###### **APPLICATION FOR ANNUAL CERTIFICATE**

**ORIGINAL TEXT IN FRENCH**

###### APPENDIX 1: SUMMARY SHEET QIFT 7.24

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **QIFT 7.24** | **Activities performed under the Québec Immigrant Investor Program (QIIP)** |  | From: | To: |  |  |  |  |
|  |  |  |  |  |  |  |
|  | Taxation year covered |  |  | IFC certificate number |  |
|  |
|  | A) If, during the taxation year covered by this application, the IFC performed activities under the QIIP, check the following box: |  |  |  |
|  |  |  |
|  |
|  |
|  | B) Did the corporation operating the IFC perform these activities **as** a certified financial intermediary of the QIIP or **on behalf** of a certified financial intermediary of the QIIP? (see note) |  | Yes |  | No |  |  |
|  |  |  |  |  |
|  |  |
|  | **If you answered “no”**, please specify: |  |  |
|  |  |  |
|  |
| C) Did the corporation operating the IFC perform activities in the course of the **former QIIP**? |  | Yes |  | No |  |  |
|  |  |  |  |  |
|  |
| D) Did the corporation operating the IFC perform activities in the course of an immigrant investor program (IIP) **other than Québec’s program**? |  | Yes |  | No |  |  |
|  |  |  |  |  |
|  | **If you answered “yes”**, indicate, in relation to all your income from the various IIPs, the portion attributable to programs **other than Québec’s program**: |  |  |  |  |  |  |
|  |  | \_\_\_\_\_\_\_ % |  |
|  |  |  |
|  | **Note*** Only activities performed under the QIIP stipulated in the general agreement signed by a certified financial intermediary and Investissement Québec constitute QIFTs.
* In addition, to constitute a QIFT, any other service provided to a foreign investor participating in the QIIP must satisfy the requirements of the Act respecting international financial centres (CQLR, chapter C-8.3).
 |  |
|  |  |  |

If more space is required, append a document with the additional information and indicate the number of the summary sheet.