



New Plan / Amendment Return

Uniform Statistical Program of Canadian Regulatory and Supervisory Authorities of Employer-Sponsored Pension Plans

Confidential when completed

Collected under the Authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.

Aussi disponible en français

Please return completed form to: Pensions and Wealth Surveys Section Income Statistics Division Statistics Canada Ottawa, Ontario K1A 0T6 Telephone: (613) 951-4031 Fax: (613) 951-4296		FOR STATISTICS CANADA USE ONLY Number Small plan identifier <input type="text"/> 01 <input type="radio"/> Yes Alpha-name 02 <input type="radio"/> No <input type="text"/>															
Type of action <input type="checkbox"/> New plan ▶ effective date <table style="display: inline-table; border-collapse: collapse;"><tr><td style="text-align: center; padding: 0 5px;">Y</td><td style="text-align: center; padding: 0 5px;">M</td><td style="text-align: center; padding: 0 5px;">D</td></tr><tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr></table> <input type="checkbox"/> Amendment ▶ effective date <table style="display: inline-table; border-collapse: collapse;"><tr><td style="text-align: center; padding: 0 5px;">Y</td><td style="text-align: center; padding: 0 5px;">M</td><td style="text-align: center; padding: 0 5px;">D</td></tr><tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr></table>		Y	M	D				Y	M	D				5. Title of plan <input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/>			
Y	M	D															
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1. Jurisdiction of registration <table style="width: 100%;"> <tr><td><input type="radio"/> Newfoundland and Labrador</td><td><input type="radio"/> Saskatchewan</td></tr> <tr><td><input type="radio"/> Prince Edward Island</td><td><input type="radio"/> Alberta</td></tr> <tr><td><input type="radio"/> Nova Scotia</td><td><input type="radio"/> British Columbia</td></tr> <tr><td><input type="radio"/> New Brunswick</td><td><input type="radio"/> Federal</td></tr> <tr><td><input type="radio"/> Quebec</td><td><input type="radio"/> Quebec/Federal</td></tr> <tr><td><input type="radio"/> Ontario</td><td><input type="radio"/> Not registered with pension authority</td></tr> <tr><td><input type="radio"/> Manitoba</td><td></td></tr> </table>		<input type="radio"/> Newfoundland and Labrador	<input type="radio"/> Saskatchewan	<input type="radio"/> Prince Edward Island	<input type="radio"/> Alberta	<input type="radio"/> Nova Scotia	<input type="radio"/> British Columbia	<input type="radio"/> New Brunswick	<input type="radio"/> Federal	<input type="radio"/> Quebec	<input type="radio"/> Quebec/Federal	<input type="radio"/> Ontario	<input type="radio"/> Not registered with pension authority	<input type="radio"/> Manitoba		6. Nature of business of principal employer <input style="width: 100%;" type="text"/> <div style="display: flex; align-items: center;"> <input style="width: 40px; height: 20px; margin-right: 10px;" type="text"/> <div style="border: 1px solid black; padding: 2px 5px; font-weight: bold;">FOR STATISTICS CANADA USE ONLY</div> </div>	
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2. Plan registration number <input style="width: 100%;" type="text"/>		7. Type of organization of principal employer(s) <u>Public Sector</u> <input type="radio"/> Municipal government <input type="radio"/> Federal government <input type="radio"/> Municipal enterprise <input type="radio"/> Federal enterprise <input type="radio"/> Provincial government <input type="radio"/> Other <input type="radio"/> Provincial enterprise <u>Private sector</u> <input type="radio"/> Incorporated company <input type="radio"/> Unincorporated business (sole proprietor or partnership) <input type="radio"/> Co-operative <input type="radio"/> Trade or employee association <input type="radio"/> Religious, charitable or other non-profit organization <input type="radio"/> Other (<i>describe</i>) <input style="width: 100%;" type="text"/>															
3. Name of employer or plan sponsor <input style="width: 100%; height: 25px;" type="text"/> <input style="width: 100%; height: 25px;" type="text"/> <input style="width: 100%; height: 25px;" type="text"/>		8. Number of employers <input type="radio"/> One <input type="radio"/> More than one, multi-employer plan <input type="radio"/> More than one, not a multi-employer plan															
4a. Mailing address of person indicated in Question 3 above <input style="width: 100%; height: 25px;" type="text"/> <input style="width: 100%; height: 25px;" type="text"/> <input style="width: 100%; height: 25px;" type="text"/> <input style="width: 100%; height: 25px;" type="text"/>																	
4b. Postal / Zip code <input style="width: 100%;" type="text"/>																	

9. Included employment

Are any members employed in an activity that is within the authority of the federal Pension Benefits Standards Act? (For example, activity relating to communication, banking or interprovincial transportation.)

- 01 No
- 15 Yes

10. Plan fiscal year end

Month Day

11. Funding instrument (check one or more)

- 01 Insurance company contract – fully guaranteed
- 06 Insurance company contract – not fully guaranteed
- 07 Trust agreement
- 09 Pension fund society
- 10 Government Consolidated Revenue Fund
- 11 Other (describe)

16. Type of plan (pension formula for current service)

- 01 Final average earnings over last years
- 02 Average best earnings – for the best years
- 03 Average best earnings – for the best years of the last years
- 04 Career average earnings – year earnings base last updated earnings indexed yes no
- 05 Flat benefit
- 06 Money purchase
- 07 Profit sharing
- 08 Hybrid – better of defined benefit / defined contribution
- 09 Composite / combination
- 10 Defined benefit / defined contribution
- 11 Other (describe)

12. Eligibility – Class(es) of employees (multiple entries acceptable, except if "All employees" has been checked)

- 1 All employees
- 2 Salaried
- 3 Hourly
- 4 Executives (including significant shareholders / connected persons)
- 5 Supervisory
- 6 Union employees
- 7 Non-union employees
- 8 Other (describe)

17. Employee contribution rate – current service

- 1 No contributions required
- 2 % of earnings (not integrated)
- 3 % of earnings less the required C/QPP contributions
- 4 % of earnings up to YMPE or on which contributions to C/QPP are required and % on balance of earnings
- 5 \$ per year
- 6 cents per hour
- 7 Up to 18% of earnings (together with employer contributions), as prescribed by the Income Tax Act
- 8 Variable (describe)

- 9 Other (describe)

13. Eligibility - new employees

- 1 Compulsory membership
- 2 Voluntary membership
- 3 Closed to new members
- 4 Other (describe)

15. Integration with C/QPP (contribution and/or benefit)

- 1 Yes
- 2 No

18. Employee voluntary additional contributions

- 1 Yes
- 2 No

19. Employer contribution rate – current service

- 01 Balance of cost of pension, i.e. defined benefit plan (other than modified defined benefit)
- 02 As specified in collective agreement (use only for modified defined benefit plans, if specific rate is not known)
- 03 % of earnings (not integrated)
- 04 % of earnings less the required C/QPP contributions
- 05 % of earnings up to YMPE or on which contributions to C/QPP are required and % on balance of earnings
- 06 \$ per year
- 07 cents per hour
- 08 Based on employer profits with minimum of % of employee's earnings
- 09 Up to 18% of earnings (together with employee contributions, if any), as prescribed by the Income Tax Act
- 10 Variable (describe)
- 11 Other (describe)

21. Bridging supplement on retirement before age 65

- 1 Yes
- 2 No

22. Disability benefits provided

- 1 Yes
- 2 No

23. Normal retirement

- 1 Age
- 2 Other (describe)

24. Special retirement (no reduction in pension) (check one or more)

- 1 Not applicable - no special retirement
- 2 Age
- 3 Years of service
- 4 Age plus service equals
- 5 Combination of three conditions
- 6 Other (describe)

If more than one of the above is indicated, which conditions must apply:

- 1 Both
- 2 Either

20. Current service benefits

- 1 Defined contribution plan, i.e. benefit not prescribed
- 2 % of earnings for each year of service (not integrated)
- 3 % of earnings for each year of service less all or part of C/QPP pension
- 4 % of earnings up to YMPE or on which contributions to C/QPP are required and % on balance of earnings for each year of service
- 5 \$ per month for each year of service
- 6 \$ per month for every hours worked
- 7 Combination of benefit formulae
- 8 Variable (describe)
- 9 Other (describe)

37. Number of active members covered by plan

	Males	Females
Newfoundland and Labrador		
Prince Edward Island		
Nova Scotia		
New Brunswick		
Quebec		
Ontario		
Manitoba		
Saskatchewan		
Alberta		
British Columbia		
Yukon		
Northwest Territories		
Nunavut		
Outside Canada		
Total		

**Note: Questions 28, 33 and 34
apply to defined benefit plans only.**

28. Automatic adjustment to pensions provided for in plan
(Note: if different formula used for pensions in pay and deferred pensions, give formula for pensions in pay)

- 1 No automatic adjustment provided for in plan
- 2 Based on full consumer price index (CPI)
- 3 Based on partial CPI
- 4 Based on excess interest earnings
- 5 Percentage increase %
(not based on CPI)
- 6 Other (describe)

33. Death benefits after retirement - normal form of pension for single pensioner

- 1 Life annuity
- 2 Pension guaranteed for months
- 3 Employee contributions less pension payments made
- 4 Total contributions less pension payments made
- 5 Other (describe)

34. Death benefits after retirement - for married pensioner

a) Is joint and survivor or spouse's pension provided (if not waived)?

- 1 Yes, at % of retiree's pension
- 2 No

b) If yes, is the initial pension benefit reduced to provide this type of benefit?

- 1 Yes 2 No

Comments

✪

Completed by (please print)

Phone

Date

Thank you for your cooperation