

Mailing Address: PO Box 9444 Stn Prov Govt Victoria BC V8W 9W8 gov.bc.ca/incometaxes

## APPLICATION FOR REGISTRATION OF A CORPORATION

under the International Business Activity Act

General Inquiries: 250 953-3082 Toll-free: 1 877 387-3332 Fax Number: 250 356-0434

FOR OFFICE USE ONLY						
DATE RECEIVED YYYY / MM / DD	AMOUNT ENCLOSED					
	\$					

## **INSTRUCTIONS**

- This form must be completed to apply for registration of a corporation under the International Business Activity Act (IBA).
- · All applicable information must be provided.
- Application fee: \$5,000. Submit this form with a cheque or money order payable to the Minister of Finance.
- For more information, refer to How to Complete the Application for Registration of a Corporation.

Freedom of	Informa	tion and	l Prote	ction c	of Priv	acy.	Act (F	OIPPA)

The personal information on this form is collected for the purpose of administering the *International Business Activity Act* under the authority of section 26(a) of the FOIPPA. Questions about the collection or use of this information can be directed to the Manager, Intergovernmental Relations, PO Box 9444 Stn Prov Govt, Victoria BC V8W 9W8 (telephone: Victoria at 250 387-3332 or toll-free at 1 877 387-3332. Email: ITBTaxQuestions@gov.bc.ca

1. Applicant Information LEGAL NAME TAX YEAR END **BUSINESS NUMBER** YYYY / MM / DD (9 digits) MAILING ADDRESS (include street or PO box, city, province and postal code) ACCOUNT NUMBER (5 digits) С LOCATION OF BOOKS AND RECORDS - IF DIFFERENT THAN MAILING ADDRESS (include street or PO box, city, province and postal code) 2. Contact Information POSITION TELEPHONE NUMBER NAME **EMAIL ADDRESS** 3. Type of International Business International Film Distribution Business International Financial Business International Patent Business International Digital Media Distribution Business 4. Registration Information A. Is the corporation a result of an B. Is the corporation exempt from tax If YES, YES YES amalgamation of one or more IBA attach under section 27 of the Income Tax Act registrants? NO Schedule A (British Columbia)? NO

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C. Is the corporation incorporated or amalgamated in Canada?  If <b>YES</b> , provide date of incorporation or amalgamation	YYYY / MM / DD	D. Provide the corpora number (if available				
E. Does the corporation have a permanent establishment in Britis	h Columbia?					
YES NO If <b>YES</b> , provide location (if different from ma	ailing address)					
F. Does the corporation have a fixed place of business in British (	Columbia?					
YES NO If <b>YES</b> , provide location ( <i>if different from mailing address</i> )						
5. Supporting Documentation						
Schedule A: Amalgamation (FIN 574A)						
Authorization or Cancellation of a Representative (FIN 564)						
ATTACHMENTS						
Incorporating and legal documentation						
Business plan(s) related to international business(es)						
List of international financial activities or qualifying transaction	S					
List of locations						
A copy of the most recent financial statements						
A copy of the most recent corporate income tax return (T2) filed with the Canada Revenue Agency, if available						
List of directors and contact information						
List of related or affiliated persons						
6. Fees						
\$5,000 fee is attached						
Amalgamation						
7. Certification – An authorized signing authority must make the following declaration.						
I,, certify that, to the best of my						
(Full Legal Name)  knowledge and belief, all of the information given in this application is true, correct and complete in all material respects.						
SIGNATURE OF AUTHORIZED SIGNING AUTHORITY	POSITION		DATE SIGNED YYYY / MM / DD			

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