## **APPLICATION TO REGISTER A** LABOUR-SPONSORED VENTURE CAPITAL CORPORATION

- A labour-sponsored venture capital corporation, as described in subsection 204.81(1) of the *Income Tax Act*, has to use this form to apply for registration.
- If we register a corporation, we consider it to be registered on the later of the following two dates:
  - the date we receive this form; or
  - the date on which the corporation specifies the registration will take effect.
- We can revoke a corporation's registration if any of the situations described in subsection 204.81(6) or (8.1) of the Income Tax Act occurs.
- If we refuse to register a corporation, or advise the corporation that we intend to revoke its registration, the corporation can appeal to the Federal Court of Appeal.
- Complete and send this application, separate from any other form or return, to:

Information Returns Section Business Returns and Payments Processing Directorate Canada Revenue Agency 9th Floor, East Tower, 750 Heron Road Ottawa ON K1A 0L5

Do not use this area		
Federal registration number		
LV —		

Applicant's name	Business Number	
Address	Postal code	
Mailing address (if different from above)	Postal code	
Effective date of registration (must be on or after the date we receive the application):  Date relation  Name of sponsoring eligible labour body	eceived Or Specified date:  Postal code	
Address		
Person to contact for more information: (please print)  First name Last name (please print)	Telephone number	
Please attach the following documents and information:		
a copy of the articles of the corporation and all amendments		
a copy of the preliminary prospectus filed with the governing Securities Commission		
a list of the names and addresses of the members of the Board of Directors that the Class B shareholders appointed		
the percentage of the members of the Board of Directors that the C	lass B shareholders appointed %	
the number of Class B shares the corporation issued to the eligible labour bodies		
Certification —		
I,, certify that the information given on this form and in any documents attached is, to the best of my knowledge, correct and complete.		
Date Authorized officer's signatu	ure Position or office	

