

|                       |                                                                          |                |  |
|-----------------------|--------------------------------------------------------------------------|----------------|--|
| FORM<br><b>CIR-FT</b> | <b>CORPORATE INFORMATION RETURN FOR<br/>FOREIGN TRUST</b>                | Calendar Year: |  |
|                       | Annual Information Return of Foreign Trust with Corporate<br>Connections | 20_____        |  |

| SECTION I: REPORTING CORPORATION INFORMATION |  |                 |  |
|----------------------------------------------|--|-----------------|--|
| Name of Corporation                          |  |                 |  |
| Employer Identification Number (EIN)         |  |                 |  |
| Principal Business Activity                  |  |                 |  |
| Registered Address                           |  |                 |  |
| City, State/Province, Country                |  | Postal/Zip Code |  |

| SECTION II: FOREIGN TRUST INFORMATION      |                                                                                                                                                 |                       |  |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--|
| Legal Name of Foreign Trust                |                                                                                                                                                 |                       |  |
| Foreign Tax Identification Number (if any) |                                                                                                                                                 |                       |  |
| Country of Creation/Organization           |                                                                                                                                                 | Date of Establishment |  |
| Address of Foreign Trustee(s)              |                                                                                                                                                 |                       |  |
| Type of Trust                              | <input type="checkbox"/> Grantor<br><input type="checkbox"/> Non-Grantor<br><input type="checkbox"/> Simple<br><input type="checkbox"/> Complex |                       |  |

| SECTION III: RELATIONSHIP AND FINANCIAL SUMMARY                                      |
|--------------------------------------------------------------------------------------|
| <i>Report all amounts in equivalent local currency of the reporting corporation.</i> |

|                                                                    |                                                                                                                                                                     |
|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Nature of Relationship to Trust                                    | <input type="checkbox"/> Grantor/Settlor<br><input type="checkbox"/> Beneficiary<br><input type="checkbox"/> Transferor of Assets<br><input type="checkbox"/> Other |
| Total value of assets transferred to the trust during the tax year |                                                                                                                                                                     |
| Total distributions received from the trust during the tax year    |                                                                                                                                                                     |
| Fair Market Value of trust assets held at the end of the tax year  |                                                                                                                                                                     |

| SECTION IV: DESIGNATED AGENT / FIDUCIARY IN HOME COUNTRY |  |               |  |
|----------------------------------------------------------|--|---------------|--|
| Name of Agent / Representative                           |  |               |  |
| Address                                                  |  |               |  |
| Phone Number                                             |  | Email Address |  |

| SECTION V: DECLARATION AND SIGNATURE |
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*Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.*

Signature of  
Officer:

Date:

Printed Name:

Title: