

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 _____, 20__) can be assumed to apply across all of my accounts currently open with Lincluden. Otherwise, I will update the information by account.

My existing account numbers are as follows: _____

Types of Accounts Covered by This Document – Please Check

- | | | |
|---|---|---|
| <input type="checkbox"/> Non-Registered | <input type="checkbox"/> Retirement Savings Plan (RSP) | <input type="checkbox"/> Spousal RSP |
| <input type="checkbox"/> Locked-in RSP/LIRA | <input type="checkbox"/> Restricted Locked-In Savings Plan (RLSP) | <input type="checkbox"/> Retirement Income Fund (RIF) |
| <input type="checkbox"/> Spousal RIF | <input type="checkbox"/> Life Income Fund (LIF)/RRIF | <input type="checkbox"/> Restricted LIF |

CLIENT INFORMATION

Name of Registered Unitholder *(If this is a joint account certain information must be collected for both investors. The information provided relative to the items marked in blue below is specific to: _____ . The information in respect to the joint account holder is provided below in the section named JOINT ACCOUNTS .)*

KNOW YOUR CLIENT INFORMATION AND INFORMATION REQUIRED TO ASCERTAIN CLIENT IDENTITY¹

Date of Birth (DD/MM/YYYY) _____

Occupation _____

Name of Spouse _____

Number of Dependants _____

Will any other person(s) have a financial interest in this account? Yes No

Identification² (where investor is present): _____
Type

Identifier Number _____

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.**

Note: If the investor is not physically present **a)** the investor must attach a duly executed attestation on a legible photocopy of an acceptable identification document (as described above) that the original identification document has been seen by a commissioner of oaths or an acceptable guarantor (an individual engaged in one of the following professions in Canada: dentist, medical doctor, chiropractor, judge, magistrate, lawyer, notary (in Quebec), notary public, optometrist, pharmacist, accredited public accountant, chartered accountant, certified general accountant, certified management accountant, public accountant, registered public accountant, professional engineer, engineer (Quebec), veterinarian) **and b)** Lincluden must confirm that a cheque drawn on a deposit account that the investor has with a financial entity has cleared.

Are you considered a "politically exposed foreign person"³? Yes No

INVESTMENT KNOWLEDGE: Which of the following categories best describes your knowledge of investing?

Extensive Moderate Limited

INCOME (Includes Spouse): Please note your approximate annual income from all sources.

- \$0-\$24,999 \$25,000-\$49,999 \$50,000-\$74,999 \$75,000-\$99,999
 \$100,000-\$149,999
 \$150,000-\$199,999
 \$200,000 or more

NET WORTH (Includes Spouse): Please provide an estimate of the value of your assets and liabilities.

Estimated Liquid Assets (e.g. investments, cash)	_____
+ Estimated Fixed Assets (e.g. real estate)	_____
- Estimated Liabilities (e.g. mortgage, car loan)	_____
= Estimated Net Worth	_____

TIME HORIZON: Indicate the anticipated time period from now to when you expect to need to access a significant portion of the money you invest in this account.

less than 1 yr. 1-3 yrs. 4-5 yrs. 6-9 yrs. 10 yrs. or more

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.

³ A 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.

INVESTMENT OBJECTIVES: *Investment objectives are the result desired by you from investing with Lincluden. They should relate to the type of investment(s) that will be purchased by you. Make one selection only.*

Income *(Your objective is to generate current income from your investments. You are less concerned with capital appreciation. Investments that will satisfy this objective include fixed income investments, such as bonds and money market instruments and funds that invest in those security instruments.)*

Growth *(Your objective is capital appreciation. Current income from investments is not a requirement. This may lead you to hold a relatively high proportion of equities or funds that invest in equities, if you also have a higher risk tolerance and long term time horizon.)*

Balanced *(Your objective is a combination of income and growth. An account with a balanced objective would generally have a 30% to 60% allocation to fixed income investments and a 40% to 70% allocation to equity investment over time, with the actual allocation dependent on your risk tolerance and time horizon.)*

RISK TOLERANCE: *In identifying your risk tolerance, consideration should be given to both your willingness **and** ability to assume risk; risk being considered in terms of variability of returns and safety of capital. Your risk tolerance should relate to the type of investment(s) that will be purchased by you. Make one selection only.*

Low *(I would consider myself to be in an unsuitable investment if I experienced a negative return over any 12 month period. Equity investments would generally not be considered suitable.)*

Medium *(I understand that I may experience a negative return over a 12 month period, however my objective is to realize a return above the rate of inflation over five year periods. Balanced investment strategies would generally be considered suitable.)*

High *(I am heavily growth oriented and am willing to accept significant short term fluctuations in portfolio value in exchange for potentially higher long term returns. Equity only strategies may be suitable.)*

JOINT ACCOUNTS

The information provided herein is specific to: _____

Date of Birth (DD/MM/YYYY)

Occupation

Identification (where investor is present): _____
Type Identifier Number

Note: If the investor is not physically present **a)** the investor must attach a duly executed attestation on a legible photocopy of an acceptable identification document (as described above) that the original identification document has been seen by a commissioner of oaths or an acceptable guarantor (an individual engaged in one of the following professions in Canada: dentist, medical doctor, chiropractor, judge, magistrate, lawyer, notary (in Quebec), notary public, optometrist, pharmacist, accredited public accountant, chartered accountant, certified

general accountant, certified management accountant, public accountant, registered public accountant, professional engineer, engineer (Quebec), veterinarian) **b)** Lincluden must confirm that a cheque drawn on a deposit account that the investor has with a financial entity has cleared.

Are you considered a "politically exposed foreign person"? Yes No

INVESTMENT KNOWLEDGE: Which of the following categories best describes your knowledge of investing?

Extensive Moderate Limited

INDIVIDUALS AUTHORIZED TO GIVE INSTRUCTIONS

Is any individual(s) other than the registered unitholder(s) authorized to give instructions for the account(s)? Yes No

If you have confirmed that any individual other than the registered unitholder is authorized to give instructions for the account(s) it is required that their identity be confirmed and the following information provided. If more than one individual is authorized, attach a note with the same information for that individual(s).

The information provided herein is specific to: _____.

Date of Birth (DD/MM/YYYY)

Occupation

Identification (where individual is present): _____

Type

Identifier Number

Note: See section directly above which confirms identification requirements if the individual is not physically present.

Are you considered a "politically exposed foreign person"? Yes No

INVESTMENT KNOWLEDGE: Which of the following categories best describes your knowledge of investing?

Extensive Moderate Limited

EXECUTION

I confirm that the information herein presents fairly my personal financial circumstances. I will notify Lincluden with 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