



# BENEFICIAL OWNERSHIP FORM

(COMPLETE FOR ALL NON-INDIVIDUAL ACCOUNTS)

Account Name:   
(Name that will appear on all correspondence from RBC Direct Investing\*)

Account Number:

**Instructions: Complete required Sections**

- **Sections 1 and 6:** Private Corporation, Partnership, Investment Club, Non-Profit Organization and any other non-individual entities.
- **Sections 1, 2, 5 and 6:** Formal Trust
- **Sections 3, 4 and 6:** Charity
- **Sections 3 and 6:** Church, Fraternal Organization, Testamentary Trust, Financial Institution in acceptable regulatory regime and Publicly-Traded Corporation\*

\*(Publicly-Traded Corporations and their Wholly-Owned Subsidiaries listed on the North American Stock Exchange which have net assets of \$75 million on their last audited balance sheet are exempt if operating in a FATF member country).

## SECTION 1

**Do any of the individual(s)/member(s), by sum of direct or indirect<sup>†</sup> ownership, hold more than 10% ownership?**  Yes  No  
**If applicable, complete personal information below.** (Attach list if space is insufficient)

<input type="text"/>	<input type="text"/>	<input type="text"/>	Beneficial Owner's Country of Citizenship:	
First Name	Initial	Last Name	Date of Birth mm/dd/yyyy	<input type="checkbox"/> Canada <input type="checkbox"/> United States <input type="checkbox"/> Other
<input type="text"/>			Name of Public Companies in which Beneficial Owner is an Officer or Director, if any:	
Address			<input type="text"/>	
<input type="text"/>	<input type="text"/>	Name of Public Companies in which Beneficial Owner owns or controls 10% or more of the voting shares, if any:		
Occupation	Employer	<input type="text"/>		
Beneficial Owner's Banking Information				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Name of Financial Institution	Transit	Account Number		

<input type="text"/>	<input type="text"/>	<input type="text"/>	Beneficial Owner's Country of Citizenship:	
First Name	Initial	Last Name	Date of Birth mm/dd/yyyy	<input type="checkbox"/> Canada <input type="checkbox"/> United States <input type="checkbox"/> Other
<input type="text"/>			Name of Public Companies in which Beneficial Owner is an Officer or Director, if any:	
Address			<input type="text"/>	
<input type="text"/>	<input type="text"/>	Name of Public Companies in which Beneficial Owner owns or controls 10% or more of the voting shares, if any:		
Occupation	Employer	<input type="text"/>		
Beneficial Owner's Banking Information				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Name of Financial Institution	Transit	Account Number		

<input type="text"/>	<input type="text"/>	<input type="text"/>	Beneficial Owner's Country of Citizenship:	
First Name	Initial	Last Name	Date of Birth mm/dd/yyyy	<input type="checkbox"/> Canada <input type="checkbox"/> United States <input type="checkbox"/> Other
<input type="text"/>			Name of Public Companies in which Beneficial Owner is an Officer or Director, if any:	
Address			<input type="text"/>	
<input type="text"/>	<input type="text"/>	Name of Public Companies in which Beneficial Owner owns or controls 10% or more of the voting shares, if any:		
Occupation	Employer	<input type="text"/>		
Beneficial Owner's Banking Information				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Name of Financial Institution	Transit	Account Number		

**Do any entities hold more than 10% ownership? If applicable, complete the entity information below.**  Yes  No  
(Attach list if space is insufficient)

<input type="text"/>	<input type="text"/>
Name of Entity	Address
<input type="text"/>	<input type="text"/>
Name of Entity	Address

## SECTION 2: SETTLOR INFORMATION

Settlor information must be collected for each Settlor (the individual donating money to the trust) of a trust. (Attach list if space is insufficient)  
Not applicable to publicly traded trusts. If Settlor is non-individual, only the name and address are required.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Settlor's Country of Citizenship:		
Settlor's First Name	Initial	Settlor's Last Name	Date of Birth mm/dd/yyyy	<input type="checkbox"/> Canada	<input type="checkbox"/> United States	<input type="checkbox"/> Other
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Settlor's Employer		
Name of Settlor, if Non-Individual	Settlor's Occupation		Settlor's Employer			
<input type="text"/>	Name of Public Companies in which Settlor is an Officer or Director, if any:					
Settlor's Address	<input type="text"/>					
Settlor's Banking Information			Name of Public Companies in which Settlor owns or controls 10% or more of the voting shares, if any:			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Name of Financial Institution	Transit	Account Number	<input type="text"/>			

## SECTION 3

Do any of the Beneficial Owners own 25% or more of the corporation / entity?  
If Yes, complete personal information below. (Attach list if space is insufficient)

Yes  No

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	Initial	Last Name	Date of Birth mm/dd/yyyy
<input type="text"/>	<input type="text"/>		
Address	Occupation		

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	Initial	Last Name	Date of Birth mm/dd/yyyy
<input type="text"/>	<input type="text"/>		
Address	Occupation		

## SECTION 4

Is the Charitable Organization registered with CRA (Canada Revenue Agency):

Yes  No

If Yes, provide the CRA registration number:

If No, does the charitable Organization solicit donations from the public:

Yes  No

## SECTION 5

Do any of the individual(s)/member(s), by sum of direct or indirect<sup>†</sup> ownership, hold less than 10% ownership? If applicable, complete personal information below. (Attach list if space is insufficient)

Yes  No

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	Initial	Last Name	Date of Birth mm/dd/yyyy

<input type="text"/>
Address

Do any entities hold less than 10% ownership? If applicable, complete the entity information below.

Yes  No

(Attach list if space is insufficient)

<input type="text"/>	<input type="text"/>
If Indirect Ownership, name of Entity	Address

## SECTION 6: Client confirms that all information provided establishing the entity's ownership, control and structure is complete and accurate.

_____	_____
Signature	Date
_____	_____
Signature	Date

Information provided on this form is used strictly for the purpose of satisfying regulatory requirements. Kindly forward completed form with your Account Application to RBC Direct Investing.

<sup>†</sup> An indirect account holder is someone who has beneficial ownership through the structure of an account. i.e. ABC is owned equally by BBB and CCC, BBB is equally owned by John and Jane while CCC is equally owned by Peter and Sue. The indirect account holders are John, Jane, Peter and Sue.

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