincluden

¹ Securities regulations require that we receive certain information from you regarding your personal circumstances. We will use this information to ensure that any recommendations we make regarding investments are suitable for you. As well FINTRAC (Financial Transactions and Reports Analysis Centre of Canada) establishes guidelines that we must adhere to in respect to our obligation to confirm client identification. THE REGULATIONS PROHIBIT US FROM ACCEPTING YOUR INVESTMENT IF THIS SECTION IS NOT COMPLETED IN ITS ENTIRETY.

| Identification ² (where investor is present): | |
|--|--|
| Туре | Identifier Number |
| Note: If the investor is not physically present <u>a</u>) the invest photocopy of an acceptable identification document (as de has been seen by a commissioner of oaths or an acceptable following professions in Canada: dentist, medical doctor, of Quebec), notary public, optometrist, pharmacist, accredite general accountant, certified management accountant, pul professional engineer, engineer (Quebec), veterinarian) and deposit account that the investor has with a financial entity | scribed above) that the original identification document to guarantor (an individual engaged in one of the chiropractor, judge, magistrate, lawyer, notary (in d public accountant, chartered accountant, certified polic accountant, registered public accountant, d b) Lincluden must confirm that a cheque drawn on a |
| Are you considered a "politically exposed foreign person3"? | Yes No |
| INVESTMENT KNOWLEDGE: Which of the following categories is | best describes your knowledge of investing? |
| Extensive Moderate Limited | |
| INCOME (Include Income of any Joint Account Holder): Pleas | se note your approximate annual income from all sources. |
| | ,000-\$74,999 |
| NET WORTH (Include Net Worth of any Joint Account Holde assets and liabilities. | er): Please provide an estimate of the value of your |
| Estimated Liquid Assets (e.g. investments, cash) + Estimated Fixed Assets (e.g. real estate) - Estimated Liabilities (e.g. mortgage, car loan, personal loans, investment loans) = Estimated Net Worth | |

³A politically exposed foreign person is defined as an individual who holds or has held one of the following offices or positions in or on behalf of a foreign country: a head of state or government; a member of the executive council of government or member of a legislature; a deputy minister (or equivalent); an ambassador or an ambassador's attaché or counsellor; a military general (or higher rank); a president of a state owned company or bank; a head of a government agency; a judge; or a leader or president of a political party in a legislature. A politically exposed foreign person will also include the following immediate family members of the individual described above: spouse or common law partner; mother or father; child; brother, sister, half-brother or half-sister; or spouse's or common-law partner's mother or father.



² Required for non-registered accounts only. Includes, current driver's license, passport or other acceptable current photo identification (note: a provincial health card is not considered to be acceptable identification in Ontario). The document referred to must be a current valid original.

| | Residency For Canada U.S. | Tax Purposes Yes No | | ip Yes Yes | No No | |
|--|---------------------------|----------------------|----------------|----------------|-------------------|--|
| Date of Birth (DD/MM/YYYY | <u>(</u>) | Name of Spou | Se Se | | Occupation | |
| The information provided he | rein is specific to | D: | | | | · |
| | | JOINT | ACCOUNTS | | | |
| ☐ <u>High</u> (I am heavily groin exchange for potentially | | J | , , | | | ations in portfolio value |
| Medium (I understand to realize a return above to be considered suitable.) | | • | | | • | nowever my objective is rategies would generally |
| Low (I would consider month period. Equity investigation) | • | | | • | • | ive return over any 12 |
| RISK TOLERANCE: In identifying assume risk; risk being constitute of investment(s) that we | idered in terms o | of variability of re | turns and safe | ety of capital | !. Your risk tole | erance should relate to the |
| Balanced (Your object generally have a 30% to 6 investment over time, with | 60% allocation t | to fixed income | investments | and a 40% | to 70% alloc | 1 / |
| Growth (Your objective lead you to hold a relative tolerance and long term tile | ly high proporti | | | | | n requirement. This may also have a higher risk |
| ☐ Income (Your objecti capital appreciation. Inve | stments that wi | ill satisfy this ol | ojective inclu | de fixed ind | | |
| INVESTMENT OBJECTIVES: Investment(s) the | • | | | | - | • |
| less than 1 yr. 1 | -3 yrs. 4- | 5 yrs. | 9 yrs. | 0 yrs. or mo | ore | |
| money you invest in this acc | • | • | , | • | | a significant portion of the dividual account holders. |

| Identification (where investor is present): | |
|--|--|
| Туре | Identifier Number |
| Note: If the investor is not physically present <u>a</u>) the investor must attach a comphotocopy of an acceptable identification document (as described above) that has been seen by a commissioner of oaths or an acceptable guarantor (an incomposition of control of cont | t the original identification document dividual engaged in one of the magistrate, lawyer, notary (in t, chartered accountant, certified gistered public accountant, nfirm that a cheque drawn on a |
| investment knowledge. Which of the following categories best describes your | knowledge of investing: |
| Extensive Moderate Limited | |
| INDIVIDUALS AUTHORIZED TO GIVE INSTRUCTION | |
| Is any individual(s) other than the registered unitholder(s) authorized to give instruction | s for the account(s)? Yes No |
| If you have confirmed that any individual other than the registered unitholder the account(s) it is required that their identity be confirmed and the following one individual is authorized, attach a note with the same information for that | information provided. If more than |
| The information provided herein is specific to: | . |
| | |
| Date of Birth (DD/MM/YYYY) Occupation | |
| Identification (where individual is present): | |
| Identification (where individual is present): Type | Identifier Number |
| 1,460 | idontino i variboi |
| Note: See section directly above which confirms identification requirements present. | if the individual is not physically |
| Are you considered a "politically exposed foreign person"? | ☐ No |
| INVESTMENT KNOWLEDGE: Which of the following categories best describes your | r knowledge of investing? |
| Extensive Moderate Limited | |

EXECUTION

| I confirm that the information herein presents fairly my personal financial circumstances. I will notify Lincluden wi any significant changes to the above which may have an impact on the determination of the suitability of my investments. | | |
|--|--|--|
| Signature of Investor | Signature of Investor (joint account holder) | |
| Date | Date | |