

Employee Stock Ownership Plan 401(k)

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:

Additional Company Information:

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

A. 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:

A. Plan Features

- 10a. Elective Deferrals are permitted (Section 4.01):
 Yes No
- 10b. If **A.10a** is "Yes" (Elective Deferrals permitted), enter the effective date of the final 401(k)-(m) regulations:
- 10c. If **A.10a** is "Yes" (Elective Deferrals permitted), Roth Elective Deferrals are permitted:
 Yes No
- 10d. If **A.10a** is "Yes" (Elective Deferrals permitted) and if **A.10c** is "Yes" (Roth Elective Deferrals permitted), enter the effective date for Roth Elective Deferrals:
11. Voluntary (after-tax) Contributions are permitted (Section 4.01) (If "No", questions regarding Voluntary Contributions are disregarded):
 Yes No Formerly Allowed
12. Matching Contributions are permitted (Section 4.02) (If "No", questions regarding Matching Contributions are disregarded):
 Yes No
13. Non-Elective Contributions are permitted (Section 4.03) (If "No", questions regarding Non-Elective Contributions are disregarded):
 Yes No
- 14a. The Matching Contribution Account shall constitute an ESOP Account (Section 1.02)
 Yes No
- 14b. The Non-Elective Contribution Account shall constitute an ESOP Account (Section 1.02)
 Yes No

A. ESOP Contributions

- 15a. If more than one ESOP Account is specified in **A.14**, specify the ordering rule of the ESOP contributions made in the form of Company Stock (Section 4A.01(b)):
 Pro rata Special ordering rule
- 15b. If **A.15a** is "Special ordering rule", specify the ordering rule:

A. Compensation

- 20a.** Definition of Compensation:
 W-2 Withholding 415 Safe Harbor
- 20b.** If **A.20a** is "415 Safe Harbor", exclude amounts received during the year by an employee pursuant to a nonqualified unfunded deferred compensation plan to the extent includible in gross income:
 Yes No
- 21a.** Include deferrals in definition of Compensation?
 Yes No
- 21b.i.** If **A.21a** is "Yes", deferrals included for purposes of Matching Contributions:
 Yes No
- 21b.ii.** If **A.21a** is "Yes", deferrals included for purposes of Nonelective Contributions:
 Yes No
- 22a.** Include **Post Severance Compensation**:
 Yes No
- 22b.1.** **A.22b** applies for Elective Deferrals and Voluntary Contributions:
 Yes No
- 22b.ii.** **A.22b** applies for Matching Contributions:
 Yes No
- 22b.iii.** **A.22b** applies for Nonelective Contributions:
 Yes No
- 22c.** **A.22b** is "Yes", effective date of inclusion of Post Severance Compensation shall be limitation years beginning on of after:
- 22d.** Compensation is determined using Post Year End Compensation:
 Yes No
- 22e.** If **A.22d** is "Yes", effective date of using Post Year End Compensation shall be limitation years beginning on of after:
- 22f.** Include in Compensation payments made to an individual on account of qualified military service:
 Yes No
- 22g.** Include in Compensation payments made to a Participant who is permanently and totally disabled:
 Yes No
- 22h.** Include deemed Code section 125 compensation in definition of Compensation:
 Yes No

A. Compensation Exclusions

- 23a.** Exclude pay earned before participation in Plan from definition of Compensation:
 Yes No
- 23b.** 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 All Participants
- 24b.** If **A.24a** is "HCEs only" or "All Participants", describe other pay excluded from definition of Compensation:

A. Testing Compensation

- 26.** Definition of Testing Compensation:
 W-2 Withholding 415 Safe Harbor

A. Highly Compensated Employee

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

Yes No

A. Other Definitions

32. 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
33. Name of state or commonwealth for choice of law (Section 14.06):

A. 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

B. Exclusions

1. Exclude Employees covered under a collective bargaining agreement from definition of Eligible Employee:
 Yes No
2. Exclude leased Employees from definition of Eligible Employee:
 Yes No
3. Exclude nonresident aliens from definition of Eligible Employee:
 Yes No
- 4a. Exclude other Employees from definition of Eligible Employee (any exclusion must satisfy Code section 401(a)):
 Yes No
- 4b. If **B.4a** is "Yes", describe other excluded Employees from definition of Eligible Employee:
5. An Employee may irrevocably elect not to participate in the Plan:
 Yes No

B. Other Employer Service

- 6a. Count a maximum of five years service with other non-affiliated employers for eligibility purposes:
 Yes No
- 6b. If **B.6a** is "Yes", list other non-affiliated employers:

B. Break in Service

- 7a. **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
- 7b. **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

B. Immediate Participation

- 8a.** If the Plan is a new plan, allow immediate participation to all Eligible Employees on the date specified in **B.8b**:
 Yes No
- 8b.** If **B.8a** is "Yes" Eligible Employees will become eligible to participate in the Plan as of:

B. Eligibility Service Computation Rules

- 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

B. Elective Deferrals/Voluntary Contributions

- 10.** Minimum age requirement for Elective Deferrals/Voluntary Contributions:
 None 21 20-1/2 20 19 18
- 11a.** Minimum service requirement for Elective Deferrals/Voluntary Contributions:
 None one (1) Year eleven (11) Months ten (10) Months nine (9) Months
 eight (8) Months seven (7) Months six (6) Months five (5) Months four (4) Months three (3) Months two (2) Months one (1) Month Specified Hours of Service
- 11b.** Eligibility service computation method:
 Hours of Service Elapsed Time
- 11c.** If **B.11b** is "Hours of Service" and **B.11a** is not "None", enter the Hours of Service that must be completed in the period described in **B.11a** (without commas):
- 12a.** In addition to the foregoing, the Plan provides for additional requirements for eligibility to make Elective Deferrals/Voluntary Contributions:
 Yes No
- 12b.** If **B.12a** is "Yes", describe any other eligibility requirements:
- 13a.** Frequency of entry dates for Elective Deferrals/Voluntary 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 Other dates
- 13b.** If **B.13a** is not "Immediate" or "other dates", selection of entry date:
 coincident with or next following next following
- 13c.** If **B.13a** is "other dates", describe other entry dates:

B. Matching Contributions

- 20.** Minimum age requirement for Matching Contributions:
 None 21 20-1/2 20 19 18
- 21a.** Minimum service requirement for Matching Contributions:
 None two (2) Years one and one-half (1-1/2) Year one (1) Year eleven (11) Months ten (10) Months nine (9) Months eight (8) Months seven (7) Months six (6) Months five (5) Months four (4) Months three (3) Months two (2) Months one (1) Month Specified Hours of Service
- 21b.** Eligibility service computation method:
 Hours of Service Elapsed Time
- 21c.** If **B.21b** is "Hours of Service" and **B.21a** is not "None", enter the Hours of Service that must be completed in the period described in **B.21a** (without commas):
- 22a.** In addition to the foregoing, the Plan provides for additional requirements for eligibility to receive allocations of Matching Contributions:
 Yes No
- 22b.** If **B.22a** is "Yes", describe any other eligibility requirements:
- 23a.** Frequency of entry dates for Matching 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 Other dates
- 23b.** If **B.23a** is not "Immediate" or "other dates", selection of entry date:
 coincident with or next following next following coincident with or immediately preceding immediately preceding nearest to
- 23c.** If **B.23a** is "other dates", describe other entry dates:

B. Non-Elective Contributions

- 30.** Minimum age requirement for Profit Sharing Contributions:
 None 21 20-1/2 20 19 18
- 31a.** Minimum service requirement for Profit Sharing Contributions:
 None two (2) Years one and one-half (1-1/2) Year one (1) Year eleven (11) Months ten (10) Months nine (9) Months eight (8) Months seven (7) 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.** In addition to the foregoing, the Plan provides for additional requirements for eligibility to receive allocations of Profit Sharing Contributions:
 Yes No
- 32b.** If **B.32a** is "Yes", describe any other eligibility requirements:
- 33a.** Frequency of entry dates for Profit Sharing 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 Other dates
- 33b.** If **B.33a** is not "Immediate" or "other dates", selection of entry date:
 coincident with or next following next following coincident with or immediately preceding immediately preceding nearest to
- 33c.** If **B.33a** is "other dates", describe other entry dates:

C. CONTRIBUTIONS

C. ADP/ACP Safe Harbor

- 1a.** If **A.10** is "Yes" (Elective Deferrals are permitted), is this a safe-harbor plan exempt from most testing?
 No Yes - safe harbor match Yes - nonelective contribution Yes - to another plan
- 1b.** If **C.1a** is not "No", indicate the safe harbors the Plan is intended to satisfy:
 ADP and ACP ADP only
- 2.** If **C.1a** is not "No", enter effective date of safe harbor provisions:
- 3.** If **C.1a** is "to another plan", name of other plan to which safe harbor contributions are made:
- 4a.** If **C.1a** is "nonelective", safe harbor nonelective contributions will be made on behalf of:
 All Participants Nonhighly Compensated Employees only Participants meeting the greatest minimum age and service under section 410(a)
- 4b.** If **C.1a** is "nonelective", and **C.4a** is "All Participants", require service for Highly Compensated Employees to receive safe harbor nonelective contribution:
 Yes No
- 4c.** If **C.1a** is "nonelective", **C.4a** is "All Participants", and **C.4b** is "Yes", Hours of Service required in the Plan Year for Highly Compensated Employees to receive safe harbor nonelective contribution (1000 maximum without commas):
- 4d.** If **C.1a** is "nonelective" and **C.4a** is "All Participants", require employment on last day of Plan Year for Highly Compensated Employees to receive safe harbor nonelective contribution:
 Yes No

C. Elective Deferrals

- 5a.** Minimum Elective Deferral contribution:
 None one percent (1%) two percent (2%) three percent (3%)
- 5b.** Maximum Elective Deferral contribution:
 five percent (5%) ten percent (10%) fifteen percent (15%) twenty percent (20%)
 twenty-five percent (25%) thirty percent (30%) forty percent (40%) fifty percent (50%)
 fifty-five percent (55%) sixty percent (60%) sixty-five percent (65%) seventy percent (70%)
 seventy-five percent (75%) eighty percent (80%) eighty-five percent (85%)
 ninety percent (90%) ninety-five percent (95%) one hundred percent (100%)
- 6a.** When may Participants modify/start/stop elections regarding Elective Deferrals/Voluntary Contributions?
 Each pay period Monthly Quarterly Semi Annual Annual
Pursuant to Plan Administrator procedures
- 6b.** May Participants stop election to contribute at any time?
 Yes No
- 7a.** Should Plan provide for negative elections? (Section 4.01(g))
 Yes No
- 7b.** If **C.7a** is "Yes", amount of negative election:
 one percent (1%) two percent (2%) three percent (3%) four percent (4%) five percent (5%)
- 8a.** Allow Participants to make EGTRRA catch-up contributions:
 Yes No
- 8b.** If **C.9a** is "Yes", the election shall apply with respect to contributions on or after:

C. Testing Elections

- 9a.** Actual Contribution Percentages and Actual Deferral Percentages of Nonhighly Compensated Employees are determined using:
 Current year - no exceptions Current year - with exceptions Prior year - no exceptions
 Prior year - with exceptions
- 9b.** If **C.9a** is "with exceptions", enter years for which exceptions apply:
- 9c.** If **C.9a** is "Prior year" and the Plan is a new 401(k) plan, designate NHCE percentage for first Plan Year:
 3% Current year percentages
- 10a.** Actual Contribution Ratios of Nonhighly Compensated Employees are determined using:
 Current year - no exceptions Current year - with exceptions Prior year - no exceptions
 Prior year - with exceptions
- 10b.** If **C.10a** is "with exceptions", enter years for which exceptions apply:
- 10c.** If **C.10a** is "Prior year" and the Plan is a new 401(k) plan, designate NHCE percentage for first Plan Year:
 3% Current year percentages

C. Voluntary Contributions

- 11.** If **A.11** is "Yes" (Voluntary Contribution allowed), Minimum Voluntary Contribution:
 None one percent (1%) two percent (2%) three percent (3%)
- 12.** If **A.11** is "Yes", Maximum Voluntary Contribution:
 five percent (5%) ten percent (10%) fifteen percent (15%) twenty percent (20%)
 twenty-five percent (25%) thirty percent (30%) forty percent (40%) fifty percent (50%)
 seventy-five percent (75%) one hundred percent (100%)
- 13.** If **A.11** is "Yes", Maximum of total combined Elective Deferral/Voluntary Contribution:
 None five percent (5%) ten percent (10%) fifteen percent (15%) twenty percent (20%)
 twenty-five percent (25%) thirty percent (30%) forty percent (40%) fifty percent (50%)
 seventy-five percent (75%) one hundred percent (100%)
- 14.** If **A.11** is "Yes", the Company will base Matching Contributions on a Participant's Voluntary Contributions:
 Yes No

C. Matching - Service

- 21a.** Require service for a Participant to receive an allocation of Matching Contributions?
 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 Matching Contributions (1000 maximum without commas):
- 22.** Require employment by the Company on the last day of Plan Year for a Participant to receive an allocation of Matching Contributions?
 Yes No
- 23a.i.** 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
- 23a.ii.** 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
- 23a.iii.** 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:
 Yes No
- 23b.** Any Hour of Service requirement and last day requirement shall be modified upon the occurrence of the events described in **C.23a** as follows:
 Waive service and last day Waive service only Waive last day only
- 24.** Method to fix Matching Contribution Code section 410(b) coverage failures (Section 4.02(d)):
 Do not automatically fix Add just enough Add all

C. Matching - Formula

- 25.** Matching Contribution formula:
 Discretionary Single rate Two rates
- 26a.** If **C.25** is "Single rate" or "Two rates", rate of Matching Contributions (without % sign):
- 26b.** If **C.25** is "Single rate" or "Two rates", maximum amount of Employee contributions matched on single rate or first rate (without % sign)
- 26c.** If **C.25** is "Two rates", rate of Matching Contributions on second rate (without % sign):
- 26d.** If **C.25** is "Two rates", maximum amount of Employee contributions matched on second rate (without % sign):
- 26e.** If **C.25** is "Single rate" or "Two rates", permit the Board to provide for Matching Contributions to be made in addition to the foregoing:
 Yes No

C. Matching - Maximum Allocation

- 27a.** Plan limits Matching Contributions to a maximum amount/percentage in each Plan Year:
 Yes - maximum % that applies to all Participants Yes - maximum % that applies to HCEs only
 Yes - maximum dollar amount that applies to all Participants Yes - maximum dollar amount that applies to HCEs only No
- 27b.** If **C.27a** is "Yes", enter the maximum percentage or dollar amount (without \$ or % signs or commas):

C. Matching - Allocations

- 28a.** Matching Contributions are allocated to Participant Accounts at the following time(s):
 End of Plan Year Semi-annually Quarterly Each calendar month Each pay period
- 28b.** If **C.27a** is a maximum dollar amount and **C.28a** is not End of Plan Year, apply the dollar limit in **C.27b**:
 On a Plan Year basis only Prorata as of each allocation period

C. Non-Elective - Service

- 31a.** Require service for a Participant to receive an allocation of Non-Elective Contributions?
 Yes No
- 31b.** If **C.31a** is "Yes", Hours of Service required in the applicable Plan Year for a Participant to receive an allocation of Non-Elective Contributions (1000 maximum without comma):
- 32.** Require employment by the Company on the last day of Plan Year for a Participant to receive an allocation of Non-Elective Contributions?
 Yes No
- 33a.i.** Waive service requirement under **C.31** and last day requirement under **C.32** for a Participant who Terminates employment with the Employer during the Plan Year due to death:
 Yes No
- 33a.ii.** Waive service requirement under **C.31** and last day requirement under **C.32** for a Participant who Terminates employment with the Employer during the Plan Year due to Disability:
 Yes No
- 33a.iii.** Waive service requirement under **C.31** and last day requirement under **C.32** for a Participant who Terminates employment with the Employer during the Plan Year due to attainment of Normal Retirement Age:
 Yes No
- 33b.** Any Hour of Service requirement and last day requirement shall be modified upon the occurrence of the events described in **C.33a** as follows:
 Waive service and last day Waive service only Waive last day only
- 34.** Method to fix Non-Elective Contribution Code section 410(b) coverage failures (Section 4.03(d)):
 Do not automatically fix Add just enough Add all

C. Non-Elective - Formula

- 35.** Non-Elective allocation formula (Section 4.03):
 Pro rata

C. Non-Elective - Disability

- 39a.** Allocate Non-Elective Contributions to Disabled Participants (Section 4.03(e)):
 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

C. Non-Elective - Heart

- 39c.** Treat Participant that dies or becomes disabled while performing qualified military service as if he had been employed by the Company on the day preceding death or disability:
 Yes No
- 39d.** If **C.39c** is "Yes", enter effective date (must be on or after January 1, 2007):

C. Qualified Nonelective Contributions

- 40.** Qualified Nonelective Contributions will be made on behalf of (Section 4.04(b)):
 All Participants Nonhighly Compensated Employees only Such Participants determined at the discretion of Employer
- 41a.** If **C.40** is not "at discretion of Employer", require service to receive Qualified Nonelective Contribution?
 Yes No
- 41b.** If **C.40** is not "at discretion of Employer" and **C.42a** is "Yes", Hours of Service required in the applicable Plan Year to receive Qualified Nonelective Contribution (1000 maximum without commas):
- 42.** If **C.40** is not "at discretion of Employer", require employment by the Company on last day of Plan Year to receive Qualified Nonelective Contribution?
 Yes No
- 43a.** If **C.40** is not "at discretion of Employer", indicate whether any modifications shall be made to **C.40** -

C.42:

Yes No

43b. If **C.43c** is "Yes", describe the modifications:

44. If **C.40** is not "at discretion of Employer", the Company's Qualified Nonelective Contribution (in addition to any safe harbor nonelective contribution made pursuant to **C.1**) shall be allocated:

Pro rata Fixed Amount Bottom Up

C. Rollovers

50. Rollover Contributions are permitted (Section 4.05):

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:

C. 415 Corrections

70. Corrections to Code section 415 violations made to another plan (Section 5.04):

Yes No

71. If **C.70** is "Yes", name of plan in which 415 corrections will be made:

D. VESTING

D. Vesting Service Computation Rules:

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):

3. 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

4. Vesting Computation Period:

Calendar year Plan Year Anniversaries of employment date

D. Other Employer Service

5a. Count a maximum of five years service with other non-affiliated employers for vesting purposes:

Yes No

5b. If **D.5a** is "Yes", list other non-affiliated employers:

D. Vesting 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

D. 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 the Account balance derived from Employer contributions, exclude Years of Vesting Service before a period of 5 consecutive 1-Year Breaks in Service/Periods of Severance:

Yes No

D. Matching

10. Matching Contribution Account Vesting Schedule:

100% 2-6 Year Graded 1-5 Year Graded 1-4 Year Graded 3 Year Cliff
 2 Year Cliff Other

10a. Other Schedule - less than 1 year (without % sign):

10b. Other Schedule - 1 year but less than 2 years (without % sign):

10c. Other Schedule - 2 years but less than 3 years (without % sign):

10d. Other Schedule - 3 years but less than 4 years (without % sign):

10e. Other Schedule - 4 years but less than 5 years (without % sign):

10f. Other Schedule - 5 years but less than 6 years (without % sign):

D. Non-Elective PPA Vesting

30a. PPA Non-Elective Contribution Account Vesting Schedule:

100% 2-6 Year Graded 1-5 Year Graded 1-4 Year Graded 3 Year Cliff
 2 Year Cliff Other

30b. Retain old Non-Elective Vesting for pre 2007 contributions:

Yes No

31a. Other PPA Non-Elective Schedule - less than 1 year (without % sign):

31b. Other PPA Non-Elective Schedule - 1 year but less than 2 years (without % sign):

31c. Other PPA Non-Elective Schedule - 2 years but less than 3 years (without % sign):

31d. Other PPA Non-Elective Schedule - 3 years but less than 4 years (without % sign):

31e. Other PPA Non-Elective Schedule - 4 years but less than 5 years (without % sign):

31f. Other PPA Non-Elective Schedule - 5 years but less than 6 years (without % sign):

E. DISTRIBUTIONS

E. Normal Retirement

1a. Requirement for Normal Retirement Age:

Age only Age and Plan Participation

1b. Age component of Normal Retirement Age (not to exceed 65):

50 51 52 53 54 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

E. 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

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. 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

5b. If **E.5a** is "Other", describe payment forms that apply uniformly to Participants:

6. Permit distributions in the form of an annuity:

Yes No

E. 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

E. ESOP Distributions

10a. Distributions from a Participant's ESOP Accounts may be made over a period longer than the period described in Section 7.02(a)(3):

Yes No

10b. Distributions from a Participant's ESOP Accounts may be made pursuant to the elections in **E.3**, **E.5** and **E.7**:

Yes No

11. Distributions from a Participant's ESOP Accounts may be made in Company Stock:

Yes No

12. Apply the distribution rules of Section 7.02(a) and the diversification rules of Section 9.02(b) to Company Stock acquired by the Plan on or before December 31, 1986:

Yes No

13. Provide for a right of first refusal for distributions payable in Company Stock (Section 7.02(d)(4)):

Yes No

E. Cash Out

15a. Involuntary cash-out amount for purposes of Section 7.03 (not more than 5000 without dollar sign \$ or commas):

15b. Involuntary cash-out amount for purposes of Section 7.10 (J&S) (not more than 5000 without dollar sign \$ or commas):

16. Involuntary cash-out of a terminated Participant's Account balance when it exceeds the cash-out amount specified in **E.15a** is deferred under Section 7.03(b) until:

Later of age 62 or Normal Retirement Age Required Beginning Date - allow lump sum and installments Required Beginning Date - allow lump sum only

17a. 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

17b. If **E.17a** is "Yes", the election shall apply with respect to distributions made on or after:

18a. It is necessary to provide an effective date for the cash out amount specified in **E.15**:

Yes No

18b. If **E.18a** is "Yes", enter the effective date of the change in the amount specified in **E.15a**:

18c. If **E.18a** is "Yes", enter the effective date of the change in the amount specified in **E.15b**:

E. Spousal Death Benefits

20. The Plan has received a transfer of assets from a plan subject to the survivor annuity rules of Code sections 411(a)(11) and 417:

Yes No

E. 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

E. New 401(a)(9) Regulations

31. Effective date of adoption of final 401(a)(9) regulations

F. IN SERVICE WITHDRAWALS/LOANS

F. General

1. In-service withdrawals under **F** are allowed from Accounts that are only partially vested:
 No - fully vested only Yes

F. Hardship

10. Hardship withdrawals are allowed from the portion of a Participant's Accounts described in F.1 as follows (Section 8.01) (If "None", questions regarding Hardship withdrawals are disregarded. Skip to **F.20**):
 All Accounts Selected Accounts None
- 11a. The criteria used in determining whether a Participant is entitled to receive a Hardship withdrawal:
 Safe Harbor Non Safe Harbor
- 11b. Expand the Hardship criteria to include the beneficiary of the Participant:
 Yes No
- 11c. If **F.11b** is "Yes", enter the effective date:
- 12a. If **F.10** is "Selected Accounts", hardship withdrawal is permitted from Elective Deferral Account:
 Yes No
- 12b. If **F.10** is "Selected Accounts", hardship withdrawal is permitted from Matching Contribution Account:
 Yes No
- 12c. If **F.10** is "Selected Accounts", hardship withdrawal is permitted from Non-Elective Contribution Account:
 Yes No
- 12d. If **F.10** is "Selected Accounts", hardship withdrawal is permitted from Voluntary Contribution Account:
 Yes No
- 12e. If **F.10** is "Selected Accounts", hardship withdrawal is permitted from Rollover Contribution Account:
 Yes No
- 12f. If **F.10** is "Selected Accounts", hardship withdrawal is permitted from Transfer Account:
 Yes No
13. If Roth Elective Deferrals are permitted and hardships allowed from Elective Deferral Account, permit hardships from Roth Elective Deferral Account:
 Yes Yes - only if qualified distribution No

F. Specified Age

20. In-service withdrawals are allowed on attainment of the age specified in **F.21** from the portion of a Participant's Accounts described in **F.1**. (Section 8.02)
 All Accounts Selected Accounts None
21. In-service withdrawal permitted after age (must be on or after 59-1/2 if Electives or QNECs are eligible Accounts):
 55 56 57 58 59 59-1/2 60 61 62 63 64 65
- 22a. If **F.20** is "Selected Accounts", specified age withdrawal is permitted from Elective Deferral Account.
 Yes No
- 22b. If **F.20** is "Selected Accounts", specified age withdrawal is permitted from Matching Contribution Account.
 Yes No
- 22c. If **F.20** is "Selected Accounts", specified age withdrawal is permitted from Non-Elective Contribution

Account.

Yes No

- 22d.** If **F.20** is "Selected Accounts", specified age withdrawal is permitted from Qualified Nonelective Contribution Account.
 Yes No
- 22e.** If **F.20** is "Selected Accounts", specified age withdrawal is permitted from Voluntary Contribution Account.
 Yes No
- 22f.** If **F.20** is "Selected Accounts", specified age withdrawal is permitted from Rollover Contribution Account.
 Yes No
- 22g.** If **F.20** is "Selected Accounts", specified age withdrawal is permitted from Transfer Account.
 Yes No
- 23.** If Roth Elective Deferrals are permitted and specified age withdrawals are allowed from Elective Deferral Account, permit specified age withdrawals from Roth Elective Deferral Account:
 Yes Yes - only if qualified distribution No

F. Other Withdrawals

- 30a.** In-service withdrawals allowed from Matching and Non-Elective Contribution Accounts after 5 yrs. Participation or on funds held 2 yrs.:
 Yes No
- 30b.** If **F.30a** is "Yes", allow in-service withdrawals after a period certain pursuant to **F.30a** from an Account that constitutes a Participant's ESOP Account:
 Yes No
- 31.** In-service withdrawals allowed from Voluntary Contribution and Rollover Accounts at any time:
 Yes No
- 32a.** Permit Qualified Reservist Distributions:
 Yes No
- 32b.** If **F.32a** is "Yes", enter the effective date:

F. Loans

- 40.** Loans are permitted (Section 8.06) (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
- 47.** A Participant must obtain the consent of his or her spouse, if any, to use the Account balance as security for a loan:
 Yes No

G. PLAN OPERATIONS

G. Permitted Investments

- 1.** Plan may invest assets in Accounts other than ESOP Accounts in life insurance (Section 9.11):

- Yes No
2. Are any assets held in the non-ESOP portion of the plan subject to the diversification requirements for publicly-traded securities:
 Yes No

G. Participant Self Direction

3. Specify the extent to which the Plan permits Participant self direction:
 All Accounts other than ESOP Accounts 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 assets held in Accounts other than ESOP Accounts (Section 9.06(a)):
 Yes No
- 6a. If G.3 is "Some Accounts", self direct Elective Deferral Account:
 Yes No
- 6b. If G.3 is "Some Accounts", self direct Matching Contribution Account:
 Yes No
- 6c. If G.3 is "Some Accounts", self direct Voluntary Contribution Account:
 Yes No
- 6d. If G.3 is "Some Accounts", self direct Non-Elective Contribution Account:
 Yes No
- 6e. If G.3 is "Some Accounts", self direct Qualified Nonelective Contribution Account:
 Yes No
- 6f. If G.3 is "Some Accounts", self direct Rollover Contribution Account:
 Yes No
- 6g. If G.3 is "Some Accounts", self direct Transfer Account:
 Yes No

G. Valuation Date

- 7a. Enter Valuation Date for Accounts other than ESOP Accounts (Article 2 Definitions):
 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:
- 8a. Enter Valuation Date for ESOP Accounts (Article 2 Definitions and Section 9.10):
 Last day of Plan Year Other
- 8b. If G.8a.ii is selected, enter Valuation Date:

G. Plan Administration

- 10a. Designation of Plan Administrator (Section 12.01):
 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 (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:
 None Standard Custom
- 12b. If G.12a is "Custom", enter indemnification for the Plan Administrator and Investment Fiduciary:

G. Qualified Domestic Relations Orders

13. Allow distribution of ESOP Accounts to an Alternate Payee prior to the date the Participant has a Termination of Employment or reaches his earliest retirement age (Section 14.02(b)):
 Yes No

G. Trust

20. Trust Agreement is contained in a document separate from the Basic 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:
- 24a. Type of Trustee Indemnification:
 Standard Custom
- 24b. If G.24a is "Custom", enter indemnification for the Trustee:
25. If G.20 is "No", the Trustees may designate one Trustee to act on behalf of all Trustees:
 Yes No
- 26a. The Trustee is also the Investment Fiduciary (Section 10.06):
 Yes No
- 26b. If G.26a is "No", enter the name of the Investment Fiduciary:

H. TOP HEAVY

H. Top Heavy 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

H. Top Heavy Allocations

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

H. 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 (without % sign):
- 6d. Other Top-Heavy Schedule - 3 years but less than 4 years (without % sign):
- 6e. Other Top-Heavy Schedule - 4 years but less than 5 years (without % sign):
- 6f. Other Top-Heavy Schedule - 5 years but less than 6 years (without % sign):

H. 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 APPENDICES

I. Custom Language

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

I. Custom Effective Date

2. Enter custom effective date(s) that are to be added as an Addendum to the Adoption Agreement:

J. ADMINISTRATIVE ELECTIONS

J. General

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

J. Joinder Agreement

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

J. Annual Notice (automatic enrollment, safe harbor notice and/or QDIA)

- 30a. Indicate the method of making deferral elections:
 Paper form Web site VRU Web site or VRU Other
- 30b. If **J.30a** is not "Paper form" provide web site address/phone number/other instructions:
- 31a. Indicate the method of making investment elections:
 Paper form Web site VRU Web site or VRU Other
- 31b. If **J.31a** is not "Paper form" provide web site address/phone number/other instructions:
32. Indicate the due date of election forms for auto enrollment:

J. QDIA Information (Annual Notice)

- 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:

J. Distributions

60. Indicate how a rollover check will be distributed (Distribution Election Form):
 Mail to participant Deliver to participant Mail to rollover institution Participant option
61. If the Plan allows Roth Elective Deferrals, indicate the distribution order for Roth Elective Deferrals (Distribution Election Form):
 Roth Acct first Other Accts first Pro rata from each Acct At Participant election
- 62a. If **E.8** is greater than \$1,000, enter the name of the IRA provider for mandatory rollovers (Special Tax

Notice, SPD):

62b. If **E.8** is greater than \$1,000, describe how fees and expenses of the IRA will be allocated (SPD):

J. Plan Expenses (SPD)

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:

73a. If **J.70a** is 'Yes', indicate whether/which Participants will be charged with the expenses of receiving a hardship withdrawal:

None all Participants terminated Participants only active Participants only

73b. If **J.73a** 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:

J. Loans

80a. A Participant may obtain a loan from all of his accounts (Loan Procedures Form):

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, for use in Loan Procedures Form):

Yes No Unknown

82. Indicate whether a loan becomes payable in full on termination (Loan Procedures Form and Promissory Note):

Yes No

83. Indicate the extent to which prepayment is permitted (Loan Procedures Form and Promissory Note):

None Prepay in full only Prepay in full or in part

- 84.** Indicate the interest rate that will apply to plan loans (Loan Procedures Form and Promissory Note):
- 85.** Indicate whether loans will be repaid by payroll deduction (Loan Procedures Form and Loan Request Form):
 Yes No
- 86.** Indicate the loan repayment frequency (Loan Procedures Form and Loan Request Form):
 pay period month quarter
- 87a.** Indicate whether the plan imposes a loan processing fee (Loan Procedures Form and SPD):
 Yes No
- 87b.** If **J.87a** is "Yes", enter the loan processing fee (Loan Procedures Form and SPD):
- 88a.** Indicate whether the plan imposes an ongoing loan maintenance fee (Loan Procedures Form and SPD):
 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 (Loan Procedures Form and Promissory Note):
 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

J. SPD Custom Language

- 100.** Enter custom language to appear as an addendum to the Summary Plan Description: