

## Prototype Standardized Money Purchase

### Company Data:

#### Company Information:

1. Name of adopting employer (Plan Sponsor):
- 2a. Plan Sponsor address line 1:
- 2b. Plan Sponsor address line 2:
3. Plan Sponsor city:
4. Plan Sponsor state:
5. Plan Sponsor zip:
6. Plan Sponsor phone AC/Number:
7. Plan Sponsor fax AC/Number:
8. Plan Sponsor EIN:
9. Plan Sponsor fiscal year end:
- 10a. Plan Sponsor entity type:  
 C Corporation  S Corporation  Non profit  Partnership  Limited Liability Company   
Limited Liability Partnership  Sole Proprietorship  Union  Government agency  Other
- 10b. If 10a is "Union", enter name of the representative of the parties who established or maintain the Plan:
- 10c. If 10a is "Other", enter Plan Sponsor entity type:
11. State of organization of Plan Sponsor:
- 12a. The Plan Sponsor is a member of an affiliated service group:  
 Yes  No
- 12b. If 12a is "Yes", list all members of the group (other than the Plan Sponsor):
- 13a. The Plan Sponsor is a member of a controlled group:  
 Yes  No
- 13b. If 13a is "Yes", list all members of the group (other than the Plan Sponsor):

#### Contact Information:

21. Contact name:
22. Contact title:
23. Contact salutation:
24. Contact phone:
25. Contact fax:
26. Contact email:

#### Notes:

30. Notes

## Plan Data:

### A. GENERAL INFORMATION

#### General

1. Plan Number:
- 2a. First line of Plan name:
- 2b. Second line of Plan name:
- 3a. Original effective date of Plan:
- 3b. Is this a restatement of a previously-adopted plan?  
 Yes  No
- 3c. If **A.3b** is "Yes", effective date of Plan restatement:
- 4a. Plan Year End (Month Day):
- 4b. The Plan has a short plan year:  
 Yes  No
- 4ci. If **A.4b** is Yes", enter the start date of the short Plan Year:
- 4cii. If **A.4b** is Yes", enter the end date of the short Plan Year:
5. Limitation Year means:  
 Plan Year  calendar year  tax year of the Plan Sponsor
- 6a. The Plan is frozen as to eligibility and benefits:  
 Yes  No
- 6b. If **A.6a** is "Yes", enter the date the Plan was frozen:

#### Compensation

- 15a. Definition of Compensation:  
 W-2  Withholding  415 Safe Harbor
- 15b. For purposes of allocating Employer Contributions, Compensation is determined over the period specified below ending with or within the Plan Year:  
 Plan Year  calendar year  Plan Sponsor Fiscal Year  Limitation Year
- 16a. Include **Post Severance Compensation**:  
 Yes  No
- 16b. **A.16a** is "Yes", effective date of inclusion of Post Severance Compensation shall be limitation years beginning on of after:
- 17a. Compensation is determined using Post Year End Compensation:  
 Yes  No
- 17b. If **A.17a** is "Yes", effective date of using Post Year End Compensation shall be limitation years beginning on of after:
18. Include deferrals in definition of Compensation:  
 Yes  No
19. Include deemed Code section 125 compensation in definition of Compensation:  
 Yes  No

#### Compensation Exclusions

- 20a. Exclude **pay earned before participation** in Plan from definition of Compensation:  
 Yes  No
- 21a. Exclude **certain fringe benefits** from definition of Compensation:  
 Yes  No
- 22a. Exclude other pay from definition of Compensation for the following Participants:  
 None  HCEs only
- 22b. If **A.22a** is "HCEs only", describe other pay excluded from Compensation:

### Testing Compensation

23. Definition of Testing Compensation:  
 W-2  Withholding  415 Safe Harbor
24. Include deemed Code section 125 compensation in definition of Compensation and Testing Compensation:  
 Yes  No

### Highly Compensated Employee

25. Use top-paid group election in determining Highly Compensated Employees:  
 Yes  No
26. Use calendar year beginning with or within the preceding Plan Year in determining Highly Compensated Employees:  
 Yes  No

### Other Definitions

27. Definition of Disability:  
 Under Code section 22(e)  Under the Social Security Act  Inability to engage in comparable occupation  Pursuant to other Company Disability Plan  Under uniform rules established by the Plan Administrator
28. Name of state or commonwealth for choice of law:

### Miscellaneous

40. Enter date to place on cover of Summary Plan Description:
41. File Number:
42. Trust EIN:
43. User Defined Field #1
44. User Defined Field #2
45. User Defined Field #3
46. User Defined Field #4
47. User Defined Field #5

## B. ELIGIBILITY

### Exclusions

1. Exclude Employees covered under a **collective bargaining agreement** from definition of Eligible Employee:  
 Yes  No
2. Exclude **nonresident aliens** from definition of Eligible Employee:  
 Yes  No

### Other Employer Service

- 6a. Count service with other non-affiliated employers for eligibility purposes:  
 Yes  No
- 6b. If **B.6a** is "Yes", list other non-affiliated employers and indicate for what purposes (e.g., Elective Deferrals, Matching, etc.) the service applies:

### Break in Service

7. **Rule of parity.** If an Employee does not have any nonforfeitable right to Employer contributions, exclude eligibility service before a period of five (5) consecutive One-Year Breaks in Service/Periods of Severance:  
 Yes  No

### Special Participation Date

- 8a.** Allow immediate participation for all Eligible Employees employed on the date specified in **B.8b**:  
 Yes  No
- 8b.i.** If **B.8a** is "Yes", the special participation rule shall apply to all Eligible Employees employed on:
- 8b.ii.** If **B.8a** is "Yes", the Eligible Employees employed on the date specified in **B.8b.i** shall become eligible to participate in the Plan as of:
- 8c.** If **B.8a** is "Yes", does the Plan provide any conditions or limitations on immediate participation:  
 Yes  No
- 8d.** If **B.8a** is "Yes" and **B.8c** is "Yes", describe the conditions or limitations and indicate for what purposes (e.g., Elective Deferrals, Matching, etc.) the limitations or limitations apply:

### Eligibility Service Computation Rules (Hours of Service Only)

- 9a.** Eligibility Computation Period switch to Plan Year:  
 Yes  No
- 9b.** Select hours equivalency for eligibility purposes:  
 None  10 hours per day  45 hours per week  95 hours per semi-monthly payroll period  190 hours per month
- 9c.** If **B.9b** is not "None", the equivalency shall apply to the following employees:  
 All Employees  Only Employees not paid on a per-hour basis

### Pension Contributions

- 30.** Minimum age requirement for Pension Contributions:  
 None  21  20-1/2  20  19  18
- 31a.** Minimum service requirement for Pension Contributions:  
 None  two (2) Years  one and one-half (1-1/2) Year  one (1) Year  nine (9) Months  six (6) Months  five (5) Months  four (4) Months  three (3) Months  two (2) Months  one (1) Month  Specified Hours of Service
- 31b.** Eligibility service computation method:  
 Hours of Service  Elapsed Time
- 31c.** If **B.31b** is "Hours of Service" and **B.31a** is not "None", enter the Hours of Service that must be completed in the period described in **B.31a** (without commas):
- 32a.** Frequency of entry dates for Pension Contributions:  
 Immediate  first day of the calendar month  first day of each plan quarter  first day of the first month and seventh month of the Plan Year  first day of the Plan Year
- 32b.** If **B.32a** is not "Immediate", selection of entry date:  
 coincident with or next following  next following  coincident with or immediately preceding  immediately preceding  nearest to

## C. CONTRIBUTIONS

### Voluntary Contributions

- 11.** Voluntary (after-tax) Contributions are permitted (If "No", questions regarding Voluntary Contributions are disregarded):  
 No  Formerly Allowed

### Pension - Service

- 30.** Enter Hours of Service Required for allocation of Pension Contributions:
- 31a.** If **C.30** is not zero, select equivalency for purposes of **C.31b**:  
 None  10 hours per day  45 hours per week  95 hours per semi-monthly payroll period  190 hours per month

- 31b.** If **C.30** is not zero and if **C.31a** is not "None", the hours equivalency selected in **C.31a** shall apply to:  
 All Employees  Only Employees not paid on a per-hour basis
- 32a.i.** Modify Hour of Service requirement for a Participant who Terminates employment with the Employer during the Plan Year due to death:  
 Yes  No
- 32a.ii.** Modify Hour of Service requirement for a Participant who Terminates employment with the Employer during the Plan Year due to Disability:  
 Yes  No
- 32a.iii.** Modify Hour of Service requirement for a Participant who Terminates employment with the Employer during the Plan Year due to attainment of Normal Retirement Age:  
 Yes  No

#### **Pension - Formula**

- 35a.** Pension allocation formula:  
 Pro rata  Integrated
- 35a.i.** Enter base contribution percentage:
- 35a.ii.** If **C.35** is "Integrated", enter amount of permitted disparity:  
 5.7  5.4  4.3
- 35b.i.** Pension Contributions for NHCEs are subject to a minimum amount:  
 Yes  No
- 35b.ii.** If **C.35c.i** is "Yes", enter the minimum amount:
- 35c.i.** Pension Contributions are subject to a maximum amount:  
 Yes  No
- 35c.ii.** If **C.35d.i** is "Yes", enter the maximum amount:

#### **Pension - Integration**

- 36a.** If **C.35** is "Integrated", integration level for determining Excess Compensation:  
 Taxable wage base  80% of the taxable wage base plus 1.00  Fixed percentage  Fixed dollar amount
- 36b.** If **C.35** is "Integrated", and **C.36a** is "fixed percentage" or "fixed dollar amount", enter fixed percentage or fixed dollar amount (without % or \$ or commas):

#### **Pension - Disability**

- 39a.** Allocate Pension Contributions to Disabled Participants:  
 Yes  No
- 39b.** If **C.39a** is "Yes", select the anniversary of Disability when allocations end:  
 first  second  third  fourth  fifth  sixth  seventh  eighth  ninth  tenth

#### **Rollovers**

- 50.** Rollover Contributions are permitted:  
 No  Yes - All Eligible Employees  Yes - Only active Participants
- 51a.** If **C.50** is not "No", Rollover Contributions are permitted from:  
 All permissible plans  Only qualified plans and conduit IRAs
- 51b.** If **C.50** is not "No" and **C.51a** is "All permissible plans", enter the effective date:

#### **Deemed IRAs**

- 61a.** The Plan may accept voluntary contributions to deemed IRAs  
 Yes  No
- 61b.** If **C.61a** is "Yes", enter effective date:

#### **415 Corrections**

70. Corrections to Code section 415 violations made first to another plan:  
 Yes  No
71. Method of correction of Employer contributions for section 415 violations:  
 Reduce Company contributions  Reallocate to other Participants
72. If C.70 is "Yes", name of plan in which 415 corrections will be made:

**D. VESTING**

**Vesting Service Computation Rules (Hours of Service Only):**

1. Vesting service computation method:  
 Hours of Service  Elapsed Time
2. Number of Hours of Service necessary for Year of Vesting Service (1000 maximum without commas):
- 3a. Select equivalency for vesting purposes:  
 None  10 hours per day  45 hours per week  95 hours per semi-monthly payroll period  190 hours per month
- 3b. If D.1 is "Hours of Service", and D.3a is not "None", the equivalency shall apply to:  
 All Employees  Only Employees not paid on a per-hour basis
- 4a. Vesting Computation Period:  
 Calendar year  Plan Year  Anniversaries of employment date  Other
- 4b. If D.4a is "Other", describe the Vesting Computation Period:

**Other Employer Service**

- 5a. Count service with other non-affiliated employers for vesting purposes:  
 Yes  No
- 5b. If D.5a is "Yes", list other non-affiliated employers:

**Vesting Exceptions**

6. Provide for full vesting for a Participant who Terminates employment with the Employer due to death while an Employee:  
 Yes  No
7. Provide for full vesting for a Participant who Terminates employment with the Employer due to Disability while an Employee:  
 Yes  No

**Vesting Exclusions**

- 8a. Exclude Years of Vesting Service earned before age 18:  
 Yes  No
- 8b. Exclude Years of Vesting Service earned before the Employer maintained this Plan or a predecessor plan:  
 Yes  No
- 8c. **One-year holdout.** If an Employee has a 1-Year Break in Service/Period of Severance, exclude Years of Vesting Service before such period until the Employee has completed a Year of Vesting Service after return to employment with the Employer:  
 Yes  No
- 8d. **Rule of parity.** If an Employee does not have a nonforfeitable right to Employer contributions, exclude Years of Vesting Service earned before a period of 5 consecutive 1-Year Breaks in Service/Periods of Severance:  
 Yes  No

**Special Vesting Provisions**

- 9a. Provide for special vesting provisions:

Yes  No

**9b.** If **D.9a** is "Yes", describe special vesting provisions:

### Pension

- 20.** Pension Contribution Account Vesting Schedule:  
 100%  3-7 Year Graded  2-6 Year Graded  1-5 Year Graded  1-4 Year Graded  5 Year Cliff  3 Year Cliff  2 Year Cliff  Other
- 21a.** Other Pension Schedule - less than 1 year (without % sign):  
**21b.** Other Pension Schedule - 1 year but less than 2 years (without % sign):  
**21c.** Other Pension Schedule - 2 years but less than 3 years (without % sign):  
**21d.** Other Pension Schedule - 3 years but less than 4 years (without % sign):  
**21e.** Other Pension Schedule - 4 years but less than 5 years (without % sign):  
**21f.** Other Pension Schedule - 5 years but less than 6 years (without % sign):  
**21g.** Other Pension Schedule - 6 years but less than 7 years (without % sign):

### Other Vesting

- 31a.** Plan has a vesting schedule other than the schedules described above:  
 Yes  No
- 31b.** If **D.31a** is "Yes", describe the other schedule:  
**31c.** If **D.31a** is "Yes", describe the Participants to which the other schedule applies:

### PPA Pension (Not used in Plan Document)

- 32a.** PPA Pension Contribution Account Vesting Schedule:  
 100%  2-6 Year Graded  1-5 Year Graded  1-4 Year Graded  3 Year Cliff  2 Year Cliff  Other
- 32b.** Retain old Pension Vesting for pre 2007 contributions:  
 Yes  No
- 33a.** Other PPA Pension Schedule - less than 1 year (without % sign):  
**33b.** Other PPA Pension Schedule - 1 year but less than 2 years (without % sign):  
**33c.** Other PPA Pension Schedule - 2 years but less than 3 years (without % sign):  
**33d.** Other PPA Pension Schedule - 3 years but less than 4 years (without % sign):  
**33e.** Other PPA Pension Schedule - 4 years but less than 5 years (without % sign):  
**33f.** Other PPA Pension Schedule - 5 years but less than 6 years (without % sign):

## E. DISTRIBUTIONS

### Normal Retirement

- 1a.** Requirement for Normal Retirement Age:  
 Age only  Age and Plan Participation
- 1b.** Age component of Normal Retirement Age:  
 55  56  57  58  59  59-1/2  60  61  62  63  64  65
- 1c.** If **E.1a** is "Age and Plan Participation", anniversary of participation for Normal Retirement Age:  
 fifth  fourth  third  second  first
- 1d.** Allow in-service distributions after attainment of Normal Retirement Age:  
 Yes  No
- 1e.** If **E.1d** is "Yes", describe the Accounts from which distributions may be made:  
**1f.** It is necessary to amend the Plan to revise the definition of Normal Retirement Age:  
 Yes  No
- 1g.** If **E.1f** is "Yes", describe the Plan provisions that will prevent the Plan from violating the Code and ERISA:  
**1h.** If **E.1f** is "Yes", enter the effective date of the new Normal Retirement Age specified in **E.1a - E.1c**:

### Early Retirement

- 2a. Early Retirement Age means:  
 None  Age only  Later of age and participation
- 2b. If E.2a is not "None", age component of Early Retirement Age (not to exceed 65):
- 2c. If E.2a is "Later of age and participation", enter anniversary of participation (e.g., "fifteenth" or "twentieth"):
- 2d. If E.2a is not "None", provide for 100% vesting upon the attainment of Early Retirement Age while an Employee  
 Yes  No

#### Time and Form of Payment after Termination for Reasons other than Death

- 3a. Distributions after Termination of Employment for reasons other than death shall commence:  
 Immediate  End of Plan Year  Normal Retirement Age  Other
- 3b. If E.3a is "Other", enter time when distributions after Termination of Employment commence:
- 4a. Medium of distribution from the Plan:  
 Cash only  Cash or in-kind  Cash or in-kind to a specified vendor
- 4b. If E.4a is "specified vendor", enter name of specified vendor:
- 5a. Enter percentage of survivor portion of Qualified Joint and Survivor Annuity (50-100 without % sign):
- 5b. Distributions from the Plan after Termination for reasons other than death may be made in the following forms:  
 Lump sum only  Lump sum and installments  Continuous right of withdrawal  Other
- 5c. If E.5b is "Other", describe payment forms that apply uniformly to Participants:
- 6a. Permit distributions in the form of an annuity (in addition to the J&S):  
 Yes  No
- 6b. The spouse of a married Participant shall be the beneficiary of the following percentage of such Participant's Account (No less than 50%):

#### Payment on Participant Death

7. Distributions on account of the death of the Participant shall be made in accordance with one of the following:  
 Pay by end of fifth year  Pay no later than end of Plan Year of death  Allow extended payments for all beneficiaries  Allow extended payments under spousal exception only

#### Cash Out

- 8a. Involuntary cash-out amount for purposes of Section 7.03 (\$5,000 maximum):
- 8b. Involuntary cash-out amount for purposes of Section 7.10 (J&S consent requirements) (\$5,000 maximum):
9. Involuntary cash-out of a terminated Participant's Account balance when it exceeds the cash-out amount specified in E.8 is deferred until:  
 Later of age 62 or Normal Retirement Age  Required Beginning Date - allow lump sum and installments  Required Beginning Date - allow lump sum only
- 10a. Exclude amounts attributable to Rollover Contributions in determining the value of the Participant's nonforfeitable account balance for purposes of the Plan's involuntary cash-out rules:  
 Yes  No
- 10b. If E.10a is "Yes", the election shall apply with respect to distributions made on or after:
- 11a. It is necessary to provide an effective date for the amounts specified in E.8:  
 Yes  No
- 11b. If E.11a is "Yes", enter the effective date of the change in the amount specified in E.8a:
- 11c. If E.11a is "Yes", enter the effective date of the change in the amount specified in E.8b:

#### Required Beginning Date

30. Required Beginning Date for a Participant other than a More Than 5% Owner:  
 Later of age 70-1/2 or retirement  Age 70-1/2  Election of later of age 70-1/2 or retirement

### Required Minimum Distribution Regulation Effective Dates

31. The Plan adopted the 2001 Proposed Regulations regarding Required Minimum Distributions:  
 No  Yes - effective 2001  Yes - effective 2002
32. Effective date of adoption of the 2002 Final and Temporary Regulations regarding Required Minimum Distribution  
 2002  2003

### F. IN SERVICE WITHDRAWALS/LOANS

#### Other Withdrawals

- 32a. In-service withdrawals allowed from Voluntary Contribution Account at any time:  
 Yes  No
- 32b. In-service withdrawals allowed from Rollover Account at any time:  
 Yes  No
- 33a. The Plan permits a distribution to be made to a Participant who has attained age 62 and who has not separated from employment:  
 Yes - under any distribution option  Yes - limited distribution options  No
- 33b. If F.33a is "Yes - limited distribution options", describe the limitations:
- 33c. If F.33a is not "No", the effective date shall be the first day of the first Plan Year beginning on or after:

#### Loans

40. Loans are permitted (If "No", questions regarding loans are disregarded. Skip to G):  
 Yes  No
41. Require showing of financial hardship or unusual or special situation to receive loan:  
 Yes  No
42. Permit loans in excess of 1/2 of account balance up to \$10,000 with adequate security:  
 Yes  No
43. Allow extended loan amortization for purchase of principal residence:  
 Yes  No
44. Minimum loan amount:  
 None  \$100  \$200  \$250  \$300  \$400  \$500  \$600  \$700  \$750  \$800  \$900  \$1,000
45. Maximum number of loans outstanding:  
 1  2  3  4  5
46. If G.3 does not permit participant self-direction, are loans treated as a segregated investment:  
 Yes  No

### G. PLAN OPERATIONS

#### Permitted Investments

- 1a. Plan may invest in "qualifying employer securities" and "qualifying employer real property"  
 Yes  No
- 1b. If G.1a is "Yes", are the securities publicly-traded and subject to the diversification requirements:  
 Yes  No
2. Plan may invest in life insurance:  
 Yes  No

#### Participant Self Direction

3. Specify the extent to which the Plan permits Participant self direction and indicate the Plan's intent to comply with ERISA section 404(c) (If "None", questions regarding Participant self direction are

disregarded. Skip to **G.7a**):

All Accounts with 404(c)  All Accounts w/o 404(c)  Some Accounts  None

4. If **G.3** is not "None", Participants may also establish individual brokerage accounts:  
 Yes  No
5. Participants may exercise voting rights with respect to the following investments (If **G.1** is "Yes" and **G.3** is "All Accounts with 404(c)" then voting rights may not be "None"):  
 None  Company stock only  All investments
- 6a. If **G.3** is "Some Accounts", self direct Voluntary Contribution Account:  
 Yes  No
- 6b. If **G.3** is "Some Accounts", self direct Pension Contribution Account:  
 Yes  No
- 6c. If **G.3** is "Some Accounts", self direct Rollover Contribution Account:  
 Yes  No
- 6d. If **G.3** is "Some Accounts", self direct Transfer Account:  
 Yes  No

#### Valuation Date

- 7a. Enter Valuation Date (if **G.3** is "All Accounts with 404(c)", then Valuation Date must be at least quarterly)  
 Last day of Plan Year  Last day of Plan quarter  Last day of each month  Each business day  Other
- 7b. If **G.7a** is "Other", enter Valuation Date:

#### Plan Administration

- 10a. Designation of Plan Administrator:  
 Plan Sponsor  Committee appointed by Plan Sponsor  Other
- 10b. If **G.10a** is "Other", Name of Plan Administrator:
11. Establishment of procedures for the Plan Administrator and the Investment Fiduciary:  
 Plan fiduciary adopts own procedures  Board sets procedures

#### Trust

20. Trust Agreement is contained in a document separate from the Plan document  
 No  Yes
21. Trustee Type  
 Corporate  Individual
22. If **G.21** is "Corporate", enter Trustee address:
23. Number of Trustee signature lines  
 1  2  3  4  5
- 23a. Name of first Trustee or Corporate Trustee:
- 23b. Name of second Trustee:
- 23c. Name of third Trustee:
- 23d. Name of fourth Trustee:
- 23e. Name of fifth Trustee:
24. If **G.20** is "No", the Trustees may designate one Trustee to act on behalf of all Trustees:  
 Yes  No
- 25a. The Trustee is also the Investment Fiduciary (Section 10.06):  
 Yes  No
- 25b. If **G.25a** is "No", enter the name of the Investment Fiduciary:

#### H. TOP HEAVY

##### Top Heavy Plans

- 1a. Plan to which Top-Heavy allocations are made:

This Plan  Pursuant to the terms of another plan  Partially in this Plan

- 1b. If **H.1** is "Partially in this Plan", describe how the Top Heavy minimum accruals will be made:  
2. If **H.1** is "another plan", name of other Plan to which Top-Heavy allocations are made:  
3. If **H.1** is "This Plan", type of other plan maintained by the Company that covers employees eligible to participate in this Plan:  
 N/A - No other plan  Defined Contribution  Defined Benefit

### Top Heavy Allocations

4. If **H.1** is "This Plan", Participants who share in Top-Heavy minimum allocations:  
 Non-Key only  All Participants

### Top Heavy Vesting

5. Top-Heavy vesting schedule:  
 100%  2-6 Year Graded  3 Year Cliff  Other  
6a. Other Top-Heavy Schedule - less than 1 year (without % sign):  
6b. Other Top-Heavy Schedule - 1 year but less than 2 years (without % sign):  
6c. Other Top-Heavy Schedule - 2 years but less than 3 years (Min 20 without % sign):  
6d. Other Top-Heavy Schedule - 3 years but less than 4 years (Min 40 without % sign):  
6e. Other Top-Heavy Schedule - 4 years but less than 5 years (Min 60 without % sign):  
6f. Other Top-Heavy Schedule - 5 years but less than 6 years (Min 80 without % sign):

### Present Value Assumptions

- 7a. Enter the interest rate to be used for determining Present Value to compute the top-heavy ratio (without % sign):  
7b. Enter the mortality table to be used for determining Present Value to compute the top-heavy ratio:

## I. CUSTOM LANGUAGE

### Custom Language

1. Enter custom language

### Custom Effective Date

2. Enter custom effective date

## J. ADMINISTRATIVE ELECTIONS

### General

1. Indicate the employee identification method that is used on all forms:  
 Employee ID  Social Sec Number  None

### Joinder Agreement

10. For purposes of generating a Joinder Agreement, enter the names of all employers who have adopted the plan other the lead plan sponsor separated by a semicolon:

### QDIA Information

- 50a.** Indicate whether the Plan is intended to provide for a QDIA  
 Yes  No
- 50b.** If **J.50a** is "Yes" (the Plan is a QDIA), enter required information about default investments:
- 50c.** If **J.50a** is "Yes" (the Plan is a QDIA), enter required information about the right to self direct, including fees and expenses
- 50d.** If **J.50a** is "Yes" (the Plan is a QDIA), enter where Participants can find required information about the Plan's investment funds and procedures for changing how accounts are invested:
- 51a.** If **J.50a** is "Yes" (the Plan is a QDIA), Indicate the method of making investment elections:  
 Paper form  Web site  VRU  Web site or VRU  Other
- 51b.** If **J.50a** is "Yes" (the Plan is a QDIA), and **J.51a** is not "Paper form" provide web site address/phone number/other instructions:

### Distributions

- 60.** Indicate how a rollover check will be distributed:  
 Mail to participant  Deliver to participant  Mail to rollover institution  Participant option
- 61a.** If **E.8** is greater than \$1,000, enter the name of the IRA provider for mandatory rollovers:
- 61b.** If **E.8** is greater than \$1,000, describe how fees and expenses of the IRA will be allocated:

### Plan Expenses

- 70a.** Indicate whether the Plan will charge Participants for various plan expenses:  
 Yes  No
- 70b.** If **J.70a** is "Yes" Indicate whether the plan expenses information should appear in the body of the Summary Plan Description (SPD) or as an addendum to the SPD:  
 SPD body  Addendum
- 71a.** If **J.70a** is 'Yes', indicate whether/which Participants will be charged with the expenses of receiving a distribution after termination of employment:  
 None  all Participants  terminated Participants only  active Participants only
- 71b.** If **J.71a** is not 'None', describe the expenses:
- 72a.** If **J.70a** is 'Yes', indicate whether/which Participants will be charged with the expenses of determining required minimum distributions:  
 None  all Participants  terminated Participants only  active Participants only
- 72b.** If **J.72a** is not 'None', describe the expenses:
- 74a.** If **J.70a** is 'Yes', indicate whether/which Participants will be charged with the expenses of receiving an inservice withdrawal other than hardship:  
 None  all Participants  terminated Participants only  active Participants only
- 74b.** If **J.74a** is not 'None', describe the expenses:
- 75a.** If **J.70a** is 'Yes', indicate whether/which Participants will be charged with the expenses of processing a QDRO:  
 None  all Participants  terminated Participants only  active Participants only
- 75b.** If **J.75a** is not 'None', describe the expenses:
- 76a.** If **J.70a** is 'Yes', indicate whether/which Participants will be charged with the expenses of operating the Plan:  
 None  all Participants  terminated Participants only  active Participants only
- 76b.** If **J.76a** is not 'None', describe the expenses:
- 77a.** If **J.70a** is 'Yes', indicate whether/which Participants will be charged with the expenses of establishing a brokerage account:  
 None  all Participants  terminated Participants only  active Participants only
- 77b.** If **J.77a** is not 'None', describe the expenses:
- 78a.** If **J.70a** is 'Yes', indicate whether/which Participants will be charged with expenses other than those described above:  
 None  all Participants  terminated Participants only  active Participants only
- 78b.** If **J.78a** is not 'None', describe the services for which participants will be charged:
- 78c.** If **J.78a** is not 'None', describe the expenses:

## Loans

- 80a.** A Participant may obtain a loan from all of his accounts:  
 Yes  No
- 80b.** If **J.80a** is "No", specify the Accounts from which loans may be made:
- 81.** Indicate whether a Participant may refinance a loan (subject to IRS regs):  
 Yes  No  Unknown
- 82.** Indicate whether a loan becomes payable in full on termination:  
 Yes  No
- 83.** Indicate the extent to which prepayment is permitted:  
 None  Prepay in full only  Prepay in full or in part
- 84.** Indicate the interest rate that will apply to plan loans:
- 85.** Indicate whether loans will be repaid by payroll deduction:  
 Yes  No
- 86.** Indicate the loan repayment frequency:  
 pay period  month  quarter
- 87a.** Indicate whether the plan imposes a loan processing fee:  
 Yes  No
- 87b.** If **J.87a** is "Yes", enter the loan processing fee:
- 88a.** Indicate whether the plan imposes an ongoing loan maintenance fee:  
 Yes  No
- 88b.** If **J.88a** is "Yes", enter the loan maintenance fee:
- 89a.** Indicate whether a default will occur after a specified number of days or after the maximum cure period allowed by IRS regulation:  
 Specified days  Maximum cure period
- 89b.** If **J.89a** is "Specified days", enter the number of specified days:
- 90.** Indicate whether a signature line appears on the loan procedures:  
 Yes  No