

Third-Party Administrator
Plan Provision Changes Checklist

Your replies will allow us to enter the client's retirement plan provisions into our record keeping system for form purposes.

Legal Name of Plan: _____

Confirm EIN: _____

Plan Year End: ____/____/____	Effective Date of Plan: _____ IRS three digit plan number: _____
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Eligibility and Plan Entry

The eligibility and entry dates apply to the following Money Types: ☐ All A Before Tax ☐ Employer Match (including Safe Harbor) ☐ Employer Non-elective (including Safe Harbor) ☐ Other _____ ☐ Other _____ ☐ Other _____

<input type="checkbox"/> None <input type="checkbox"/> Age ____ (cannot exceed 21) <input type="checkbox"/> No Age restriction Computation period C Plan Year (switch to Plan Year) P Anniversary Year Eligibility computation based on <input type="checkbox"/> Actual Hours A Elapsed time <input type="checkbox"/> One Year of Service (1000 Hours of Service for Actual Hours method) <input type="checkbox"/> ____ months (cannot exceed 12) and ____ hours of service (HOS) Note: If actual hours not provided, the following will be used: 3 months = 250 HOS, 6 months = 500 HOS, 12 months = 1000 HOS <input type="checkbox"/> Initial Eligibility waived _____ (date) for <input type="checkbox"/> Age A Service	<input type="checkbox"/> Immediate <input type="checkbox"/> Semi-annual (first day of plan year and first day of seventh month) <input type="checkbox"/> First day of the month <input type="checkbox"/> Quarterly Plan Entry is: <input type="checkbox"/> Coincident with or next following <input type="checkbox"/> Other: _____
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Complete next eligibility section only if age and service conditions vary by money type

The eligibility and entry dates apply to the following Money Types: ☐ Before Tax ☐ Employer Match (including Safe Harbor) ☐ Employer Non-elective (including Safe Harbor) ☐ Other _____ ☐ Other _____ ☐ Other _____

<input type="checkbox"/> None <input type="checkbox"/> Age ____ (cannot exceed 21) <input type="checkbox"/> No Age restriction Computation period <input type="checkbox"/> Plan Year (switch to Plan Year) <input type="checkbox"/> Anniversary Year Eligibility computation based on <input type="checkbox"/> Actual Hours <input type="checkbox"/> Elapsed time <input type="checkbox"/> One Year of Service (1000 Hours of Service for Actual Hours method) <input type="checkbox"/> ____ months (cannot exceed 12) and ____ hours of service (HOS) Note: If actual hours not provided, the following will be used: 3 months = 250 HOS, 6 months = 500 HOS, 12 months = 1000 HOS Initial Eligibility waived _____ (date) for <input type="checkbox"/> Age A Service	<input type="checkbox"/> Immediate <input type="checkbox"/> Semi-annual (first day of plan year and first day of seventh month) <input type="checkbox"/> First day of the month <input type="checkbox"/> Quarterly Plan Entry is: <input type="checkbox"/> Coincident with or next following Other: _____
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Excluded Classes: ☐ None List: _____

Investment Direction

- ☐ Participant directs all investments
- ☐ *Employer directs investments for:
- ☐ Matching Contributions
 - ☐ Profit Sharing Contributions
- *Requires Product Exception through the sales process

Qualified Default Investment Alternative (QDIA) – Plan Sponsors will be provided with a default/QDIA Election form for completion. If a QDIA is selected, the Plan Sponsor acknowledges that they have notified their document provider of the intent to use a QDIA. If a plan document amendment is required, the Plan Sponsor acknowledges that the protection offered by the use of a QDIA will not begin until all notice requirements have been made and the Plan's document has been properly executed reflecting the use of a QDIA.

Contribution Types (All sources with balances)

- ☐ 401(k) Deferrals from _____% or \$ to _____% or \$
- ☐ Employer Discretionary Match formula of: _____
- ☐ Employer Fixed Match of: _____
- ☐ After-Tax Voluntary
- ☐ Roth 401(k)
- ☐ Employer Profit Sharing **
- ☐ Safe Harbor Match (SHM) ☐ Qualified Contribution Arrangement/QACA (QAC)
- _____ % of deferrals up to _____ % of compensation PLUS
- _____ % of deferrals up to _____ % of compensation
- ☐ Safe Harbor Non-elective (SHN) at _____ % of Included compensation
- ☐ Qualified Non-elective (QNEC)
- ☐ Money Purchase
- ☐ Other/Frozen Sources: _____

See next section for In-Plan Roth Rollover contributions.

Rollovers Allowed: N/A

- ☐ As soon as employed
- ☐ Upon becoming eligible for plan deferrals

Rollover Source Types Allowed:

- ☐ 401(a) or 401(k) Rollover
- ☐ 403(b) Rollover
- ☐ 457(b) Rollover
- ☐ After-Tax Rollover
- ☐ Roth Rollover
- ☐ Roth 403(b) Rollover
- ☐ Roth 457(b) Rollover
- ☐ Designated Roth Rollover
- ☐ Traditional IRA Rollover
- ☐ SIMPLE IRA Rollover
- ☐ SEP IRA Rollover
- ☐ SARSEP IRA
- ☐ Pension (Lump sum)

In-Plan Roth Rollover Contributions Allowed? ☐ No ☐ Yes – If Yes, complete the following section:

No transfer of loans. Loans may not be distributed as part of an In-Plan Roth Rollover Contribution.

In-service distribution provisions. The Employer elects the following regarding in-service distributions from the Plan **solely** for purposes of making an In-Plan Roth Rollover Contribution: (choose either a. or b.)

- a. ☐ **N/A. Existing in-service distribution provisions apply.** The Plan's existing in-service distribution provisions apply. (May only be elected if Plan permits in-service distributions – if selected, the remaining Options in this Section 2.2 do not apply.)
- b. ☐ **In-service Roth distribution provisions.** The Employer elects to permit in-service distributions as follows **solely** for purposes of making an In-Plan Roth Rollover Contribution: (select one or more of 1. through 4.)
1. ☐ The Participant has attained age _____.
 2. ☐ The Participant has _____ months of participation (specify minimum of 60 months).
 3. ☐ the amounts being distributed have accumulated in the Plan for at least _____ years (at least 2).
 4. ☐ Other (describe): _____ (must be definitely determinable and not subject to Employer discretion (e.g., Age 50, but only with respect to non-elective contributions, and not matching contributions)).

Regardless of any election above to the contrary, In-Plan Roth Rollover Contributions are not permitted from a Participant's Elective Deferral Account, Qualified Matching Contribution Account, Qualified Nonelective Contribution Account and accounts attributable to ADP test safe harbor contributions prior to age 59 1/2 or prior to age 62 with respect to an account attributable to amounts transferred into the Plan from a money purchase pension plan or target benefit plan.

Source of In-Plan Roth Rollover Contribution. The Plan permits a direct rollover from the following qualifying sources:

5. ☐ All Accounts
6. ☐ A Participant may only elect an In-Plan Roth Rollover Contribution from the following qualifying sources: (select all that apply)
 - a. ☐ Pre-Tax Elective Deferral Account.
 - b. ☐ Account(s) attributable to Employer matching contributions (includes any ADP/ACP test safe harbor matching contributions).
 - c. ☐ Account attributable to Employer profit sharing contributions.
 - d. ☐ Qualified Nonelective Contribution Account (includes any ADP test safe harbor nonelective contributions).
 - e. ☐ Rollover Account.
 - f. ☐ Other _____ (specify account(s) and conditions in a manner that is definitely determinable and not subject to Employer discretion (e.g., a Participant's Pre-tax Deferral Account or Matching Contribution Account, but not the Participant's Nonelective Contribution Account))

Other limitations on direct In-Plan Roth Rollover Contribution:

7. ☐ No other limitations.
8. ☐ The following limitations apply: (select one or more)
 - a. ☐ The minimum amount that may be rolled over is \$_____ (may not exceed \$1,000).
 - b. ☐ Distributions may only be made from accounts which are fully Vested.

Plan has an automatic deferral feature? ☐ No – Skip to next section ☐ Yes

If Yes, effective date of automatic deferral feature is _____ and type of automatic deferral feature is:

- ☐ Pre PPA Automatic Contribution Arrangement
- ☐ Automatic Contribution Arrangement (ACA)
- ☐ Eligible Automatic Contribution Arrangement (EACA) with a 90 Day permissible withdrawal ☐ No ☐ Yes
- ☐ Qualified Automatic Contribution Arrangement (QACA) with a 90 Day permissible withdrawal ☐ No ☐ Yes

Automatic Deferral feature applies to the following participant population:

- ☐ **Election of at least Automatic Deferral Percent:** All eligible employees who have not made an affirmative election equal to or greater than Automatic Contribution Arrangement initial deferral rate
- ☐ **No Existing Salary Reduction Agreement:** All eligible employees who have not made an affirmative election
- ☐ **New Participants Entry Date:** All eligible employees with a participation date equal to or greater than _____ (date)
- ☐ **New Participants Hire Date:** All eligible employees with a hire date equal to or greater than _____ (date)

Minimum Automatic Deferral Rate _____ %

Maximum Automatic Deferral Rate _____ %

Scheduled increases: ☐ Do not apply ☐ Apply as follows:

<u>Plan Year</u>	<u>Deferral Amount</u>
1	3%
2	3%
3	4%
4	5%
5 and thereafter	6%

☐ Other

<u>Plan Year</u>	<u>Deferral Amount</u>
1	_____%
2	_____% (% must equal year one in order for Great-West to provide automatic deferral notice services*)
3	_____%
4	_____%
5 and thereafter	_____%

* Great-West can perform deferral rate increase only after deferral has been in effect for 12 months and can only increase deferral rate at the beginning of the plan year, i.e. deferral effective 7/2/2011 increase would occur 1/1/2013 for a 12/31 PYE plan

☐ Other – Describe Automatic Deferral increases: _____

Allocation Criteria to receive Matching Contribution:

☐ None

For Annual Match Calculation Periods Only:

- ☐ _____ hours of service (cannot exceed 1,000)
- ☐ Employed on the last day of the plan year
- ☐ 501 hours of service **or** employed on the last day of the plan year
- ☐ 1,000 hours of service **and** employed on the last day of the plan year

The Allocation Conditions above will not be required if the participant has terminated due to:

- ☐ Retirement
- ☐ Disability
- ☐ Death
- ☐ Early Retirement

Allocation Criteria to receive Profit Sharing Contribution:

☐ None

- ☐ _____ hours of service (cannot exceed 1,000)
- ☐ Employed on the last day of the plan year

- ☐ 501 hours of service **or** employed on the last day of the plan year
- ☐ 1,000 hours of service **and** employed on the last day of the plan year

The Allocation Conditions above will not be required if the participant has terminated due to:

- ☐ Retirement
- ☐ Disability
- ☐ Death
- ☐ Early Retirement

Age 50 Catch-up Allowed? Yes No

If yes, does the plan match on catch-up contributions? Yes No

Is the plan subject to Qualified Joint and Survivor Annuity Rules and/or require Spousal Consent? Yes No

Corrective Distributions

- ☐ Not Applicable, plan does not allow for Roth Contributions
- ☐ Employee Before Tax to be distributed first, Roth will be distributed second
- ☐ Roth will be distributed first, Employee Before Tax will be distributed second

Mandatory Distributions

- ☐ No mandatory distributions
- ☐ \$1,000 mandatory cash-out threshold Includes rollover sources (GWRS recordkeeping allows only this option if cash-out threshold is \$1000)
- ☐ \$5,000 or less cash-out threshold with automatic IRA rollover for distributions greater than \$1,000
- If choosing Great-West Retirement Services® as your IRA provider, the "Lifetime Advantage IRA Plan Sponsor Agreement" will need to be completed

Retirement Ages:**Normal Retirement Age**

- ☐ Age 65 (maximum age)
- ☐ Age _____ and _____ Years of participation
- ☐ Age _____ and _____ Years of Service
- ☐ Other: _____

Early Retirement Age

- ☐ None
- ☐ Age 55
- ☐ Age _____ and _____ Years of participation
- ☐ Age _____ and _____ Years of Service
- ☐ Other _____

Loans: : Allowed ☐ Not allowed If allowed sources include:☐ All ☐ List sources: _____Will plan be converting loans: ☐ Yes ☐ No**Loan Administration:**

- ☐ Recordkept by Great-West
- ☐ Recordkept by TPA

If loans recordkept by Great-West Retirement Services®:

Note: Loan checks are mailed direct to participants, and the contact with the plan sponsor will receive an electronic loan file feed report via the PSC website.

☐ **GWRS standard policy**

- ☐ Number of outstanding loans permitted: _____
- ☐ Minimum loan amount:\$_____ (cannot exceed \$1000)
- ☐ Maximum loan term - general purpose:_____
- ☐ Maximum loan term - principal residence:_____
- ☐ No refinance option
- ☐ Interest rate – Prime Rate + ____%

☐ **GWRS Loans for Hardship Reasons only**

- ☐ Number of outstanding loans permitted: _____
- Minimum loan amount:\$_____ (cannot exceed \$1000)
- ☐ No refinance option
- ☐ Interest rate – Prime Rate + ____%

☐ **Custom policy (attach for review and acceptance)If****Loan Administration:**

- If loans administered by Great-West Retirement Services®, the following will apply:
 - TPA to provide loan valuation information as of the transfer date
 - Client verification of final loan valuation information required
 - If any loan repayments are received prior to the final loan conversion the effective date of the loan payment will change to the first business date after loan records are converted.
 - Are loans initiated via the Website or Key Talk (automated Telephone Response System) allowed? Yes ☐ No
- If loans administered by TPA, money source splits are needed for each converting loan

IN-SERVICE DISTRIBUTION OPTIONS

If plan allows for incoming rollovers, are rollover disbursements allowed anytime? ☐ Yes ☐ No – Regardless of selection, please indicate below when rollover sources are also allowed by each In-Service Withdrawal type below:

	In-Service Withdrawals	100% vested Req't	Before Tax	Roth	QNEC1	QNEC2	SHM1 SHN1 QAC1	ER Match	Profit Sharing	Pre-tax Roll-over	Roth Roll-over	After Tax Roll-over	Other
	None allowed												
	59 1/2												
	Age												
	Other:												
	Safe Harbor Hardship				N/A	N/A	N/A						
	Facts & Circumstances Hardship				N/A	N/A	N/A						
	Normal Retirement Age												

	Early Retirement Age												
	Disability												
	Years of Service		N/A	N/A	N/A	N/A	N/A						
	Years of Participation		N/A	N/A	N/A	N/A	N/A						

If Hardship allowed, suspension period is: ☐ 6 months ☐ 12 months

If Hardship allowed, who will be calculating Hardship availability amounts? ☐ TPA ☐ Client ☐ Great-West If Great-West selected, hardship availability amounts by participant will need to be provided at conversion.

Does the plan have any existing life insurance policies or offer ongoing as an investment? ☐ No ☐ Yes, If yes, additional agreements and policy information will be required from the Plan Sponsor in order to pay insurance policy premiums from plan assets.

VESTING/Forfeitures

Vesting - ☐ All A Employer Match ☐ Employer Non-elective ☐ Other _____ ☐ Other _____ ☐ Other _____

- ☐ Immediate
☐ 3-year cliff (100% after three years of service)
☐ 5-year graded (20% after first year of service)
☐ 6-year graded (20% after two years of service and 20% each year after)
☐ Other: _____

Additional Vesting - ☐ All ☐ Employer Match ☐ Employer Non-elective ☐ Other _____ ☐ Other _____ ☐ Other _____

- ☐ Immediate
☐ 3-year cliff
☐ 5-year graded (20% after first year of service)
☐ 6-year graded (20% after two years of service and 20% each year after)
☐ Other: _____

Vesting on Participant Statements – Pension Protection Act

- ☐ Yes - Great-West to reflect vesting on statements. Actual Hours methods for Years of Service crediting requires annual vesting updates via the website by plan sponsor or TPA. If plan is able to process payroll via a PDI (payroll data interchange) file, Great-West is able to track and show the plans vesting on statements (PDI files are required if Great-West will track eligibility and/or offer automatic/online enrollment).
☐ NONE - TPA will provide a supplemental statement to plan participants to provide vested percentages for each plan participant

IF YES IS SELECTED ABOVE (Great-West to reflect vesting on statements), AND PLAN USES AN ACTUAL HOURS METHOD FOR TRACKING YEARS OF SERVICE FOR VESTING, WILL TPA PROVIDE VESTING UPDATES FOR PLAN? ☐ Yes ☐ No **NOTE: The TPA Cannot select 'Yes' for plans using Elapsed Time or Equivalency methods for calculating Years of Service OR if Great West is providing online enrollment or automatic enrollment services.**

If the TPA will be providing vesting updates to Great-West, the TPA will be required to provide an initial Years of Service file prior to blackout release and periodic Years of Service updates via the PartnerLink website manually or through established file upload processes for Actual Hours methods.

Vesting Computation Period

- ☐ Plan Year ☐ Anniversary or Employment Year

Years of Service for Vesting

- ☐ Actual Hours
☐ Year of service = 1,000 hours
☐ Year of service = _____ hours (cannot exceed 1,000 hours)
☐ Elapsed Time
☐ Equivalency
☐ Month (190 hours credited for at least 1 hr worked)
☐ Semi-Monthly (95 hours credited for at least 1 hr worked)
☐ Week (45 hrs credited with at least 1 hr worked in week)
☐ Day (10 hrs credited if 1 hr worked in the day)
☐ Week (45 hrs credited with at least 1 hr worked in week)

Service Excluded for Vesting

- ☐ None
☐ Service prior to Plan effective date excluded
☐ Service prior to age 18 excluded

100% Immediate Vesting upon

- ☐ Death
☐ Disability
☐ Early Retirement

Match Forfeitures

- ☐ N/A – no forfeitures
☐ Reallocate to participants
☐ Used to reduce plan expenses, then reduce Employer Contributions
☐ Used to reduce Employer Contributions

Profit Sharing Forfeitures

- ☐ N/A – no forfeitures
☐ Reallocate to participants
☐ Used to reduce plan expenses, then reduce Employer Contributions
☐ Used to reduce Employer Contributions

Post Severance Distribution Options (please select one below)

- ☐ Lump Sum, partial withdrawals and installments (Req'd for SecureFoundation Funds feature)
- ☐ Lump Sum and installments (Req'd for SecureFoundation Funds feature)
- ☐ Lump Sum and installments only if Participant subject to lifetime RMDs
- ☐ Lump Sum only (no partial withdrawals or installments)

Pension Protection Act – Statement Narratives

Complete the following sections only if the plan has a permitted disparity provision, a floor offset arrangement or any limitation and/or restriction on a participant's right to direct investments with plan assets. The narratives entered below will show up on participant quarterly statements:

Permitted Disparity (N/A for 403(b) Plans):

Floor Offset (Defined Benefit Plans):

Limitations or restrictions on participant rights to direct the investment of his or her account (N/A for 403(b) Plans):

Required Minimum Distributions:

- TPA will monitor RMDs and will provide necessary notifications and calculations.

Transferring of Assets: to be coordinated with Great-West Retirement Services® and TPA.

- Transfer of assets and blackout notice preparation to be coordinated with Great-West Retirement Services®

Please note –

- Great-West Retirement Services® will complete all participant tax reporting only for distributions processed by us
- Great-West Retirement Services® will need to be apprised of any subsequent plan document amendments to the Plan.
- The client will have full access to Plan Service Center which will allow contribution remittances, loan distributions, etc.
- Client can utilize Great-West Retirement Services® Plan Service Center to view client and participant information
- TPA to provide confirmation of all disbursements for authorization, vesting calculations (unless client provides full PDI file for Great-West Retirement Services® to track vesting), hardship approval amounts, etc.

Sign Here

Signature of TPA Representative

Date

Great-West Retirement Services® refers to products and services provided by Great-West Life & Annuity Insurance Company, FASCore, LLC (FASCore Administrators, LLC in California), Great-West Life & Annuity Insurance Company of New York, White Plains, New York, and their subsidiaries and affiliates. Great-West Life & Annuity Insurance Company is not licensed to conduct business in New York. Insurance products and related services are sold in New York by its subsidiary, Great-West Life & Annuity Insurance Company of New York. Other products and services may be sold in New York by FASCore, LLC.

SIGNATURE REQUIRED