

	OFFICE USE ONLY		
DATE ENTRY DATE/INITIALS			
CO REVIEW DATE/INITIALS			

# **COST CERTIFICATE**

This form should reflect only costs and demographics associated with the Defined Benefit provisions of the pension plan

PART A - PLAN INFORMATION AND CONTRIBUTIONS				
CRA REGISTRATION NUMBER:		ALBERTA FIL	E NUMBER:	
OFFICIAL NAME OF THE PLAN:				
ACTUARIAL REVIEW DATE:	(YYYY-MM-DD)	CERTIFICATE START DA CERTIFICATE END DATE		(YYYY-MM-DD) (YYYY-MM-DD)
REVIEW TYPE: Full (Regular Trient	nial or Annual) <b>Full</b>	· · _	mendment, Me	erger, Split, Partial Windup etc <b>)</b> <b>v</b>
<ul> <li>The Actuarial Review Date must coincide with the Plan Year End (unless a specific review date is otherwise defined in the plan text), except:         <ul> <li>for a Full Review due to a Major Event, where the Actuarial Review Date is the effective date of the event.</li> <li>for an Interim Review, where the Actuarial Review Date must be the same as that shown on the last filed Full Review.</li> <li>for an Initial Review, where the Actuarial Review Date is the same as the Plan Effective Date.</li> </ul> </li> <li>The Certificate Start Date is one day after the Actuarial Review Date, except:         <ul> <li>for an Interim Review, where the Certificate Start Date is the same as the effective date of the event.</li> </ul> </li> <li>The Certificate End Date must coincide with the Plan Year End (unless a specific review date is otherwise defined in the plan text) and must be no more than three years later than the Actuarial Review Date, except:         <ul> <li>for an Interim Review, where the Certificate End Date must be the same as the same as that shown on the last filed Full Review.</li> </ul> </li> </ul>				
	ART B - GOING	CONCERN RE	SULTS	
(1) Normal Actuarial Cost (Cur	EMPLOYER	COST		MEMBER COST
ESTIMATED NORMAL ACTUARIAL COST FOR FIRST YEAR OF PERIOD COVERED	\$		\$	
RULE FOR HOW THE NORMAL ACTUARIAL COST IS CALCULATED FOR THE PERIOD COVERED (COMPLETE		WERED PAYROLL <b>OR</b>		% OF COVERED PAYROLL
ONE)	OTHER (describe):		cribe):	
(2) Special Information for Spe	ecified Multi-Employer	Pension Plans (SM	EPPs)	
A) NORMAL ACTUARIAL COST		\$		(DOLLARS PER HOUR)
B) EXCESS ASSETS USED TO OFFSET NORMAL ACTUARIAL COST		\$ (	\$ ( ) (DOLLARS PER HOUR)	
C) UNFUNDED LIABILITY PAYMENTS		\$	\$ (DOLLARS PER HOUR)	
D) SOLVENCY DEFICIENCY PAYMENTS		\$	\$ (DOLLARS PER HOUR)	
E) CONTINGENCY RESERVE / (SHORTFALL)		\$	\$ (DOLLARS PER HOUR)	
NEGOTIATED CONTRIBUTION RATE [A + B + C + D + E]		\$		(DOLLARS PER HOUR)
AVERAGE ANNUAL HOURS OF WORK ASSUMPTION PER MEMBER				
TOTAL ANNUAL HOURS OF WORK ASSUME	PTION			

### **PART B - GOING CONCERN RESULTS (continued)**

(3) Membership Data at the Actuarial Review Date				
	Number of Members	Average Age		
ACTIVE MEMBERS (include anyone accruing benefits)				
DEFERRED VESTED MEMBERS				
SUSPENDED MEMBERS				
DISABLED MEMBERS (receiving disability pension payments)				
RETIRED MEMBERS (include pensioners / beneficiaries receiving benefits)				
TOTAL COVERED MEMBERS				

(4) Liabilities by Membership Group	Going Concern Liabilities
A) ACTIVE MEMBERS (include anyone accruing benefits)	\$
B) DEFERRED VESTED MEMBERS	\$
C) SUSPENDED MEMBERS	\$
D) DISABLED MEMBERS (receiving disability pension payments)	\$
E) RETIRED MEMBERS (includes pensioners / beneficiaries receiving benefits)	\$
F) TOTAL GOING CONCERN LIABILITIES [A + B + C + D + E]	\$
G) Utilized / Actuarial Value of Assets	\$
H) Excess Assets/(Unfunded Liability) [G - F]	\$
I) Market Value of Assets (including adjustments for payables and receivables)	\$
J) Going Concern Funded Ratio [G / F] (to four decimal places e.g. 0.8762)	
PLEASE EXPLAIN HOW ANY EXCESS ASSETS WILL BE UTILIZED (e.g. to offset current service contrib contribution provision etc):	utions or contributions to a defined

Original Date Established (YYYY-MM-DD)	Balance at the Beginning of Period Covered by this Certificate (based on a monthly amortization schedule)		End of Amortizatio (YYYY-MM-DD)	
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
TOTAL	\$	\$		

## PART B - GOING CONCERN RESULTS (continued)

(6) SOURCES OF GAIN AND LOSS (does not need to be completed for an Initial or Interim Review)		
Total Excess Assets/(Unfunded Liability) at last Regular Review	\$	
Gains/(Losses) due to:		
⇒ Expected Interest on Excess/(Unfunded Liability)	\$	
⇒ FUND INVESTMENT RETURN DIFFERENT THAN ASSUMED	\$	
⇒ REQUIRED SPECIAL PAYMENTS (PER PREVIOUS COST CERTIFICATE)	\$	
⇒ SPECIAL PAYMENTS DIFFERENT THAN REQUIRED (PER PREVIOUS COST CERTIFICATE)	\$	
⇒ CURRENT SERVICE CONTRIBUTIONS DIFFERENT THAN REQUIRED (PER PREVIOUS COST CERTIFICATE)	\$	
⇒ DEMOGRAPHIC ACTIVITY DIFFERENT THAN ASSUMED	\$	
⇒ EXPENSES DIFFERENT THAN ASSUMED	\$	
⇒ PLAN AMENDMENTS	\$	
⇒ CHANGES TO ECONOMIC ASSUMPTIONS (DETAIL MUST APPEAR IN VALUATION REPORT)	\$	
⇒ Changes to Demographic Assumptions (detail must appear in valuation report)	\$	
⇒ Other (Please describe)	\$	
⇒ Other (Please describe)	\$	
⇒ Other (Please describe)	\$	
Total Excess Assets/(Unfunded Liability) at this Review	\$	

(7) ACTUARIAL METHODS AND ASSUMPTIONS				
Utilized Value of Assets				
MARKET VALUE (includes adjustments for payables and receivables)	ADJUSTED/AVERAGE MARKET VALUE (includes smoothing methods)			
BOOK VALUE	BLEND OF BOOK & MARKET VALUES			
ADJUSTED BOOK VALUE				
Liability Valuation Method				
UNIT CREDIT (Accrued Benefit, projected or not)				
ENTRY AGE NORMAL				
Aggregate				
Mortality	Tables			
GAM 94 (with or without adjustments)	GAM 83 (adjusted)			
GAR 94 (GAM 94 WITH A PROJECTION TABLE) (with or without adjustments)	GAM 83 (not adjusted)			
UP 94 (GAM 94 WITHOUT MARGINS) (with or without adjustments)	GA 71 (adjusted)			
OTHER (UP 84, GAM 71, CONSTRUCTED TABLE ETC.) PLEASE SPECIFY:				

### PART B - GOING CONCERN RESULTS (continued)

(7) ACTUA	(7) ACTUARIAL METHODS AND ASSUMPTIONS (continued)						
Interest Rate (for Active Members) Salary Increase Rates			Rates				
%	FOR THE FIRST		YEARS	A) INFLATION	1:		%
%	THEREAFTER (IF D	IFFERENT T	HAN ABOVE)	в) Product	IVITY:		%
Post-Retirement Indexing Rate: %		C) MERIT: If Merit is age or service related, indicate the average expected merit for membership as a whole.		%			
Maximum I	Pension Escalatio	n Rate:	%	<b>TOTAL [A+B+C]</b> NOTE: Simply showing a total is not sufficient i.e.the components in A, B & C must be shown.		%	
YMPE Esca	alation Rate:		%	Withdrawal	Table/Rates Used?		Yes
Relative Aç	ge of Pension Par	tner:			Proportion with Pe	nsion Partner:	%
			Expense	Assumption			
A) NONE (EMPLOYER PAYS ALL EXPENSES)							
B) IMPLICIT ONLY (INTEREST RATE IS NET OF ALL EXPENSES)							
C) EXPLICIT ONLY - SPECIFY DOLLAR AMOUNT: \$							
D) COMBINATION OF IMPLICIT AND EXPLICIT - SPECIFY DOLLAR AMOUNT FOR EXPLICIT PORTION: \$							
Other Rele	vant Going Conce	erns Assu	mptions not I	Noted Above:			

### PART C - SOLVENCY RESULTS

(1) Tot	(1) Total Plan Solvency – This Section Must be Completed in its Entirety		
(A)	MARKET VALUE OF ASSETS (INCLUDING ADJUSTMENT FOR PAYABLES AND RECEIVABLES). MUST EQUAL THE FIGURE REPORTED IN SECTION B-4 (I).	\$	
(B)	LESS ASSUMED WINDUP EXPENSES	\$	
(C)	= SOLVENCY ASSETS FOR CALCULATING SOLVENCY RATIO [A - B]	\$	
(D)	PLUS PRESENT VALUE OF GOING-CONCERN SPECIAL PAYMENTS	\$	
(E)	= SOLVENCY ASSETS FOR CALCULATING SOLVENCY DEFICIENCY [C + D]	\$	
(F)	SOLVENCY LIABILITIES	\$	
(G)	Solvency Ratio = (C) / (F) (to four decimal places e.g. 0.8762)		
(H)	Total Plan Solvency Excess/(Deficiency) = (E) minus (F)	\$	

(2) Solvency Deficiencies existing at the beginning of the period covered by this certificate				
Original Date Established (YYYY-MM-DD)	Balance at the Beginning of Period Covered by this Certificate	ANNUAL Special Payment (based on a monthly amortization schedule)	End of Amortization (YYYY-MM-DD)	
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
TOTAL	\$	\$		

	PART D - ACTUARIAL OPINION	
Based on the results of my/our actuarial review, I/we hereby certify that, in my/our opinion, the estimated normal actuarial cost and special payments to be made to the plan during the period covered by this certificate, at the rates and amounts specified in this certificate, meet the minimum requirements of the <i>Employment Pension Plans Act</i> and <i>Regulation</i> . Future contribution levels may change as a result of future changes in the actuarial methods and assumptions, the membership data and the plan provisions, or future experience gains or losses resulting from emerging experience differing from the assumptions.		
used is sufficier	on and for the purposes of the actuarial review on which this certificate is based, the data and reliable, the assumptions made are, in aggregate, appropriate and, the methods ppropriate. This opinion has been given in accordance with accepted actuarial practice.	
Regulation. It i	has been prepared in accordance with the <i>Employment Pension Plans Act</i> and s not intended to satisfy the reporting requirements of valuations for funding purposes lard of Practice for Valuation of Pension Plans approved by the Canadian Institute of	
Is this a Qualified	Opinion? Yes No If Yes, please specify:	
ACTUARY'S	DATE	
SIGNATURE:	DATE:	
(printed):	TITLE:	
COMPANY:		
ADDRESS:		
If a second actu	ary has signed the actuarial valuation report, complete the following:	
ACTUARY'S SIGNATURE:	DATE:	
NAME (printed):	TITLE:	
COMPANY:		
ADDRESS:		