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## Foreign Participant Tax Identification Number Waiver Form

I, \_\_\_\_\_ (foreign participant's name), hereby confirm that the Film Musicians Secondary Markets Fund ("Fund") has informed me of my obligations with respect to obtaining a US Tax Identification Number (TIN), and has fully informed me of the procedures and contact information for obtaining a TIN. I further confirm that I have been either unable to or have otherwise elected not to obtain such a number, and hereby authorize the Fund to process and remit payments due me after deducting the applicable default statutory US tax obligation (currently 30%).

Address where payment will be sent:

\_\_\_\_\_  
(Street, Apt #)

\_\_\_\_\_  
(Province/District)

\_\_\_\_\_  
(Country / Postal Code)

\_\_\_\_\_  
(Email)

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)