

Qualified Intermediary Application

Name of Applicant

Eligibility of Applicant (Check One)

Non-U.S. Financial Institution Non-U.S. Clearing Organization Branch of U.S. Financial Institution Other Explanation

Address of Applicant

Address Line

| | | |
|---------|------------------|----------|
| City | State (Province) | Zip Code |
| Country | | |

Description of Business of the Applicant

Description of New Account Opening Procedures

Responsible Party Information

| | | |
|---|--|-----------|
| First Name | Middle Initial | Last Name |
| Title | Telephone Number (include Country Code if applicable): | |
| Fax Phone Number (include Country Code if applicable) | E-mail address | |

Contact Person Information

| | | |
|---|--|-----------|
| First Name | Middle Initial | Last Name |
| Title | Telephone Number (include Country Code if applicable): | |
| Fax Phone Number (include Country Code if applicable) | E-mail address | |

Type of Account Holders (Enter approximate number for each Type)

| | | | |
|---|--|---|--|
| Foreign Individual Non-treaty Claimant | | Foreign Individual Treaty Claimant | |
| Foreign Non Individual Ben. Owner Non-Treaty Claimant | | Foreign Non Individual Ben. Owner Treaty Claimant | |
| Foreign Tax Exempt Entries | | Foreign Intermediaries | |
| Foreign Flow Through | | US Individuals, Partnerships, Trusts | |
| Other US Persons | | | |

Investments In US Assets (Enter approximate number for each Type)

| | | | |
|---|--|---|--|
| Foreign Individual Non-treaty Claimant | | Foreign Individual Treaty Claimant | |
| Foreign Non Individual Ben. Owner Non-Treaty Claimant | | Foreign Non Individual Ben. Owner Treaty Claimant | |
| Foreign Tax Exempt Entries | | Foreign Intermediaries | |
| Foreign Flow Through | | US Individuals, Partnerships, Trusts | |
| Other US Persons | | | |

Will Applicant Assume Primary Withholding Responsibility Yes No

External Auditor Information

Address Line

| | | |
|------|------------------|----------|
| City | State (Province) | Zip Code |
|------|------------------|----------|

Country

| | |
|---|---|
| Telephone Number (include Country Code if applicable) | Fax Phone Number (include Country Code if applicable) |
|---|---|

Contact Person at External Auditor Firm

| | | |
|------------|----------------|-----------|
| First Name | Middle Initial | Last Name |
|------------|----------------|-----------|

| | |
|-------|--|
| Title | Telephone Number (include Country Code if applicable): |
|-------|--|

| | |
|---|----------------|
| Fax Phone Number (include Country Code if applicable) | E-mail address |
|---|----------------|

Has Form SS-4 Been Submitted Yes No

Has the Applicant or Any Related Entity Previously Applied for QI Status Yes No

Instructions

In addition to the application form, the follow must be submitted

- I Letter of intention to enter into a QI agreement
- II Form SS-4
- III A brief description of the business activity of the applicant (Attachment A)
- IV A brief description of the account opening procedures used by the applicant (Attachment B)
- V Form 2848 (Power of Attorney) where applicable

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. We need it to ensure that you are complying with these laws.

The IRS may not conduct or sponsor, and an organization is not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB number. Books or records relating to a collection of information must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and tax return information are confidential, as required by 26 U.S.C. 6103 and 6104.