



## Form 1.2 - Individual Pension Plan Certification

The plan administrator, by completing and signing this form, is certifying that the pension plan listed below complies with Section 1.(1) of Regulation 909 of the *Pension Benefits Act* (PBA). The Financial Services Commission of Ontario (FSCO) will rely on this certification that the pension plan listed below is an Individual Pension Plan (IPP) under the *Income Tax Act Canada* (ITA) for purposes of the PBA.

If subsequent to the filing of this certification, it is determined that the plan is not an IPP, the plan administrator will be responsible for all filings, fees and penalties associated with the correct status of the pension plan in FSCO's records and bringing all related filings and other PBA requirements up to date.

The information provided in this form is collected pursuant to the PBA, including in particular section 113.2 of the PBA, for the purpose of ensuring compliance with the requirements of the PBA and the ITA and will be shared by FSCO with Canada Revenue Agency (CRA) from time to time. If you have any questions regarding this form or the use of the information contained within, you may contact Pension Plans Branch, Financial Services Commission of Ontario, 5160 Yonge Street, Box 85, Toronto, Ontario, M2N 6L9. Telephone: 416-250-7250.

### Part A - Plan Information

Registration Number of Pension Plan

Name of Pension Plan

Employer/Plan Sponsor

Plan Administrator

### Part B - Confirmation of IPP requirements under the ITA

The plan is a registered pension plan that contains a defined benefit provision, and

**Select the appropriate box(es)**

- ☐ At any time in the current year or a preceding year, the Plan has/had three or fewer members and at least one of them is/was related (within the meaning of the ITA) to a participating employer in the plan.<sup>1</sup>

**OR**

- ☐ The plan is a designated plan and has been determined by the CRA to be an IPP (attach CRA letter).

<sup>1</sup> Related person is defined under subsection 251(2) of the ITA. Pursuant to this subsection a "related person" includes a corporation and a person who controls the corporation, if it is controlled by one person; a corporation and a person who is a member of a related group that controls the corporation; or any person related to a person who controls a corporation, if it is controlled by one person or any person who is a member of a related group that controls the corporation. For a complete definition, please refer to section 251 of the ITA.

**Indicate the number of:**

Active members in the Plan

Members related to a participating employer in the Plan

Connected persons in the Plan

## Part C - Certification

As the authorized representative of (check the appropriate box):

- ☐ the administrator of the Pension Plan (the Administrator), or  
☐ the Administrator's agent or representative

I certify that:

- The Individual Pension Plan identified in this Form complies with the requirements of Regulation 909 of the Pension Benefits Act (Ontario), and the requirements of the Income Tax Act (Canada); and
- The information contained in this Form is true, accurate and complete to the best of my knowledge.

## Part D - Signature

Authorized Representative Name (print)

Date (yyyy-mm-dd)

Authorized Representative Signature

Address of Authorized Representative

Street address

Apt./Unit

City

Province

Postal Code/Zip

**It is an offence under the Criminal Code, R.S.C. 1985, c. C-46, as amended, for anyone to knowingly make or use a false document with the intent that it be acted on as genuine.**

Send the completed form to:

Financial Services Commission of Ontario  
Pension Plans Branch  
5160 Yonge Street, Box 85  
Toronto ON M2N 6L9