

# International tax self-certification for individuals

First name	Middle initial	Last name	Contract number
Permanent residence address (Do not use a P.O. box or an 'in care of' address, unless it is your sole address)			Apartment or suite
City	Province/State	Country	Postal/Zip code

Mailing address  Same as above

Street number and name	Apartment or suite		
City	Province/State	Country	Postal/Zip code

- Regardless of your current residency and citizenship, each individual account holder/owner must complete this form.
- Canadian financial institutions are required under Part XVIII (Foreign Account Tax Compliance Act - FATCA) and Part XIX (Common Reporting Standard - CRS) of the Income Tax Act (Canada) to collect the information you provide on this form to determine if they have to report your financial account to the Canada Revenue Agency (CRA). The CRA may share that information with the government of a foreign jurisdiction that you are resident of for tax purposes. Additionally, if you are a United States person (which includes a United States citizen or resident for tax purposes) the CRA may share your account information with the Internal Revenue Service (IRS).
- Complete all sections that apply to you.
- You must notify us within 30 days of all changes and provide us with a new [International tax self-certification for individuals \(4573-E\)](#) form. A change includes information that affects your tax residency outside of Canada, such as a change in address or telephone number. We will update the information in our records when you advise us of a change.

We will use the information provided in this form to determine whether we must report your account to the CRA. If you do not complete this form, we may be required to report your account information to the CRA.

## 1 Self-certification

**Residency** is the basis on which most countries tax individuals and entities. Generally, an individual is subject to the tax laws of the jurisdiction of which they are a resident. It is possible to be a resident of more than one jurisdiction for tax purposes. A resident of a jurisdiction may also include a non-citizen who holds a permanent residency card, for example, a U.S. green card. An individual may also be a resident of a jurisdiction based on the type of visa the individual holds. Every country has their own rules to determine whether you are a resident of their country and subject to their tax rules. Those rules and the application of them can be very complicated. Therefore, we recommend that you speak with a **professional tax advisor** who is knowledgeable about the rules applicable to the country in question.

**Note:**

- If you are a tax resident in any jurisdiction other than Canada and do not have a Taxpayer Identification Number (TIN) from that jurisdiction(s) when you complete this form, you must apply for one within 90 days.
- Upon receipt of your TIN you must notify Sun Life Financial within 15 days.
- If you fail to provide your TIN you may be subject to a penalty under the Income Tax Act (Canada).
- If you need additional space for any section of this form, complete the applicable sections on a new [International tax self-certification for individuals \(4573-E\)](#) form.



## 1 Self-certification (continued)

- If you have not provided government-issued identification to Sun Life within the last 30 days, please provide one of the following that includes your name and address to support the representation of your tax jurisdiction.
- Acceptable forms of government-issued identification include:
  - a passport
  - a national identity card
  - a driving licence
  - a provincial health insurance card (if not prohibited by provincial law)
  - a birth certificate provided by an individual under the age of 21
  - a government-issued age of majority card
  - a Canadian citizenship card
  - a Record of Landing (IMM1000)
  - a Confirmation of Permanent Residence (IMM 5292) issued before 1/1/2004
  - a permanent residence card
  - a Canadian Armed Forces identity card
  - a government-issued Certificate of Indian Status
  - an Alberta photo identification card
  - a B.C. identification card
  - a Government of Newfoundland and Labrador photo identification card
  - a Nova Scotia photo identification card
  - a Prince Edward Island voluntary ID
  - a Saskatchewan mandatory photo ID
  - a Manitoba identification card
  - a NEXUS card

### Account holder/Owner/Beneficiary claimant/Collateral assignee

First name	Middle initial	Last name	Social Insurance Number (SIN)	Date of birth (dd-mm-yyyy)
<b>FATCA</b> Are you a U.S. resident for tax purposes (which includes a U.S. citizen)? <input type="checkbox"/> No <input type="checkbox"/> Yes   If yes, provide a U.S. Taxpayer Identification Number (TIN).		U.S. Taxpayer Identification Number		
<b>CRS</b> Are you a resident of any other jurisdiction other than Canada and the U.S. for tax purposes? <input type="checkbox"/> No <input type="checkbox"/> Yes   If yes, provide your jurisdictions of tax residence and Taxpayer Identification Numbers (TINs).				
Jurisdiction of tax residence		If you do not have a Taxpayer Identification Number (TIN), give the reason using one of these choices:		
Taxpayer Identification Number		<input type="checkbox"/> Reason A: I have applied for a TIN but have not yet received it. <input type="checkbox"/> Reason B: My jurisdiction of tax residence does not issue TINs to its residents. <input type="checkbox"/> Other: Specify the reason _____		

## 2 Individual temporary visitors to the U.S.

Optional and only if applicable, as in the case of certain Canadian individuals, such as retirees or “snowbirds” and students, who spend considerable time visiting in the U.S. This declaration is valid until the earlier of (1) the end of the calendar year in which 7 years have elapsed since the declaration was made and (2) until it is no longer valid, e.g. because the individual has become a U.S. person (a U.S. citizen or resident of the U.S. for tax purposes)

First name	Middle initial	Last name
I certify that I am a resident of Canada for tax purposes. I further certify that any U.S. telephone number or address associated with this account only exists for, or will arise only in the context of, temporary visits that I make to the U.S. while I remain a resident of Canada and will not, at any time, exist or arise because I am a resident of the U.S. for tax purposes or a U.S. citizen. I agree to notify Sun Life Financial if events cause this certification to be false or misleading.		
<input type="checkbox"/> Check if making this declaration.		

**3 Account holder/Owner/Beneficiary claimant/Collateral assignee declaration and signature(s)**

**Sun Life Financial Privacy Statement for Canada**

Respecting your privacy is a priority for the Sun Life Financial group of companies. We keep in confidence personal information about you and the products and services you have with us to provide you with investment, retirement and insurance products and services to help you meet your lifetime financial objectives. To meet these objectives, we collect, use and disclose your personal information for purposes that include: underwriting; administration; claims adjudication; protecting against fraud, errors or misrepresentations; meeting legal, regulatory or contractual requirements; and we may tell you about other related products and services that we believe meet your changing needs. The only people who have access to your personal information are our employees, distribution partners such as advisors, and third-party service providers, along with our reinsurers. We will also provide access to anyone else you authorize. Sometimes, unless we are otherwise prohibited, these people may be in countries outside Canada, so your personal information may be subject to the laws of those countries. You can ask for the information in our files about you and, if necessary, ask us in writing to correct it. To find out more about our privacy practices, visit [www.sunlife.ca/privacy](http://www.sunlife.ca/privacy).

I declare that the information I hereby provide on this form is, to the best of my knowledge and belief, correct and complete.

Signature of <b>Account holder/Owner/Beneficiary claimant/Collateral assignee</b> <b>X</b>	Date (dd-mm-yyyy)
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Return to:

Sun Life Assurance Company of Canada, 227 King Street South, P.O. Box 1601 STN Waterloo, Waterloo, ON N2J 4C5