



Affiliated Corporations, Partnerships, Partners or Trusts

Protected B when completed

**T5013
Schedule 9**

Partnership's name	Partnership's account number _ _ _ _ _ _ _ _ _ _ RZ _ _ _ _ _	Fiscal period end (YYYY/MM/DD) _ _ _ _ / _ _ / _ _	Original <input type="checkbox"/>
			Amended <input type="checkbox"/>

- Complete this schedule if, during the fiscal period, the partnership was affiliated with any of the following persons as defined in subsections 248(1), and 251.1(1) and (3) of the *Income Tax Act*:
 - a corporation
 - a majority interest partner of your partnership
 - another partner
 - a trust
- All the information requested in this form and in the documents supporting your information return is "prescribed information".
- Complete this schedule using the instructions in Guide T4068, *Guide for the Partnership Information Return (T5013 forms)*.
- If you do not have enough space to list all the information, use an additional Schedule 9 (T5013 SCH 9).
- Attach the original copy of this completed schedule to Form T5013 FIN, *Partnership Financial Return*.

	100	200	300	400	500	600	700	800
	Name of affiliated entity	Country of residence (if other than Canada)	Business or identification number of affiliated entity (Canadian entity only)	Affiliation code*	Number of common shares, preferred shares, partnership interests or trust interests owned	Type of equities owned	% of ownership	Book value of equities owned
1.			_ _ _ _ _ _ _ _ _ _					
2.			_ _ _ _ _ _ _ _ _ _					
3.			_ _ _ _ _ _ _ _ _ _					
4.			_ _ _ _ _ _ _ _ _ _					
5.			_ _ _ _ _ _ _ _ _ _					
6.			_ _ _ _ _ _ _ _ _ _					
7.			_ _ _ _ _ _ _ _ _ _					
8.			_ _ _ _ _ _ _ _ _ _					
9.			_ _ _ _ _ _ _ _ _ _					
10.			_ _ _ _ _ _ _ _ _ _					
11.			_ _ _ _ _ _ _ _ _ _					

* Enter the applicable code for each entity identified in column 100 to indicate how it is affiliated with your partnership: 1 – Top tier partnership; 2 – Second tier partnership; 3 – Multi-tier partnership; 6 – Member of a controlling group.