TIK TRANSFER FORM FOR CANOE EL PROTECTION PORTFOLIOS CONTRACTS

Throughout this form, "Empire Life" means The Empire Life Insurance Company and "nominee" includes both nominee and intermediary held contracts.

Use this form for Transfers in Kind (TIKs) as outlined in the *Transfer Guidelines for Canoe EL Protection Portfolios Contracts*. All transfers must involve the same kind of contract (e.g. Canoe EL Protection Portfolios 75/75 to Canoe EL Protection Portfolios 75/75).

1. Contract Details

Contract number

Reset Form

Owner or beneficial owner first name	Middle initial	Last name
Owner or beneficial owner first name	Middle initial	Last name

2. Transfer Type

○ Nominee to nominee ○ Nominee to client name ○ Client name to nominee ○ Client name to client name

3. Transfer Instructions

FROM Dealer/nominee (if applicable)	Dealer/nominee code
TO Dealer/nominee (if applicable)	Dealer/nominee code

Account Type:

○ non-registered to non-registered^ ○ RRSP to RRSP * ○ RRIF to RRSP * ○ TFSA to TFSA
○ non-registered to RRSP ○ RRIF to RRIF * ○ RRSP to RRIF *+

^For transfers from nominee to client name complete forms Canoe-D-0011 and International Tax (FATCA/CRS) Self Certification Form for Canoe EL Protection Portfolios Contracts (individuals) or Canoe-C-0044 (corporation).

*Includes locked-in contracts. Additional documents may be required.

+For client name RRSP to RRIF conversions use form Canoe-INP-130A- RRSP to RRIF Conversion for Canoe EL Protection Portfolios Contracts.

4. Beneficiary Information for Transfer to Client Name Only

To add additional beneficiaries, use form Canoe-D-0017 - Beneficiary Designation form for Canoe EL Protection Portfolios Contracts.

If the contract is locked-in under pension legislation, the rights of the annuitant's spouse/common-law partner may override this beneficiary designation. In order to effect a beneficiary designation, the applicable spousal waiver must be submitted where required by law.

If you name more than one beneficiary and do not indicate a percentage share, any death benefit payable will be divided equally among all surviving beneficiaries. If the annuitant is not the owner and no beneficiary is named, the beneficiary will default to the owner, otherwise to the estate of the annuitant.

Minors: Benefits will not be paid directly to a minor beneficiary. Outside Québec, you should name a trustee for a minor beneficiary and any benefits due to the beneficiary, while a minor, will be paid to the trustee on the beneficiary's behalf. In Québec, benefits due to a beneficiary, while a minor, will be paid to their parent(s) or legal guardian unless you established a formal trust. After the beneficiary reaches the age of majority, any benefits due to the beneficiary will be paid directly to the beneficiary unless you have established a formal trust and such trust is still in effect at the time the benefit is payable.

Contingent designations: A contingent beneficiary becomes the beneficiary if all of the primary beneficiaries named have died before the annuitant. A contingent beneficiary designation is always revocable.

Revocable/Irrevocable designations: A primary beneficiary designation is revocable unless you check the irrevocable box. In Quebec, if a married or civil union spouse is named as primary beneficiary, the designation is irrevocable unless otherwise indicated. If you designate a primary beneficiary as irrevocable, you cannot change or revoke the beneficiary or exercise rights and privileges such as withdrawals, assignments, or transferring ownership without the irrevocable beneficiary's consent. **An irrevocable beneficiary who is under the age of majority cannot provide consent.** Therefore, if an irrevocable beneficiary is under the age of majority, you cannot change or revoke the beneficiary or exercise rights and privileges unless, where permitted by law, a court order is obtained.

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4. Beneficiary Information for Transfer to Client Name Only (cont'd)

Primary Beneficiary(ies)

First name	Middle initial	Last name or legal name of corporation/entity

Relationship to annuitant (in Quebec, relationship to owner/beneficial owner)	◯ equal shares OR ◯ _____ %	◯ Revocable ◯ Irrevocable

First name	Middle initial	Last name or legal name of corporation/entity

Relationship to annuitant (in Quebec, relationship to owner/beneficial owner)	◯ equal shares OR ◯ _____ %	◯ Revocable ◯ Irrevocable

Contingent Beneficiary(ies)

First name	Middle initial	Last name or legal name of corporation/entity

Relationship to annuitant (in Quebec, relationship to owner/beneficial owner)	◯ equal shares OR ◯ _____ %

First name	Middle initial	Last name or legal name of corporation/entity

Relationship to annuitant (in Quebec, relationship to owner/beneficial owner)	◯ equal shares OR ◯ _____ %

5. Advisor Information

I declare that the third party interests and verification of the identity of the beneficial owner(s) has been completed.

Advisor first name	Last name
Dealer code	Advisor code

Signature of advisor X	Date d d - m m m - y y y y
Signature of training supervisor (where required in Quebec only) X	Date d d - m m m - y y y y

6. Declaration, Acknowledgement, Authorization, Consent and Trading Authorization

By signing in section 6, I confirm that I have read, understood and agree to the statements in the Declaration, Acknowledgement, Authorization, Consent and Trading Authorization on this form.

For all transfers

If this transfer is:

(a) from non-registered (client name or nominee) to nominee registered; or
(b) from client name registered to nominee registered; or
(c) from client name TFSA to nominee TFSA,

I hereby revoke all former designation(s) of beneficiary, successor annuitant, successor holder and successor owner, as applicable.

I understand and agree that:

- The requests made on this form will be processed subject to the contract rules and minimums;
- Creditor protection may not be available if the contract is in the name of a nominee;
- Certain benefits and values determined based on the value of the fund class units acquired in the segregated funds are not guaranteed;
- The following provisions will form part of the contract I am transferring to and will amend the applicable terms of the Information Folder and Contract Provisions:
  - Back-end load options – the deferred sales charge ("DSC") and low load schedule for the funds being transferred will remain intact;
  - The transfer may allow me to deposit to the new contract past the latest age to deposit for transferred funds only;
  - The maturity and death benefit guarantees will remain intact;
- The fund allocations instructions will remain intact. Scheduled switches, PAD and systematic withdrawal plan instructions made on my transferring contract are not transferable;
- This transfer may have tax consequences and it is my responsibility to obtain any necessary tax or legal advice;
- If the advisor associated with the contract is not a licensed insurance agent of World Financial Group Insurance Agency of Canada Inc., I will not be able to make any future deposits to the contract.

6. Declaration, Acknowledgement, Authorization, Consent and Trading Authorization (cont'd)

I acknowledge that:

- Empire Life will maintain the information contained in this form and any related documents in my file. My file enables Empire Life and its employees, agents or representatives, on a continuing basis, to assess this request, appraise the risk, assess any claim that I or my beneficiaries may make for income payments or other benefits, administer my file, answer any questions I may have about this form or my file in general, and provide me with information about my file and Empire Life products and services;
- My file will be kept at the head office of Empire Life. Empire Life may use third party service providers located inside or outside of Canada to process and store my personal information. Personal information that is processed or stored in another jurisdiction may be subject to the laws of that jurisdiction, which may allow disclosure to courts, law enforcement or other government authorities of that jurisdiction under certain circumstances. To access a copy of the most recent privacy policy, please visit the Empire Life website at www.empire.ca. I am entitled to consult my file and, when applicable, have it corrected. To exercise my rights, I must send written notification to: Chief Privacy Officer, The Empire Life Insurance Company, 259 King Street East, Kingston, ON K7L 3A8;
- I have authorized Empire Life to collect, use and disclose personal information about me on a continuing basis for the purpose of my file. I understand that if I try to withdraw this consent, Empire Life will be unable to assess my request or claim and issue any benefits or income payments, and may therefore cancel the contract at its sole discretion. If this occurs, neither I nor my estate will be able to exercise any rights under the contract;
- I have been advised of the name(s) of all advisors that have access to my personal information and have access to my contract.

Trading Authorization

I authorize:

- Empire Life to accept instructions from my advisor to execute financial and non-financial transactions, including but not limited to purchases, withdrawals, switches and resets, in accordance with my instructions and the contract provisions;
- Empire Life to deliver confirmations, statements and other documents to any third party named in section 3, if applicable.

I acknowledge that Empire Life may carry out any authorized transaction requests on my behalf and I will pay any applicable fees or charges due to Empire Life as a result of those transactions.

I understand and agree that Empire Life will not be liable in any way for any claims, demands, actions or losses of any kind that might be made by me or my heirs, beneficiaries, executors and/or administrators, or any other third party, as a result of Empire Life acting on transaction requests.

For transfers to nominee

I authorize:

- And appoint the nominee as my agent;
- Empire Life to deliver confirmation notices, statements and other documents to the nominee and to accept instructions from the nominee to execute financial and non-financial transactions including, but not limited to purchases, withdrawals, switches and resets in accordance with my instructions and the contract provisions.

A photocopy or image of the signed Declaration, Acknowledgement, Authorization, Consent and Trading Authorization will be as valid as the original.

7. Signatures

Signature of CURRENT trustee or agent for trustee for nominee registered accounts (Dealer stamp acceptable for nominee) **X**		Date d d - m m m - y y y y
Signature of NEW trustee or agent for trustee for nominee registered accounts (Dealer stamp acceptable for nominee) **X**		Date d d - m m m - y y y y
Signature of owner or beneficial owner (or first authorized signature for corporate owner) **X**	Province	Date d d - m m m - y y y y
Second authorized signature of owner/beneficial owner (for joint or corporate owner) **X**	Province	Date d d - m m m - y y y y

The undersigned irrevocable beneficiary(ies)/assignee(s) hereby consent to the contract changes and acknowledge that they may affect the benefits under the contract.

Signature of irrevocable beneficiary(ies) (if applicable) **X**	**Signature of assignee(s)** (if applicable) **X**

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