



IN THE MATTER OF the *Pension Benefits Act*, R.S.O. 1990,
c. P.8, as amended (the “*PBA*”)

AND IN THE MATTER OF a Proposal of the Superintendent of Financial
Services to Consent to a payment of surplus to Sunnybrook Health Sciences
Centre from the Superannuation Plan for Employees of Sunnybrook Hospital,
Registration Number 0546754, under section 79(1) of the *PBA*

TO: **Sunnybrook Health Sciences Centre**
2075 Bayview Avenue
Toronto, Ontario
M4N 3M5

Attention: Marilyn Reddick
Vice President,
Human Resources and Organizational Development

Employer and Administrator of the Plan

ORDER

ON OR ABOUT August 20, 2010, the Superintendent of Financial Services (the
“Superintendent”) issued a Notice of Proposal (the “NOP”) in respect of the Superannuation Plan
for Employees of Sunnybrook Hospital, Registration Number 0546754 (the “Plan”), proposing to
consent to a payment of surplus from the Plan to Sunnybrook Health Sciences Centre, under
section 79(1) of the *PBA*.

NO REQUEST FOR HEARING was delivered to the Financial Services Tribunal by
Sunnybrook Health Sciences Centre or any other person within the time prescribed by section
89(6) of the *PBA*.

For the reasons set out in the NOP, **I CONSENT** to the payment of surplus from the Plan to Sunnybrook Health Sciences Centre in the amount of \$12,711,500 (50% of the estimated distributable surplus as at December 31, 2009) plus interest from December 31, 2009.

I ALSO CONSENT, pursuant to section 63(7) of the *PBA*, to the refund of member contributions to those members of the Surplus Sharing Group who elect to receive their shares of surplus in the form of refund of member contributions, together with interest, in accordance with the terms of the Surplus Sharing Agreement.

DATED at Toronto, Ontario, this 6th day of October, 2010.

Brian Mills
Director, Pension Plans Branch
by Delegated Authority from
the Superintendent of Financial Services

Chart– Order – No Hearing Requested

| # | TEMPLATE PROVISION | AGREED TO: | AGREED NOT TO: |
|---|--|--|--|
| 1 | IN THE MATTER OF the <i>Pension Benefits Act</i> , R.S.O. 1990, c. P.8, as amended (the “PBA”) | <ul style="list-style-type: none"> - use Times New Roman font and 12 pitch - bold and capitalize “IN THE MATTER OF” - italicize the name of the Act - define “PBA” here, in italics and in quotes and brackets - default of 2 Tabs for indentation unless you have space concerns | - do no use “Act” to refer to the <i>Pension Benefits Act</i> |
| 2 | AND IN THE MATTER OF a Proposal of the Superintendent of Financial Services to (Refuse to) (Make an Order/Consent/Approve) under section ___ of the PBA relating to the ** Plan, Registration Number***** | <ul style="list-style-type: none"> - bold and capitalize “AND IN THE MATTER OF” -if refusing delete brackets around “Refuse to”; otherwise delete all of : (Refuse to) -select one of: Make an Order, Consent or Approve and delete the others and the brackets - add the section # under which the order etc is authorized - add plan name and registration number - Note on wording: ‘relating to’ optional. Use your discretion in changing <u>non-essential</u> words. - if more than one action is required, add another paragraph | |
| 3 | TO: Name [e.g. X Co.] Address Attention: Name of Person Title Recipient [e.g. Employer] | <ul style="list-style-type: none"> - use current name and address for recipient and add the name and position of the individual responsible - define the recipient from approved list (see below) -bold name and recipient | |
| 4 | AND TO: Name or See Schedule A (As required, see section 89 requirements) Address | <ul style="list-style-type: none"> - add parties who have rights to a hearing, and include their address and the individual responsible (see s. 89 notice requirements) - define the recipient from approved list (see below) - bold name and recipient | - do not add persons who are not entitled to a hearing- see box 11 |

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|---|--|---|----------------|
| | Attention: Name of Person Title Recipient | - use "Schedule A" if all recipients do not fit on page | |
| 5 | ORDER | -bold, capitalize and centre - 14 pt font | |
| 6 | ON OR ABOUT [date], the Superintendent of Financial Services (the "Superintendent") issued a Notice of Proposal (the "NOP") in respect of the ** Plan, Registration Number, (the "Plan") (reported at Financial Services Commission of Ontario (FSCO) website, Pension e-Bulletin [month] [year], Volume __, Issue __) to ... | - bold & capitalize first words -add the name of the plan including the registration # -define "plan" here -add description of where the NOP can be found on the FSCO web site | |
| 7 | NO REQUEST FOR HEARING was delivered to the Financial Services Tribunal by the Applicant or any other person within the time prescribed by section 89(6) of the <i>PBA</i> . | - bold & capitalize first words | |
| 8 | For the reasons set out in the NOP, I ORDER... | -consider a page break so that the signature page contains at least some of the Order wording that occurs prior to the date line | |
| 9 | DATED at Toronto, Ontario, this _ day of (month), 2007. | - add the month and date, and ensure year is correct - bold and caps "Dated" | |

| # | TEMPLATE PROVISION | AGREED TO: | AGREED NOT TO: |
|----|---|---|----------------|
| 10 | <p>_____</p> <p>Tom Golfetto Director, Pension Plans Branch by Delegated Authority from the Superintendent of Financial Services</p> | | |
| 11 | <p>copy:</p> <p>SCHEDULE "A"</p> <p>TO: Name [e.g. X Co.] Address</p> <p>Attention: Name of Person Title Recipient [e.g. Employer]</p> <p>AND TO: (as required)</p> | <p>- if copies are required, use "copy:"</p> <p>- names and addresses of all those persons to whom the Superintendent wishes to provide copies - such as legal counsel, consulting firm, actuary.</p> | |
| | | | |

Approved List of Recipients

- Applicant(s)
- Employer/Employer and Administrator
- Participating Employer
- Administrator
- Trustee in Bankruptcy of [Co. Name]
- (Interim) Receiver (and Manager) for [Co. Name]
- Union
- Agent of [...]