

824 - 155 Carlton Street
Winnipeg, MB R3C 3H8
Phone No. (204) 945-2740
Fax: (204) 948-2375

Finance

ANNUAL INFORMATION RETURN ANNUAL INFORMATION RETURN

THE INFORMATION CONTAINED HEREIN IS TO BE PROVIDED TO THE REGISTRAR OF FINANCE, TO

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APPROVED

ADMINISTRATOR

PLAN ADMINISTRATOR

Reg. of Income
Requirements

Name of the Plan

a person or body or group authorized in law to administer the plan
an employer

Board of Trustees

Representative of the Administrator of the Plan: MARK DE FREN

Mailing Address

UNIVERSITY of WPG. Human Resources 515 Portage Ave
Winnipeg, MB R3B 2G7

Telephone

Fax

Email address

Has the above mailing

The Pension Benefits Act (Act) and the Pension Benefits Regulation (Regulation) requires that the administrator of a pension plan file an Annual Information Return not later than 180 days after the fiscal year or termination date of the pension plan. All sections of the Annual

OSPC Late Filing Penalties

CRA Late Filing Penalties

Tax Act of \$25.00 per day up to a maximum of \$2,000.00 and under subsection 147.1(1) and (1.1) and can revoke a plan's registration.

THE UNIVERSITY OF MICHIGAN

If more than one participating employer in the plan complete Appendix 2

JIMMY H. ROBERTS UNIVERSITY OF MICHIGAN

1000 S. ZEEB ROAD ANN ARBOR MI 48106-1000

(must be filed in)

Michigan, CA

Number

204-786-4890

Number

204-774-2938

commission? Yes No

If "No" explain any changes _____

Section 5 - PLAN MEMBERSHIP

40		73		(b) New entrants (employees who joined the plan during the plan year)	
939		866		(c) Subtotal: (a + b)	
55		303		(d) Subtotal: (c + e + f)	
an year (c - g)		Total number of active members at the end of plan year		Pensioners and beneficiaries receiving a benefit from the plan	
Former members and beneficiaries entitled to, but not yet in receipt of a benefit		Former members and beneficiaries entitled to, but not yet in receipt of a benefit		Former members and beneficiaries entitled to, but not yet in receipt of a benefit	
376		460		British Columbia	
Manitoba		Manitoba		Manitoba	
New Brunswick		New Brunswick		New Brunswick	
Nova Scotia		Nova Scotia		Nova Scotia	
Nunavut		Nunavut		Nunavut	
Ontario		Ontario		Ontario	
Prince Edward Island		Prince Edward Island		Prince Edward Island	
Saskatchewan		Saskatchewan		Saskatchewan	
Yukon/Territory		Yukon/Territory		Yukon/Territory	
Employment under federal jurisdiction		Employment under federal jurisdiction		Employment under federal jurisdiction	
Total		Total		Total	

Section 6 - FILING FEE

In accordance with subsection 3.26(1) of the Regulation, a fee is required in respect of each active plan member in a designated Province and area of employment below 10 years' tenure. In accordance with subsection 3.26(1) of the Regulation, a fee is not required if there are no active plan members.

Number of Active Plan Members	Fee
1 - 15	\$ 120.00 (minimum)
17 - 2499	\$ 7.20 (per member)
2500 and over	\$18,000.00 (maximum)

(Example: 17 employees x \$7.20 = \$122.40)

Filing fee remitted \$ 1,610.20

Section 7 - INDEXATION

No

Reason for adjustment(s)

... shift to a collective agreement

Consumer Price Index

... full Consumer

flat dollar amount \$ _____ annually

other (specify)

Section 8 - CERTIFICATION

ADMINISTRATOR'S CERTIFICATION

I hereby certify that to the best of my knowledge and belief:

(a) the contributions paid to the pension plan or fund are at least equal to those required under the regulation;

(b) the plan or fund and the investments thereof have been administered in accordance with the Act and Regulation;

(c) the plan complies with and is being administered in accordance with the

(d) I am the authorized person who represents the plan administrator as defined in section 28.1 of the Act and as

Mark Betcher
Mark Betcher

on-voting member
 on-voting member
 on-voting member

N - non-employee
 E - employer
 AN - active non-employee
 NN - non-active non-employee

1	Barcke, Barry	A	Marl, Roberta
2	Upton, Lynne A	A	Hudok, Henry
5	Townsend, James A	A	
7	Edward, Murray A	A	
8	Byasa, Edward A	A	
9	Mitchell, Michael A + E	A + E	

APPENDIX 2 - CHANGE IN PARTICIPATING EMPLOYERS

REPORT CHANGES ONLY

Supervisor - Pension Consultant: PL

ADDITIONS

5	
6	
7	
8	
9	
10	

DELETIONS

1	
2	
3	

5

Canada Revenue Agency Schedule

Canada Revenue Agency Registration Number

Identification

Name: _____ Address: _____

Province: _____ Postal Code: _____

City/Town: _____

Financial Data (Plan Year)

Line 1: _____ Line 2: _____ Line 3: _____

Line 4: _____ Line 5: _____ Line 6: _____

Yes _____ No _____

If yes, what was the date of final distribution of funds: YYYY MM DD

If you answered yes, you can go directly to "Certification" on the main form.

Canada Revenue Agency Schedule" should be reported (Note: Only connected members as described in point #4 in the "How to Complete the Form")

How many employees participated in the plan at plan year end? _____ Specified Multi-employer plans, go to "Certification". Other plans continue with 6.

6. Did any member of this plan participate...