

Welcome to BMO InvestorLine MATERIAL CHANGE FORM

To ensure continuous access to your account(s), please submit the fully completed, dated, and signed original.

A INFORMATION ABOUT YOU (please print clearly)

Account #1: Transaction # _____

Related Accounts #2 #3 #4

Title Last Name First Name Initials

Primary Residence Address Suite No.

(No., street, P.O. Box address is not allowed)

City or Town Prov. Postal Code Country

Marital Status Home Phone (area code, no.) Business Phone (area code, no.)

Citizenship Email Address

Residency for Tax purposes (Check all that apply)

- Canada (You must be a resident of Canada to open a BMO InvestorLine account) Social Insurance Number (required by Canada Revenue Agency) If you are using a SIN starting with a 9 please submit a photocopy of your SIN card showing a valid expiry date.
- U.S. Tax Identification Number _____ (please provide a reason if Tax Identification Number is missing)
- Other (please specify) Tax Identification Number _____ (please provide a reason if Tax Identification Number is missing)
- Other (please specify) Tax Identification Number _____ (please provide a reason if Tax Identification Number is missing)

Reasons for missing Tax Identification Number (TIN):

- 1. I have applied for a TIN but have not yet received one.
- 2. My jurisdiction of tax residence does not issue TINs to its residents.
- 3. Other (please provide details) _____

If the country of your primary residence does not match with one of your tax residencies listed on this form, please either add the country of primary residence as a tax residence OR in the section below provide an explanation for why you should not be considered as a tax resident in the country of your primary residence. A lack of a reasonable explanation may cause your account to be reportable as a foreign resident account holder to the Canada Revenue Agency (CRA): _____

B ABOUT YOUR BUSINESS

- Pro BMO Staff
- Employment Status Full-time (30 hours or more per week) Part-time (Less than 30 hours per week) Self employed Unemployed
- Retired (Please provide your last: occupation, employer's name, industry, city and prov.) Casual/Contract Seasonal

Occupation Employer Name

Industry Job Title

Employer's Address

Employer's Phone Number

1. Are you, or your spouse/common-law partner:
 - a. An insider, director or senior officer (i.e. an officer or one of the five highest paid employees) of a publicly traded (exchange or over-the-counter) company or affiliate of such a company? Or Individually, or as part of a group, own more than 10% of the voting rights attached to all voting securities?
 - Yes
 - No Company Name(s):
 If yes, are you a Reporting Insider under Canadian securities legislation?
 - Yes
 - No Company Name(s):
 - b. Separately or in combination with other persons, a holder of more than 20% of the outstanding voting securities of a publicly traded (exchange or over-the-counter) company or affiliate of such a company?
 - Yes
 - No Company Name(s):
 - c. Individually, or as part of a group, a member with controlling interest in a publicly traded (exchange or over-the-counter) company or affiliate of such a company?
 - Yes
 - No Company Name(s):
2. Do you have, or exercise authority over, any brokerage accounts with other financial institutions?
 - Yes Financial institution(s):
 - No Account Type: Account Type:
3. Do you have, or exercise authority over, any accounts with BMO InvestorLine?
 - Yes
 - No Account #1: Account #2:

B ABOUT YOUR BUSINESS (continued)

4. Will any other person have authority over, or any financial interest in, your account(s)? If another person will have authority over your account(s), please complete our "Authorized Trading Agent or Power of Attorney" form

Yes
 No Name: _____

5. Will anyone other than yourself use or direct transactions in this account? *This excludes those authorized to give instructions about the account, i.e., Joint Account Holder, Trading Agent, Power of Attorney and Trustee.*

Yes If yes, please complete the "Third Party Information" form. Please contact BMO InvestorLine for this form.
 No

C SPOUSE or common-law partner information

Please omit this section if the Applicant's spouse or common-law partner is the Co-applicant. Co-applicants must complete their own material change form if their information has changed.

Title _____ Last Name _____ First Name _____

Occupation _____ Employer Name _____

Industry _____

Pro* BMO Staff

*You are considered to be a Pro if you, or someone you live with, is employed with an IROC member firm or related company. Please provide a letter of confirmation from the member firm's Compliance department authorizing this account(s).

D FINANCIAL information

Please round to the nearest dollar.

Annual Income from all sources _____

Net Liquid Assets (A)
(Cash & Securities less loans outstanding against securities) _____

Net fixed Assets (B)
(Fixed assets less liabilities outstanding against fixed assets) _____

Estimated Net Worth (C)
(C=A+B) _____

Source of Annual Income Employment income Student loans/bursaries or RESP Unemployment benefits Social assistance Alimony (spousal support)
 Retirement income Inheritance Real estate investment Investment in securities Other _____

Intended use of the Account Short Term Investment Long Term Investment Income Generation Savings
 Retirement Savings Education Savings Estate Planning Other _____

E SIGNATURE

I certify that the information on this form is true and complete; the information on this form shall supersede information previously provided; and the terms and conditions of my Client Account Agreement remain in effect. In addition, I certify that I have disclosed all of my citizenships and residencies for tax purposes. I agree to advise you immediately in writing of any material change in information.

Client Signature _____

Date YY/MM/DD | Y | Y | M | M | D | D |