

Your step-by-step guide to RDSP transfers

**Enabling Canadians, with RDSPs made easy** 

That's **better** together





# Make your <u>move</u> to a Mackenzie RDSP

## The Registered Disability Savings Plan was introduced in 2008

As a way to empower Canadian families to save for the long-term financial security of a loved one with a disability. Some holders or beneficiaries of an RDSP may wish to transfer existing plans to another issuer.

Here is your guide to transfer your RDSP to Mackenzie Investments.

## What's the difference between a "beneficiary" and a "holder"?





A **"beneficiary"** is the individual for whom the RDSP has been established. A beneficiary may also be the holder.

A "holder" is an individual or individuals who oversee the RDSP account on behalf of a beneficiary who is not legally competent to sign a contract, because they are either a minor or have a mental disability.



## 5 step guide

RDSP transfers must be completed carefully to protect the account proceeds and to ensure that the applicable Government grants and bonds are maintained.

The beneficiary may only have one RDSP at any given time, so partial transfers are not permitted. If you are an account holder or beneficiary and would like to transfer your RDSP to Mackenzie Investments, please consult your financial advisor to obtain the necessary documentation.

Here are five steps required to successfully transfer an RDSP between plan issuers.



A beneficiary's Disability Tax Credit (DTC) must be determined for the current year. If not already determined, this **must** be resolved before starting the transfer process.



Complete an application form to open a new Mackenzie RDSP. Refer to the RDSP Application Form found here.



Complete the <u>Transfer Form</u> and the <u>Holder Consent to Transfer Form</u> to transfer the existing RDSP to a new issuer. Ensure that the holder's consent is signed and provide the name of the relinquishing institution.



Complete the Grant/Bond application form and the following annex forms if applicable:

## **Annex A**

Joint Holder Application for Canada Disability Savings Grant and/or Canada Disability Savings Bond (EMP5609)

## **Annex B**

Primary Caregiver Application for Canada Disability Savings Grant and/or Canada Disability Savings Bond (EMP5610)



Forward signed application forms **AND** transfer forms to Mackenzie Investments. Our mailing address can be found in the Transfer Form.

See next page for sample transfer forms.

| * |  |
|---|--|

Employment and Social Development Canada

Emploi et Développement social Canada PROTECTED WHEN COMPLETED - B

## Registered Disability Savings Plan (RDSP) Transfer

#### Instructions:

- 1. This form is to be used to transfer the assets of a Registered Disability Savings Plan (RDSP) from one issuer to another.
- 2. The relinquishing issuer and the receiving issuer must complete this form to process the transfer of RDSP assets
- 3. The information in this form is necessary to allow for the receiving issuer to determine withdrawal limitations and requirements as well as the taxable amount of any payments made. Employment and Social Development Canada will provide all historical transactional information in its holdings to the receiving issuer with the new plan once the relinquishing plan is closed.
- 4. This form is valid only if completed, signed (or consent is provided to the issuer in an accepted manner), dated and given to the receiving issuer. Do NOT send directly to Employment and Social Development Canada.

#### Receiving Issuer

- 5. This form should originate from the receiving issuer, and the completed original of this form along with a copy of the Holder Consent should be kept.
- 6. The receiving issuer is the issuer who will receive the transferred assets (in cash and/or kind) from the relinquishing issuer, and will need to have an Application for Canada Disability Savings Grant and/or Canada Disability Savings Bond completed in order for the receiving plan to continue to receive grant and/or bond.

#### Relinquishing Issuer

7. The relinquishing issuer is the issuer who will send the transferred assets (in cash and/or in kind) to the receiving issuer, and the completed original of the Holder Consent and a copy of this form should be kept.

#### Plan Holder of Relinquishing Plan

8. The plan holder of the relinquishing plan must complete the Holder Consent to a Registered Disability Savings Plan (RDSP) Transfer (Holder Consent) form to provide their consent to the transfer.

| 1  | Information about the Ben  | eficiary                 |                           |  |  |  |
|--|--|--------------------------|---------------------------|--|--|--|
| Panafisian:  | Complete the following section about the RDSP beneficiary.   |                          |                           |  |  |  |
| Beneficiary  | <ul> <li>The name must be entered exactly as it appears on Social Insurance Number documentation.</li> </ul>   |                          |                           |  |  |  |
| The <b>beneficiary</b> is the person who will receive the funds in the RDSP. | Beneficiary's Last Name  | Beneficiary's First Name | Beneficiary's Middle Name |  |  |  |
|  | Beneficiary's Social Insurance Nur   |                          |                           |  |  |  |
| 2  | Information about the Hold   |                          | (4, 550)                  |  |  |  |
| Holder   | Complete this section only if the holder is different from the beneficiary of the RDSP.     The name must be entered exactly as it appears on Social Insurance Number documentation. |                          |                           |  |  |  |
| You are the <b>Holder</b> if you opened                                      | If there is more than one Holder, please attach additional pages.  |                          |                           |  |  |  |
| the RDSP<br>OR   | Holder's Last Name   | Holder's First Name      | Holder's Middle Name      |  |  |  |

## Name of Agency (if applicable) Name of Agency representative (if applicable)

## you are the representative of the agency in the case where the beneficiary is a "child in care" or an adult under "provincial guardianship" Information about the Receiving Issuer

#### Receiving RDSP

The receiving RDSP is the plan that the assets are being transferred into.

An RDSP contract number contains

| This section is to be completed by                            | y the receiving issuer.   | <u> </u>                      | <u> </u>                     |
|---|---|-------------------------------|------------------------------|
| Receiving Issuer's Name<br>Mackenzie Financial Corporation    | n as agent for B2B Trustco  |                               | Management company code: MRD |
| Address   |   |                               | Postal Code                  |
| 180 Queen Street West, Toront                                 | o, Ontario  |                               | M5V 3K1                      |
| Receiving RDSP Contract No. (as assigned by Receiving Issuer) | Receiving Specimen Plan No.<br>(as assigned by CRA)<br>RDSP 2417001 | Date Contract<br>(YYYY-MM-DD) | Opened                       |

I certify that the receiving Issuer:

- Complies with the current conditions for registration as set out in the Income Tax Act, and
- Has signed an Issuer Agreement with ESDC to administer the grant and bond.

| Date (YYYY-MM-DD) |           |             | Authorized Representative of Receiving Issuer |
|-------------------|-----------|-------------|---|
|                   |           | Name of Aut | horized Representative of Receiving Issuer    |
|                   |           | Mackenzie   | Financial Corporation                         |
| Telephone         | Facsimile |             | Email   |
| 1-800-387-0614    | 1-866-76  | 6-6623      | service@mackenzieinvestments.com              |

Contact Information

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ESDC EMP5611 (2022-11-002) E

Page 1 of 3



| 4   | Information about the Relind  | quishing Issuer  |                         |              |                  |  |  |
|---|---|--|-------------------------|--------------|------------------|--|--|
|   | This section is to be completed by  |  | suer.                   |              |                  |  |  |
| Relinquishing RDSP  | Relinquishing Issuer's Name   | -  |                         |              |                  |  |  |
| The relinquishing RDSP is the plan  | Address   |  |                         |              |                  | Postal Code                                      |  |
| hat the assets are being transferred rom.   | Address   |  |                         |              |                  | Postal Code                                      |  |
|   | Relinquishing RDSP Contract No. (as assigned by Relinquishing Issuer)   | Relinquishing Sp<br>(as assigned by Cl                                       | pecimen Plan No.<br>RA) | Date<br>(YYY | Contra<br>Y-MM-D | ct Opened<br>D)                                  |  |
| 5   | Notional Balances of the Re   | linguishing RDS  | P                       |              |                  |  |  |
|   | This section is to be completed by  |  |                         |              |                  |  |  |
| Notional Balances   | Balances as of (YYYY-MM-DD)   | Fair Market Value  |                         |              |                  |  |  |
| This section identifies the amounts being transferred as well as the <b>book</b>  |   | Contrib  | utions                  |              |                  |  |  |
| value and the fair market value of  |   |  |                         | T_           |                  |  |  |
| hose amounts.   | Non-Taxable<br>Private Contributions  | Taxable Reports<br>made to the   |                         | Taxal        |                  | er (all provincial incentives vided to the RDSP) |  |
| Notional balances as at the opening of business of the current calendar   | \$  | \$   | \$                      |              |                  |  |  |
| year are used to determine maximum<br>Disability Assistance Payments.   | Canada Disability Savin   | gs Grant   | Canad                   | da Disa      | bility S         | aving Bond                                       |  |
| Providing totals of all contributions   | \$  |  | \$                      |              |                  |  |  |
| nade and Canada Disability  | Balances as at opening of busines   | Balances as at opening of business on January 1 of the current calendar year |                         |              |                  |  |  |
| Savings grant and bond paid as at   | Fair Market Value (1)   |  |                         |              |                  |  |  |
| he closing of business of the prior<br>alendar year is used to determine if<br>an RDSP is a " <b>primarily</b>                          | Annuity contracts (2) \$  |  |                         |              |                  |  |  |
| government assisted plan." It   | Totals as at closing of business or   | December 31 of the   | e prior calendar ve     | ar           |                  |  |  |
| provides information that the eceiving issuer will use to calculate the amount of any payments that the must be made in the year of the | All monies paid under the Canada Disability Saving Act (all grants and bonds paid into any RDSP for the designated beneficiary, regardless of whether such \$   |  |                         |              |                  |  |  |
| ransfer.  | amounts have later been withdrawn as part of a repayment or a DAP)  All contributions made to the RDSP (all contributions, rollovers and provincial payments paid into any RDSP for the designated beneficiary, regardless of any  \$ |  |                         |              |                  |  |  |
|   | withdrawals)  Please indicate if the following payment(s) have been made from the RDSP  |  |                         |              |                  |  |  |
|   | ☐ Disability Assistance Payments (DAP) ☐ Lifetime Disability Assistance Payments (LDAP)   |  |                         |              |                  |  |  |
|   | For all DAPs/LDAPs processed pri  | or to the current cal  | endar year:             |              |                  |  |  |
|   | Non-taxable portion   | on   |                         | Taxa         | ble por          | tion   |  |
| Reminder:   | \$  |  | \$                      |              |                  |  |  |
| Have all pending grant and bond applications been received?   | For all DAPs/LDAPs processed thi  | s calendar year:   | I                       |              |                  |  |  |
| Have all pre-authorized contributions or payments been  | Non-taxable portion   |  | Taxable portion         |              |                  |  |  |
| stopped?  | \$  |  | \$                      |              |                  |  |  |
| A) The amount of mainty at the CO.  | to an absorbed in AAC AAAAY CO. CO. C.  |  |                         |              |                  |  |  |
|   | la as described in 146.4(4)(I) of the Income Tax Act  |  |                         |              |                  |  |  |
| 2) The amount of variable D of the LDAP forms   | la as described in 146.4(4)(I) of the Income Tax Act  |  |                         |              |                  |  |  |
|   |   |  |                         |              |                  |  |  |
|   |   |  |                         |              |                  |  |  |
|   |   |  |                         |              |                  |  |  |
|   |   |  |                         |              |                  |  |  |
|   |   |  |                         |              |                  |  |  |
|   |   | disponible en français<br>ble in alternate format                            |                         |              |                  |  |  |
|   | rnis ionn is avallat  | ne in alternate formats  | •                       |              |                  |  |  |

|               |                     |   |   |   | PROTECTED WHEN COMPLETED  |
|---------------|---------------------|---|---|---|---|
| 6             |                     | Privacy   |   |   |   |
| Privacy       |                     | and Social Development the administration of federal  | Act (DESDA<br>eral disability   | ), the Canada<br>savings incen                                    | ollected under the authority of the <i>Department of Employment Disability Savings Act</i> (CDSA), and the <i>Income Tax Act</i> (ITA) for tives. This information is necessary to allow for the receiving rements as well as the taxable amount of any payments made.  |
|               |                     |   | , Employmer   | nt and Social D   | and shared between the following parties for the administration<br>Development Canada (ESDC), the Canada Revenue Agency, the<br>P assets.   |
|               |                     | other applicable laws. Yo<br>described in Personal Int<br>the government publicati<br>www.infosource.gc.ca. <i>Ir</i> | ou have the ri<br>formation Bar<br>on entitled <u>In</u><br>ofo Source ma | ght to access<br>nk "HRSDC PF<br>fo Source, whi<br>ay also be acc | lance with the CDSA, the DESDA, the Privacy Act, the ITA and all<br>or request correction to your personal information, which is<br>PU 038". Instructions for obtaining this information are outlined in<br>ich is available at the following Web site address:<br>sessed online at any Service Canada Centre. You have the right<br>f Canada if you have concerns about the handling of your |
| 7             |                     | Certification   |   |   |   |
| Certification |                     |   |   | elinquishing RI   | DSP have provided their consent to transfer the assets from the   |
|               |                     | 2. I certify that the relinquishing issuer will transfer amounts specified above.                                     |   |   |   |
|               |                     | 3. I certify that to the be   | st of my know   | wledge, the inf   | formation on this form is accurate and complete.  |
|               |                     | The assets will be transfe  | erred in cash   | and/or i  | in kind   |
|               |                     | Date (YYYY-MM-DD)   |   | Signature of  | f Authorized Representative of Relinquishing Issuer   |
|               |                     |   |   | Name of Aut   | thorized Representative of Relinquishing Issuer   |
|               | Contact information | Telephone   | Facsimile   | ,   | Email   |
|               |                     |   |   |   | 1   |

Where to get more information about the Canada Disability Savings Grant and Canada Disability Savings Bond:
Phone: 1 800 O-Canada (1-800-622-6232); 1-800-926-9105 (TTY)
Email: \_rdsp-reei@hrsdc-rhdcc.gc.ca Internet: www.canada.ca/rdsp

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ESDC EMP5611 (2022-11-002) E

Page 3 of 3

| Employment and<br>Social Developme   | Emploi et<br>nt Canada Développement social Cana  | da   | PROTECTED WHEN COMPLETED -   |  |  |
|--|---|--|--|--|--|
| Holder C   | onsent to a Registered [  | Disability Savings Pla   | ın (RDSP) Transfer   |  |  |
| Instructions:  |   |  |  |  |  |
|  | f for the holder to provide consent to transfer   | the assets of the Registered Disability  | Savings Plan (RDSP) for which they are   |  |  |
| order to authorize the tr  | oleted and signed (or consent is to be provide<br>ansfer of assets to the receiving plan. It forms  | s part of the RDSP Transfer form.  | by the holder(s) of the relinquishing plan in  |  |  |
|  | will keep the completed original of this form a<br>retain the completed original transfer form a  |  |  |  |  |
| 9  |   | .,   |  |  |  |
|  | eir copy of this Holder Consent form to their on<br>efully. If you have any questions, do not hesit   |  | are currently dealing with   |  |  |
|  | completed, signed (or consent is provided to  |  |  |  |  |
| NOT send directly to I   | Employment and Social Development Cana  | ada.   | ed and given to the remiquesting issues. 20  |  |  |
|  | Information about the Benefician  | ry and the Receiving Issuer  |  |  |  |
| Beneficiary  | Beneficiary's Last Name   | Beneficiary's First Name   | Beneficiary's Middle Name  |  |  |
| The beneficiary is the<br>person who will receive the  |   |  |  |  |  |
| unds in the RDSP.  |   |  |  |  |  |
| <b>Receiving issuer</b><br>The issuer who will be  | Receiving RDSP Issuer   | Receiving F  | RDSP Contract No.  |  |  |
| eceiving the transferred assets (in cash and/or  |   |  |  |  |  |
| kind) from the relinquishing   |   |  |  |  |  |
| ssuer.   |   |  |  |  |  |
|  |   |  |  |  |  |
| AND THE RESERVE THE THE PARTY OF THE PARTY O | Declaration and Consent of the  |  | ,  |  |  |
| The holder (or holders, if applicable) of the  | Relinquishing Issuer's Name   | Relinquishi  | ng RDSP Contract No.   |  |  |
| relinquishing RDSP must sign to authorize the  |   | 4000 2 10 8 20 8 70 0 2 1  |  |  |  |
| ransfer of the assets to   | <ol> <li>I certify that the information provided or</li> <li>I understand that, unless I am a holder</li> </ol>   | •  | knowledge.<br>manage nor have any legal authority to direct  |  |  |
| the receiving RDSP.  | the assets under the receiving RDSP;  | of the receiving RDSP, I will no longer  | nanage nor have any legar authority to direct  |  |  |
| n the case of a third holder   | <ol><li>I understand that a beneficiary can only<br/>amount in the RDSP must be transferred</li></ol>   | have one RDSP; therefore, partial tranged from the relinguishing issuer to the re  | sfers are not permitted. The full eceiving issuer.   |  |  |
| of the relinquishing plan,<br>please attach an additional<br>copy of this Annex with   | 4. Lunderstand that the Privacy Act gives me the right to access or request correction to my personal information   |  |  |  |  |
|  | kept in the government file and as the authorized representative to do so for that of the beneficiary.  5. I confirm that I have read and understand this document, including my privacy rights found below, I have   |  |  |  |  |
|  |   |  | •  |  |  |
|  |   | nd this document, including my privacy   | rights found below, I have   |  |  |
|  | I confirm that I have read and understal received a copy of this document, and 6. I opt to proceed with this request and h  | nd this document, including my privacy<br>I consent to the use and sharing of my<br>ereby authorize:   | rights found below, I have   |  |  |
|  | I confirm that I have read and understareceived a copy of this document, and     I opt to proceed with this request and h     the transfer of the assets within the   | nd this document, including my privacy<br>I consent to the use and sharing of my<br>ereby authorize:<br>RDSP account as described above.   | rights found below, I have<br>ersonal information.   |  |  |
|  | I confirm that I have read and understal received a copy of this document, and to I opt to proceed with this request and ha) the transfer of the assets within the b) the liquidation of investments requires specific investment to be sold, and to the second of the  | nd this document, including my privacy<br>I consent to the use and sharing of my<br>ereby authorize:<br>RDSP account as described above.<br>ed to pay any applicable fees, charges<br>at the absolute discretion of the relinqui   | rights found below, I have<br>personal information.<br>or adjustments with the<br>shing issuer.  |  |  |
|  | I confirm that I have read and understareceived a copy of this document, and     I opt to proceed with this request and h     the transfer of the assets within the     b) the liquidation of investments requir  | nd this document, including my privacy<br>I consent to the use and sharing of my<br>ereby authorize:<br>RDSP account as described above.<br>ed to pay any applicable fees, charges<br>at the absolute discretion of the relinqui   | rights found below, I have<br>personal information.<br>or adjustments with the<br>shing issuer.  |  |  |
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|  | I confirm that I have read and understareceived a copy of this document, and I op to proceed with this request and h a) the transfer of the assets within the b) the liquidation of investments requirespecific investment to be sold, and 1.  Please cancel all open orders (Pre-Autlaccount (as described in this section) b  | nd this document, including my privacy<br>I consent to the use and sharing of my<br>ereby authorize:<br>RDSP account as described above.<br>ed to pay any applicable fees, charges<br>at the absolute discretion of the relinqui<br>horized Payments, Lifetime Disability A-<br>eing transferred.<br>Id sign this form will result in non-proces   | rights found below, I have<br>bersonal information.  or adjustments with the<br>shing issuer.<br>ssistance Payments, etc.) for the RDSP<br>ssing of the transfer request.  |  |  |
|  | 5. I confirm that I have read and understal received a copy of this document, and I. 6. I opt to proceed with this request and h. a) the transfer of the assets within the b) the liquidation of investments requires specific investment to be sold, and 3. 7. Please cancel all open orders (Pre-Auttacount (as described in this section) b. 8. I understand that failure to complete an You must read this section and sign (or pre-  | nd this document, including my privacy<br>I consent to the use and sharing of my<br>ereby authorize:<br>RDSP account as described above.<br>ed to pay any applicable fees, charges<br>at the absolute discretion of the relinqui<br>horized Payments, Lifetime Disability A-<br>eing transferred.<br>Id sign this form will result in non-proces   | rights found below, I have<br>bersonal information.  or adjustments with the<br>shing issuer.<br>ssistance Payments, etc.) for the RDSP<br>ssing of the transfer request.  |  |  |
|  | 5. I confirm that I have read and understal received a copy of this document, and I. 6. I opt to proceed with this request and h. a) the transfer of the assets within the b) the liquidation of investments requires specific investment to be sold, and 3. 7. Please cancel all open orders (Pre-Auttacount (as described in this section) b. 8. I understand that failure to complete an You must read this section and sign (or pre-  | nd this document, including my privacy<br>I consent to the use and sharing of my<br>ereby authorize:  RDSP account as described above.  ed to pay any applicable fees, charges<br>at the absolute discretion of the relinqui<br>horized Payments, Lifetime Disability A- eing transferred.  d sign this form will result in non-proces-  ovide consent to the issuer in an accept  | rights found below, I have<br>bersonal information.  or adjustments with the<br>shing issuer.<br>ssistance Payments, etc.) for the RDSP<br>ssing of the transfer request.  |  |  |
|  | 5. I confirm that I have read and understal received a copy of this document, and I. 6. I opt to proceed with this request and h. a) the transfer of the assets within the b) the liquidation of investments requires specific investment to be sold, and 3. 7. Please cancel all open orders (Pre-Auttacount (as described in this section) b. 8. I understand that failure to complete an You must read this section and sign (or pre-  | nd this document, including my privacy I consent to the use and sharing of my ereby authorize:  RDSP account as described above. ed to pay any applicable fees, charges at the absolute discretion of the relinqui horized Payments, Lifetime Disability A: eing transferred. I sign this form will result in non-procesty to the consent to the issuer in an accept. Relinquishing Plan Holder's Signature  | rights found below, I have<br>bersonal information.  or adjustments with the<br>shing issuer.<br>ssistance Payments, etc.) for the RDSP<br>ssing of the transfer request.  |  |  |
|  | 5. I confirm that I have read and understal received a copy of this document, and I. 6. I opt to proceed with this request and h. a) the transfer of the assets within the b) the liquidation of investments requires specific investment to be sold, and 3. 7. Please cancel all open orders (Pre-Auttacount (as described in this section) b. 8. I understand that failure to complete an You must read this section and sign (or pre-  | nd this document, including my privacy<br>I consent to the use and sharing of my<br>ereby authorize:  RDSP account as described above.  ed to pay any applicable fees, charges<br>at the absolute discretion of the relinqui<br>horized Payments, Lifetime Disability A- eing transferred.  d sign this form will result in non-proces-  ovide consent to the issuer in an accept  | rights found below, I have<br>bersonal information.  or adjustments with the<br>shing issuer.<br>ssistance Payments, etc.) for the RDSP<br>ssing of the transfer request.  |  |  |
| copy of this Annex with their signature.   | 5. I confirm that I have read and understareceived a copy of this document, and it opt to proceed with this request and hat a) the transfer of the assets within the b) the liquidation of investments requires specific investment to be sold, and it.  Please cancel all open orders (Pre-Autl account (as described in this section) b.  I understand that failure to complete an You must read this section and sign (or probate (YYYY-MM-DD)).   | nd this document, including my privacy I consent to the use and sharing of my ereby authorize:  RDSP account as described above. ed to pay any applicable fees, charges at the absolute discretion of the relinqui horized Payments, Lifetime Disability Areing transferred. ed sign this form will result in non-procesovide consent to the issuer in an accept Relinquishing Plan Holder's Signature  Name of Holder   | rights found below, I have<br>personal information.  or adjustments with the<br>shing issuer.<br>ssistance Payments, etc.) for the RDSP<br>ssing of the transfer request.<br>ed manner) to authorize the transfer. |  |  |
|  | 5. I confirm that I have read and understareceived a copy of this document, and it opt to proceed with this request and hat a) the transfer of the assets within the b) the liquidation of investments requires specific investment to be sold, and it.  Please cancel all open orders (Pre-Autl account (as described in this section) b.  I understand that failure to complete an You must read this section and sign (or probate (YYYY-MM-DD)).   | nd this document, including my privacy I consent to the use and sharing of my ereby authorize:  RDSP account as described above. ed to pay any applicable fees, charges at the absolute discretion of the relinqui horized Payments, Lifetime Disability A: eing transferred. I sign this form will result in non-procesty to the consent to the issuer in an accept. Relinquishing Plan Holder's Signature  | rights found below, I have<br>personal information.  or adjustments with the<br>shing issuer.<br>ssistance Payments, etc.) for the RDSP<br>ssing of the transfer request.<br>ed manner) to authorize the transfer. |  |  |
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#### Your privacy rights

This section explains why your information is collected and how it is used, shared and protected. It also explains how you can access your personal information.

The personal information you provide on this form is collected under the authority of the Department of Employment and Social Development Act (DESDA), the Canada Disability Savings Act (CDSA) and the Income Tax Act (ITA) for the administration of

The personal information you provide may be used by and shared between the following parties for the administration of the CDSA and the ITA: Employment and Social Development Canada (ESDC), the Canada Revenue Agency, the issuer, and between issuers when transferring RDSP assets.

Though you are not obligated to provide any personal information, refusal to do so will mean that, ESDC will be unable to process your application to transfer the RDSP.

The information you provide may be used and/or disclosed by ESDC for policy analysis, research, statistical and/or evaluation purposes. Information may also be disclosed to Statistics Canada for research and statistical purposes. However, these additional uses will never result in an administrative decision made about you (such as a decision on your entitlement to a grant and/or a

Once under the control of ESDC, your personal information is administered in accordance with the DESDA, the CDSA, the Privacy Act and all other applicable laws. You have the right to the protection of, and access to, your personal information, vis described in Personal Information Bank "ESDC PPU 038." Instructions for obtaining this information are outlined in the experimental publication cutified into Surgeon which is available at Canada california processing and also be applied to the surgeon which is available at a canada california processing and the surgeon which is available at the surgeon which is a surgeon whin the surgeon which is a surgeon which is a surgeon which is a su government publication entitled Info Source, which is available at Canada.ca/infosource-ESDC. Info Source may also be accessed online at any Service Canada Centre. You have the right to file a complaint with the Privacy Commissioner of Canada if you have concerns about the handling of your personal information. Additional information is available at www.priv.gc.ca/en

#### Definitions

These definitions are provided for your information only and do not constitute the legal definitions. In the event of a discrepancy, the legal definitions found in the Canada Disability Savings Act, and the Income Tax Act prevail.

Beneficiary: The individual who will receive payments from the RDSP

Government file: The government file as has been referred to above, refers to any information collected under the authority of the DESDA, the CDSA, and the ITA for the purposes of determining eligibility for a Canada Disability Savings Grant (grant) or Canada Disability Savings Bond (bond), to calculate amounts payable and to administer the CDSA and the ITA. Such information may be held by ESDC and CRA.

Holder: Is an individual, agency, department or institution that opens an RDSP, names a beneficiary and authorizes or makes deposits (contributions) on behalf of the designated beneficiary into the RDSP. The plan holder may be:

- · The beneficiary;
- If the beneficiary is not of the age of majority at the time the RDSP is opened and/or does not have legal capacity, the legal parent, legal representative, or public department, agency, or institution that is legally authorized to act on behalf of the beneficiary;
- If the beneficiary is of the age of majority at the time the RDSP is opened but does not have legal capacity, the legal representative, public department, agency, or institution that is legally authorized to act on behalf of the beneficiary; or
- If the RDSP is opened before 2024 and y, or institution that is regard autoritized to act or behalf or the behalf, or If the RDSP is opened before 2024 and the beneficiary is of the age of majority at the time the RDSP is opened but the issuer, after a reasonable enquiry, has doubts regarding the beneficiary's legal capacity and no person or entity has been legally authorized to act on their behalf, the spouse, common-law partner or parent of the beneficiary [(also referred to as a qualifying family member [see s. 146.4(1) Income Tax Act for further details)].

**Issuer:** A corporation authorized to offer the RDSP to the public. The issuer opens an RDSP for the holder on behalf of a designated beneficiary and handles related administrative matters.

Receiving issuer: The issuer who will be receiving the transferred assets (in cash and/or kind) from the relinquishing issuer.

Relinquishing issuer: The issuer who will be sending the transferred assets (in cash and/or in kind) to the receiving issuer

## General information

General information

The RDSP transfer form consists of two parts

- RDSP Transfer Request to be completed by the relinquishing issuer and the receiving issuer to transfer the assets of an RDSP.
- Holder Consent to RDSP Transfer to be completed by the holder to request the transfer

Ce formulaire est disponible en français This form is available in alternate formats

ESDC EMP5612 (2022-12-002) E

Page 2 of 3

## Transfer eligibility information

Transfer eligibility

- Any RDSP can be transferred but certain conditions apply:

   A beneficiary can only have one RDSP meaning that a transfer request must be completed to move a plan from one issuer to another.
  - $\bullet \ \, \text{The transfer must be for the full amount within the existing plan. Partial amounts cannot be transferred.}$
  - The holder of the plan must initiate the transfer and the required transfer form must be completed by both issuers, that is, the receiving issuer and the relinquishing issuer.

Issuers may also have certain conditions and fees associated with transferring an RDSP.

Where to get more information about the Canada Disability Savings Grant and Canada Disability Savings Bond:

Phone: 1 800 O Canada (1 800 622-6232); 1-800-926-9105 (TTY)

E-mail: rdsp-reei@hrsdc-rhdcc.gc.ca Internet: www.canada.ca/rdsp

Ce formulaire est disponible en français This form is available in alternate formats

ESDC EMP5612 (2022-12-002) E

Page 3 of 3



## **Transfer timing**

In general, it can take two to four months for the entire transfer process to be completed, provided all documents are in order.

Once the application and transfer forms are received by Mackenzie Investments, we'll work with your previous RDSP issuer to ensure a timely transfer of assets to your new RDSP. Employment and Social Development Canada (ESDC) will provide us with a history of the following transactions so the account may continue to operate as it did at the previous institution:



Contributions that have been made to the plan



**Canada Disability Savings Grants (CDSGs)** 



**Canada Disability Savings Bonds (CDSBs)** 



Provincial and territorial grant and/or bonds



Any Disability Assistance Payments (DAP) or Lifetime Disability Assistance Payments (LDAP) that have been requested by the holder

At this point, your new RDSP registration is confirmed, and the transfer is complete. If applicable, any withdrawal or LDAP instructions can be sent to Mackenzie to ensure your payments resume. Contributions made into the Mackenzie Investments RDSP will now be eligible for any available grants and bonds.

At Mackenzie, we recognize that disabilities vary greatly. Canadians with disabilities don't fit neatly into a "one size fits all" box, and neither should their RDSP plan. We know RDSPs can be complex and difficult to understand, that's why we work hard to ensure each client's unique situation is addressed. We provide comprehensive materials, and the expertise needed to help advisors and their clients fully understand the RDSP Program and make choices that are right for them.



# Peace of mind starts with a conversation

For more information on the RDSP, eligible funds or to set up a plan, please contact your financial advisor. Or, contact Mackenzie Client Services directly at 1-800-387-0614 or send us an email at service@mackenzieinvestments.com with any questions you may have.



**Email us** 



## **General Inquiries**

For all of your general inquiries and account information please call:

English: 1-800-387-0614 Bilingual: 1-800-387-0615

Asian Investor Services: 1-888-465-1668

**TTY:** 1-855-325-7030 Fax: 1-866-766-6623

**E-mail:** service@mackenzieinvestments.com

Web: mackenzieinvestments.com

Find fund and account information online through Mackenzie Investments' secure InvestorAccess. Visit mackenzieinvestments.com for more information.

This should not be construed to be legal or tax advice, as each client's situation is different. Please consult your own legal and tax advisor. The content of this whitepaper (including facts, views, opinions, recommendations, descriptions of or references to, products or securities) is not to be used or construed as investment advice, as an offer to sell or the solicitation of an offer to buy, or an endorsement, recommendation or sponsorship of any entity or security cited. Although we endeavour to ensure its accuracy and completeness, we assume no responsibility for any reliance upon it.

## **Investors**



## **Advisors**





That's **better** together