



OSFI 49 ANNUAL INFORMATION RETURN

For assistance with completing this form, please refer to the Instruction Guide to Completing the OSFI 49 Annual Information Return and OSFI 49A Schedule A - Canada Revenue Agency Information Requirements.

Page 20.010

Reporting Period

	From 001 DD/MM/YYYY	To 002 DD/MM/YYYY	No. of Months 003
045			

Page 20.012

Membership

	001
002 Number of members at the plan's previous year end	
003 ENTRANTS: (include employees joining the plan and transfers from other plans)	
005 Total of lines 002 plus (+) 003	
006 EXITS: Retirement or death	
008 Termination of membership (include transfers to another plan)	
009 Total of lines 006 plus (+) 008	
011 Number of members at plan year end (line 005 minus (-) line 009)	
013 Inactive members: (number of members from line 011 for whom no contributions were made)	

Membership by location at the end of the plan year

		Male 001	Female 002	Included Employment 003
015	Newfoundland			
016	Prince Edward Island			
017	Nova Scotia			
018	New Brunswick			
019	Quebec			
020	Ontario			
021	Manitoba			
022	Saskatchewan			
023	Alberta			
024	British Columbia			
025	Yukon Territory			
028	Northwest Territories			
029	Nunavut			
030	Outside Canada			
034	Total Male / Female / Included Employment			

035	Total Membership (sum of cols. 001 and 002 on line 034), (Must equal line 011)	
036	Other Beneficiaries	
038	Grand Total	

Current Service Payments remitted for the plan year

	\$ Amount 001
040	Member contributions
042	Additional voluntary contributions
044	Total member contributions (line 040 plus (+) line 042)
045	Employer current service contributions (determined from plan documents or actuarial valuation report)
047	Amount credited from surplus/forfeitures
049	Net employer current service contributions (line 045 minus (-) line 047)

Contribution Base – Complete (a) or (b), and (c)

	Class 001	\$ Payroll 002
050 (a) Total payroll of plan members (by contribution class)		
051		
054 (b) Describe base if other than payroll 001		
055 (c) Were employer contributions the result of a collective agreement? 001	<input type="radio"/> Yes <input type="radio"/> No	

Collective bargaining agent representing the largest number of pension plan members, if applicable

	001	002
056		Expiry date of collective agreement
		DD/MM/YYYY

Page 20.014

This page is for Defined Benefit/Combination plans only

Amount of Special Payments paid into the pension fund

	\$ Amount 001
001 Total annual unfunded liability payment(s)	
002 Total annual solvency deficiency payment(s)	
003 Other special payment(s)	
005 Total of all special payment(s)	

If adjustments were made to pensions in pay during the year, please check the appropriate boxes below. If no adjustments were made, proceed to page 20.016.

Reason for the adjustment(s) 001

- 015 Regular inflation adjustment of benefits as required by the plan documents
- 016 Pursuant to a collective agreement
- 017 Voluntarily by the employer
- 018 Other (explain below)

019

The basis for the adjustment(s) 001

- 020 Full Consumer Price Index
- 022 Partial Consumer Price Index
- 027 Excess interest formula (adjustments based on excess earnings in the pension fund)
- 028 Percentage increase (not based on CPI)
- 030 Flat dollar amount (\$ annually)
- 033 Other (explain below)

002

035

--

Page 20.016

Amendments

003 Were any amendments made to the plan during the year?

- Yes
- No

If "Yes", have the amendments been submitted to OSFI?

- Yes
- No

Comments on or explanations of answers given in any of the above sections.

010 001

--