Prototype Non-Standardized Target Benefit

Company Data:

30.

Notes

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Company	Intorm	otion
Company	THI OT H	auvii.

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:
	[] Corporation [] Partnership [] Limited Liability Company [] Limited Liability Partnership []
	Sole Proprietorship [] Union
10b.	If 10a. is "Corporation", is it a Subchapter S corporation:
	[] Yes [] No
10c.	If 10a. is "Union", enter name of the representative of the parties who established or maintain the Plan:
11.	State of organization of Plan Sponsor (not postal abbreviation):
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):
Contac	t Information:
21.	Contact name:
22.	Contact title:
23.	Contact salutation:
24.	Contact phone:
25.	Contact fax:
26.	Contact email:
Notes:	

08/24/2004

Plan Data:

A. GENERAL INFORMATION

General

	DI AV I
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:
4.	Plan Year End (Month Day):
5.	Limitation Year means:
	[] Plan Year [] calendar year [] tax year of the Plan Sponsor
Comp	pensation
20.	Definition of Compensation:
	[] W-2 [] Withholding [] 415 Safe Harbor
21.	Include deferrals in definition of Compensation?
	[] Yes [] No
Comp	pensation Exclusions
22.	Exclude pay earned before participation in Plan from definition of Compensation:
	[] Yes [] No
23.	Exclude certain fringe benefits from definition of Compensation:
	[] Yes [] No
24a.	Exclude other pay from definition of Compensation for the following Participants:
	[] None [] HCEs only
24b.	If A.24a is "HCEs only", describe other pay excluded from definition of Compensation:
Testin	ng Compensation
26.	Definition of Testing Compensation:
	[] W-2 [] Withholding
27.	Effective date of consideration of Code section 132(f) transportation fringes in compensation:
Highl	y Compensated Employee
29.	Use top-paid group election in determining Highly Compensated Employees: [] Yes [] No
20	
30.	Use calendar year beginning with or within the preceding Plan Year in determining Highly Compensated Employees for any year other than that described in A.31 : [] Yes [] No
31.	Use calendar year election for 1997 Plan Year: [] Yes [] No
Other	Definitions
32.	Definition of Disability:
·	[] Under Code section 22(e) [] Under the Social Security Act [] Inability to engage in comparable

33.	occupation [] Pursuant to other Company Disability Plan [] Under uniform rules established by the Plan Administrator Name of state or commonwealth for choice of law (Section 14.06):
Miscell	aneous
40. 41. 42. 43. 44. 45. 46. 47.	Enter date to place on cover of Summary Plan Description: File Number: Trust EIN: User Defined Field #1 User Defined Field #2 User Defined Field #3 User Defined Field #4 User Defined Field #5
В.	ELIGIBILITY
Exclusi	ions
1.	Exclude Employees covered under a collective bargaining agreement from definition of Eligible Employee [] Yes [] No
 3. 	Exclude leased Employees from definition of Eligible Employee: [] Yes [] No Exclude nonresident aliens from definition of Eligible Employee:
J.	[] Yes [] No
4a.	Exclude other Employees from definition of Eligible Employee (any exclusion must satisfy Code section 401(a)): [] Yes [] No
4b. 5.	If B.4a is "Yes", describe other excluded Employees from definition of Eligible Employee: An Employee may irrevocably elect not to participate in the Plan: [] Yes [] No
Other 1	Employer Service
6a.	Count service with other non-affiliated employers for eligibility purposes:
6b.	[] Yes [] No If B.6a is "Yes", list other non-affiliated employers:
Break i	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.
8.	[] Yes [] No One-year holdout. If an Employee has a One-Year Break in Service/Period of Severance, exclude eligibility service before such period until the Employee has completed a Year of Eligibility Service after returning to employment with the Employer. [] Yes [] No
Immed	iate Participation
9.	If the Plan is a new plan, allow immediate participation to all Eligible Employees on the original effective date of the Plan specified in A.3a : [] Yes [] No
Pension	n Contributions

10.11.	Minimum age requirement for Pension Contributions: [] None [] 21 [] 20 [] 19 [] 18 Minimum service requirement for Pension Contributions: [] None [] two (2) Years [] one (1) Year [] nine (9) Months [] six (6) Months [] five (5)
12a. 12b.	Months [] four (4) Months [] three (3) Months [] two (2) Months [] one (1) Month 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 If B.12a is not "Immediate", selection of entry date:
120.	[] coincident with or next following [] next following [] coincident with or immediately preceding [] immediately preceding [] nearest to
Eligibil	lity Service Computation Rules
20.21.	Eligibility service computation method: [] Hours of Service [] Elapsed Time Eligibility Computation Period switch to Plan Year:
22.	[] Yes [] No If B.20 is "Hours of Service", number of Hours of Service necessary for Year of Eligibility Service (1000 maximum without commas):
23a.	If B.20 is "Hours of Service" and if eligibility is computed using months, enter the Hours of Service necessary for a Month of Eligibility Service or enter the Hours of Service that must be completed in the month period described above:
23b.	If B.20 is "Hours of Service" and if eligibility is computed using months, must Hours of Service described in B.23a be completed in one month or over a period of months: [] One month [] Period of months
24.	If B.20 is "Hours of Service", 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
C.	<u>CONTRIBUTIONS</u>
Volunt	ary Contributions
11.	If Voluntary Contributions were formerly allowed in the Plan, distributions from a Participant's Voluntary Contribution Account will be paid first out of contributions accumulated prior to January 1, 1987: [] Yes [] No
Pension	n - Service
21a.	Require service for a Participant to receive an allocation of Pension Contributions? (Section 4.03) [] Yes [] No
21b.	If C.21a is "Yes", Hours of Service required in the applicable Plan Year for a Participant to receive an allocation of Pension Contributions (1000 maximum without comma):
22.	Require employment by the Company on the last day of Plan Year for a Participant to receive an allocation of Pension Contributions? [] Yes [] No
23a.	Waive service requirement under C.21 and last day requirement under C.22 for a Participant who Terminates employment with the Employer during the Plan Year due to death? [] Yes [] No
23b.	Waive service requirement under C.21 and last day requirement under C.22 for a Participant who Terminates employment with the Employer during the Plan Year due to Disability? [] Yes [] No
23c.	Waive service requirement under C.21 and last day requirement under C.22 for a Participant who Terminates employment with the Employer during the Plan Year due to attainment of Normal Retirement Age?

24.	[] Yes [] No Method to fix Pension Contribution Code section 410(b) coverage failures (Section 4.03(d)): [] Do not automatically fix [] Add just enough [] Add all
Pensio	on - Formula
25.	Pension contribution formula (Section 4.03): [] Flat Benefit Percentage [] Unit Credit without step [] Unit Credit with step [] Excess Unit Credit [] Excess Flat Benefit [] Offset Unit Credit [] Offset Flat Benefit

Flat Benefit Percentage

25.i. If benefit formula is "Flat Benefit Percentage", enter the Flat Benefit Percentage (without % sign):

Unit Credit without step

- **25.ii.a.** If benefit formula is "Unit Credit without step", enter percent earned each year (without % sign):
- **25.ii.b.** If benefit formula is "Unit Credit without step", enter the maximum number of years taken into account (no less than 25):

Unit Credit with step

- **25.iii.a.** If benefit formula is "Unit Credit with step", enter percent earned each year during first step (without % sign):
- **25.iii.b.** If benefit formula is "Unit Credit with step", enter number of years in first step:
- **25.iii.c.** If benefit formula is "Unit Credit with step", enter percent earned each year during second step (without % sign):
- **25.iii.d.** If benefit formula is "Unit Credit with step", enter the maximum number of years taken into account in the second step:

Excess Unit Credit

- **25.iv.a.** If benefit formula is "Excess Unit Credit", enter the Base Benefit Percentage (without % sign):
- 25.iv.b. If benefit formula is "Excess Unit Credit", enter the Excess Benefit Percentage (without % sign):
- **25.iv.c.** If benefit formula is "Excess Unit Credit", enter the maximum number of years benefit accrues under an integrated formula (may not be less than 25 and may not exceed 35):
- **25.iv.d.** If benefit formula is "Excess Unit Credit", enter accrual rate after the years specified in **25.iv.c** (without % sign):
- **25.iv.e.** If benefit formula is "Excess Unit Credit", enter total number of years after the period described in **25.iv.c**):

Excess Flat Benefit

- **25.v.a.** If benefit formula is "Excess Flat Benefit", enter the Base Benefit Percentage:
- **25.v.b.** If benefit formula is "Excess Flat Benefit", enter the Excess Benefit Percentage:

Offset Unit Credit

- 25.vi.a. If benefit formula is "Offset Unit Credit", enter the Gross Benefit Percentage (without % sign):
- **25.vi.b.** If benefit formula is "Offset Unit Credit", enter the Offset Percentage (without % sign):
- **25.vi.c.** If benefit formula is "Offset Unit Credit", enter the maximum number of years benefit accrues under an integrated formula (may not be less than 25 and may not exceed 35):
- **25.vi.d.** If benefit formula is "Offset Unit Credit", enter accrual rate after the years specified in **25.vi.c** (without % sign):
- 25.vi.e. If benefit formula is "Offset Unit Credit", enter total number of years after the period described in 25.vi.c::

Offset Flat Benefit

25.vii.a. If benefit formula is "Offset Flat Benefit" enter the Gross Benefit Percentage (without % sign): **25.vii.b.** If benefit formula is "Offset Flat Benefit" enter the Offset Percentage (without % sign): Miscellaneous 26a. Average Annual Compensation will be calculated over the following consecutive period: [] Specified years [] All years 26b. If C.26a is "Specified years", enter the number of consecutive years to be averaged in computing Average Annual Compensation (minimum of three): 26c.i. If C.26a is "Specified years", the consecutive year period specified in C.26b will occur entirely within the following period: [] All years [] Specified final years If C.26a is "Specified years" and C.26c is "Specified final years", enter the specified final years (Must be 26c.ii. greater than or equal to C.26b): 27. Interest Rate. For purposes of determining the annual Company contribution necessary to fund the stated benefit, the interest rate will be: [] 7.5 [] 8.0 [] 8.5 **Pension - Integration** 28a.i. If the benefit formula is Integrated, the integration level or offset level for each Plan Year for each Participant will be an amount equal to: [] Covered Compensation [] Greater of 10,000 or one-half of Covered Compensation [] Fixed dollar amount not to exceed 1/2 Covered Comp [] Fixed dollar exceeding 1/2 Covered Comp [] Percentage of Covered Compensation 28a.ii. If the benefit formula is Integrated, enter fixed percentage or fixed dollar amount (without % or \$ signs or commas) if required: 28b.i. Covered Compensation will be determined based on the following year: [] Current Plan Year [] Other Plan Year 28b.ii. If **C.28b.i** is "Other Plan Year", enter year (no more than five years before current year): Election regarding Final Average Compensation. In determining any Participant's Final Average 28c. Compensation, the Plan Year in which a Participant terminates employment shall be disregarded: [] Yes [] No **Pension - Disability** 29a. Allocate Pension Contributions to Disabled Participants (Section 4.03(e)): [] Yes [] No 29b. If **C.29a** is "Yes", select the anniversary of Disability when allocations end: [] first [] second [] third [] fourth [] fifth [] sixth [] seventh [] eighth [] ninth [] tenth **Rollovers** 30. Rollover Contributions are permitted (Section 4.05): [] No [] Yes - All Eligible Employees [] Yes - Only active Participants 31a. If **C.30** is not "No", Rollover Contributions are permitted from: [] All permissible plans [] Only qualified plans and conduit IRAs 31b. If **C.30** is not "No" and **C.31a** is "All permissible plans", enter the effective date: 415 Corrections 40. Corrections to Code section 415 violations made to another plan (Section 5.04): [] Yes [] No 41. If **C.40** is "No", method of correction of Employer contributions for section 415 violations: [] Reduce Company contributions [] Reallocate to other Participants

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42. If **C.40** is "Yes", name of plan in which 415 corrections will be made:

D. <u>VESTING</u>

Vesting Service Computation Rules:

1.	Vesting service computation method: [] Hours of Service [] Elapsed Time
2. 3.	Number of Hours of Service necessary for Year of Vesting Service (1000 maximum without commas): Select equivalency for vesting purposes: [] None [] 10 hours per day [] 45 hours per week [] 95 hours per semi-monthly payroll period []
4.	190 hours per month Vesting Computation Period: [] Calendar year [] Plan Year [] Anniversaries of employment date
Other 1	Employer Service
5a. 5b.	Count service with other non-affiliated employers for vesting purposes: [] Yes [] No If D.5a is "Yes", list other non-affiliated employers:
Vesting	g Exceptions
6.	Provide for full vesting for a Participant who Terminates employment with the Employer due to death while an Employee (Section 6.02): [] Yes [] No
7.	Provide for full vesting for a Participant who Terminates employment with the Employer due to Disability while an Employee (Section 6.02): [] Yes [] No
Vesting	g Exclusions
8a.	Exclude Years of Vesting Service earned before age 18:
8b.	[] Yes [] No 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 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
Pension	n Contributions
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 Schedule - less than 1 year (without % sign):
21b.	Other Schedule - 1 year but less than 2 years (without % sign):
21c.	Other Schedule - 2 years but less than 3 years (without % sign):
21d.	Other Schedule - 3 years but less than 4 years (Min 20 without % sign):
21e. 21f.	Other Schedule - 4 years but less than 5 years (Min 40 without % sign): Other Schedule - 5 years but less than 6 years (Min 60 without % sign):

21g. Other Schedule - 6 years but less than 7 years (Min 80 without % sign): Ε. DISTRIBUTIONS **Normal Retirement** 1a. Requirement for Normal Retirement Age: [] Age only [] Age and Plan Participation Age component of Normal Retirement Age (not to exceed 65): 1b. [] 50 [] 51 [] 52 [] 53 [] 54 [] 55 [] 56 [] 57 [] 58 [] 59 [] 59-1/2 [] 60 [] 61 [] 62 [] 63 [] 64 [] 65 If **E.1a** is "Age and Plan Participation", anniversary of participation for Normal Retirement Age: 1c. [] fifth [] fourth [] third [] second [] first 2. Allow in-service distributions after attainment of Normal Retirement Age (Section 7.01(b)): [] 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 (Section 7.02): [] Immediate [] End of Plan Year [] Normal Retirement Age [] Other If **E.3a** is "Other", enter time when distributions after Termination of Employment commence: 3b. 4a. Medium of distribution from the Plan: [] Cash only [] Cash or in-kind [] Cash or in-kind to a specified vendor If **E.4a** is "specified vendor", enter name of specified vendor: 4b. Distributions from the Plan after Termination for reasons other than death may be made in the following 5. [] Lump sum only [] Lump sum and installments [] Continuous right of withdrawal Permit distributions in the form of an annuity other than Qualified Joint and Survivor: 6. [] Yes [] No **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** 8. Involuntary cash-out amount for purposes of Sections 7.03 and 7.10 (not more than 5000 without dollar sign \$ or commas): 9. Involuntary cash-out of a terminated Participant's Account balance when it exceeds the cash-out amount specified in **E.8** is deferred under Section 7.03(b) until: [] Later of age 62 or Normal Retirement Age [] Required Beginning Date Exclude amounts attributable to Rollover Contributions in determining the value of the Participant's 10a.

Spousal Death Benefits

10b.

11a.

11b.

[] Yes [] No

[] Yes [] No

21. Upon the death of a married Participant, the spouse of the married Participant shall be the beneficiary of the

nonforfeitable account balance for purposes of the Plan's involuntary cash-out rules:

If **E.11a** is "Yes", enter the effective date of the change in the cash-out amount:

If **E.10a** is "Yes", the election shall apply with respect to distributions made on or after It is necessary to provide an effective date for the cash out amount specified in **E.8**:

	following portion of such Participant's Account unless the spouse waives such right in accordance with Section 7.10: (Section 7.04(a)) [] 100% of Account [] 50% of Account
Require	ed 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
Require	ed Beginning Date Transition Rules
31.	The Plan was amended before the Effective Date to revise definition of Required Beginning Date or the Plan is a new plan: [] Yes [] No
32. 33.	If E.31 is "No" and E.30 is not "Age 70-1/2", enter effective date of new definition: If E.31 is "No" and E.30 is "Later of age 70-1/2 or retirement", enter Required Beginning Date transition rule:
	[] Eliminate prospectively - allow election of old rule in interim [] Eliminate prospectively - no election of old rule
34.	If E.31 is "No" and E.30 is not "Age 70-1/2", permit Participants receiving required distributions under old rule to stop distributions until the distributions must recommence under the new definition of Required Beginning Date:
	[] No [] Yes - No new Annuity Starting Date [] Yes - With a new Annuity Starting Date
New 40	1(a)(9) Regulations
35a. 35b. 36a.	The Plan adopts the new proposed IRS 401(a)(9) regulations (Section 7.05(c)): [] No [] Yes - Ann 2001-18 Model Amendment [] Yes - Ann 2001-82 Model Amendment Effective date of adoption of new proposed 401(a)(9) regulations specified in E.35a : Effective date of adoption of final 401(a)(9) regulations (Section 7.11 as added by the Minimum Distribution Addendum to the Basic Plan Document):
36b.	[] 2002 [] 2003 If E.36a is "2002", enter effective date of adoption of final 401(a)(9) regulations in 2002:
F.	IN SERVICE WITHDRAWAL/LOANS
Other V	Vithdrawals
1.	In-service withdrawals allowed from Voluntary Contribution and Rollover Accounts at any time: [] Yes [] No
Loans	
10.	Loans are permitted (Section 8.06) (If "No", questions regarding loans are disregarded. Skip to G): [] Yes [] No
11.	Require showing of financial hardship or unusual or special situation to receive loan: [] Yes [] No
12.	Permit loans in excess of 1/2 of account balance up to \$10,000 with adequate security: [] Yes [] No
13.	Allow extended loan amortization for purchase of principal residence: [] Yes [] No
14.	Minimum loan amount: [] None [] \$100 [] \$200 [] \$250 [] \$300 [] \$400 [] \$500 [] \$600 [] \$700 [] \$750 [] \$800 [] \$900 [] \$1,000
15.	Maximum number of loans outstanding: [] 1 [] 2 [] 3 [] 4 [] 5

16.	If G.3 does not permit participant self-direction, are loans treated as a segregated investment: [] Yes [] No
G.	PLAN OPERATIONS
Permi	tted Investments
1.	Plan may invest in "qualifying employer securities" and "qualifying employer real property" (Section 9.04) [] Yes [] No
2.	Plan may invest in life insurance (Section 9.07): [] Yes [] No
Partic	ipant Self Direction
3.	Specify the extent to which the Plan permits Participant self direction and the Plan's intent to comply with ERISA section 404(c) (Section 9.02) (If "None", questions regarding Participant self direction are disregarded. Skip to G.7a):
4.	[] All Accounts with 404(c) [] All Accounts w/o 404(c) [] Some Accounts [] None 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 (Section 9.06) (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
Valuat	tion 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 A	dministration
10a.	Designation of Plan Administrator (Section 12.01): [] Plan Sponsor [] Committee appointed by Plan Sponsor [] Other
10b. 11.	If G.10a is "Other", Name of Plan Administrator: Establishment of procedures for the Plan Administrator and the Investment Fiduciary (Sections 12.01(c) and 12.02(c)): [] Plan fiduciary adopts own procedures [] Board sets procedures
12a.	Type of indemnification for the Plan Administrator and Investment Fiduciary:
12b.	[] None [] Standard [] Custom If G.12a is "Custom", enter indemnification for the Plan Administrator and Investment Fiduciary:
Trust	
20.	Trust Agreement is contained in a document separate from the Basic Plan Document. [] Yes [] No
21.	Trustee Type

	[] Corporate [] Individual
22.	If G.21 is "Corporate", enter Trustee address:
23.	Number of Trustee signature lines:
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:
24a.	Type of Trustee Indemnification:
	[] Standard [] Custom
24b.	If G.24a is "Custom", enter indemnification for the Trustee:
Н.	TOP HEAVY
11,	
Top He	avy Plans
1.	Plan to which Top-Heavy allocations are made:
	[] This Plan [] Pursuant to the terms of another plan
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
Тор Не	avy Allocations
4.	If H.1 is "This Plan", Participants who share in Top-Heavy minimum allocations:
	[] Non-Key only [] All Participants
Ton Ho	ovy Vesting
тор пе	avy 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
, u.	sign):

- %
- Enter the mortality table to be used for determining Present Value to compute the top-heavy ratio: **7b.**

CUSTOM LANGUAGE APPENDICES I.

Custom Language

1. Enter custom language that is to be added as an Addendum to the Adoption Agreement.

Custom Effective Date

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