

# Plan Establishment Kit



#### EMPLOYEE FIDUCIARY LLO

P. O. Box 3144 Mobile, AL 36652-3144 (877) 401-5100 (251) 436-0800

### INTRODUCTION

Thank you for choosing Employee Fiduciary as your retirement plan provider.

To help simplify the plan establishment process, we are providing you with this Plan Establishment Kit. This guide outlines the necessary steps to achieve an orderly and timely setup of records and investments.

If you have any questions regarding the completion of this guide, please contact your Employee Fiduciary plan installation specialist.

### **TABLE OF CONTENTS**

Installation Checklist F	Page 2
Installation TimelineF	Page 3
Company ProfileF	Page 4
Plan ProfileF	Page 5
Contact InformationF	Page 6
Plan Service OptionsF	Page 7
Plan InvestmentsF	Page 8
Bank Debit AuthorizationF	Page 9
Plan Specifications Form	Page 10
Plan Design ConsiderationsF	Page 14

## **INSTALLATION CHECKLIST**

While our job is to manage the installation process, we need help from you. A summary of your responsibilities is listed below.

Task:		Completed?
Provide comp	leted Plan Establishment Kit	
The following s	ections require your completion (pages 4-14):	
	Company Profile	
	Plan Profile	
	Contact Information	
	Plan Service Options	
	Plan Investments (see spreadsheet)	
	Bank Debit Authorization	
	Plan Specifications Form	
Provide emplo	yee census via Excel spreadsheet	
Approve and e	execute new plan documents	
Schedule and	hold enrollment meetings	
Distribute Sun	nmary Plan Description (SPD)	П
Distribute Suit	illiary Flan Description (or D)	_
Schedule payr	oll training/Upload first payroll together with EF	

### **INSTALLATION TIMETABLE**

This table outlines the major tasks to be completed during the plan installation process: participant/trust account setup, document creation, investment selection, and participant enrollment. This table outlines responsible parties and offers an approximate timeline for completion. Startup plans take approximately 60 days to install.

	Account Setup	<b>Document Creation</b>	Investment Selection	Participant Enrollment
Step 1	Establish plan custodial account with trust company	Complete Plan Specifications Form	Select investment lineup	
Step 2		Complete new Plan Document	Confirm investment availability	
Step 3	Establish participant accounts on recordkeeping system	Review & approve new Plan Document	Provide enrollment materials	Schedule enrollment meetings
Step 4		Distribute Summary Plan Description (SPD) to participants		Hold enrollment meetings
Step 5	Conduct payroll training and upload 1st payroll			
	·	lity of Plan Sponsor lity of Employee Fiduciary		

### **COMPANY PROFILE**

COMPANY NAME:			
ADDRESS:			
CITY,STATE,ZIP:			
PHONE:		FAX:	
EMPLOYER EIN:		FISCAL YEAR END	(E.G., 12/31):
PAYROLL SCHEDULE:			
☐ Weekly	☐ Bi-Weekly	☐ Semi-monthly	☐ Monthly
BUSINESS ENTITY TYP	E:		
☐ C-Corporation	□ S-Corporation	□ Partnership	☐ Sole Proprietorship
□ LLC	☐ Non-Profit	□ Other	
Please list owners and cotal 100%):	officers of Company -	attach additional sheet if ne	cessary (percentages should
Name	% Owned	Family members employe	ed Relationship
	he following section.		terest in another company? If sed to help determine your
Name		Company Name	% Owned

<sup>\*</sup>A Controlled Group is a group of business entities that have certain forms of common ownership. This can include sole proprietorships, partnerships, LLCs or other corporations. When a Controlled Group exists, all employees of all entities are treated as employed by a single employer for plan qualification purposes.

## **PLAN PROFILE**

PLAN NAME:		
FIDELITY BOND:		
Under ERISA, a fidelity bond must be obtained and main misappropriation by the plan fiduciaries. The fidelity bond with a minimum of \$1,000 and a maximum of \$500,000. obtain one. If the plan does have a bond, please provide the	d must be at no less If the plan does not	than 10% of plan assets yet have a bond, please
Bond carrier:	Bond amount:	_
PLAN SPONSORSHIP:		
Will this plan be co-sponsored by another company? employees are allowed to participate in your plan and who Profile. If yes, please list any plan co-sponsor(s):		
Company Name		EIN
OTHER RETIREMENT PLANS:		EIN
	nt plan? If yes, plea	
OTHER RETIREMENT PLANS:  Does your company sponsor another qualified retirement	nt plan? If yes, plea	
OTHER RETIREMENT PLANS:  Does your company sponsor another qualified retiremer information:	nt plan? If yes, plea	se provide the following
OTHER RETIREMENT PLANS:  Does your company sponsor another qualified retiremer information:	nt plan? If yes, plea	se provide the following

### **CONTACT INFORMATION**

### **DAILY CONTACT**

Name:		Title:		
Phone Number:		Email:		
Additional Role(s):	☐ Primary A	uthorized Signer <sup>(1)</sup>	☐ Secondary Authorized Signer <sup>(2)</sup>	
Additional Role(3).	☐ Payroll Co	ontact <sup>(3)</sup>		
Sponsor Website Access:	☐ Full	☐ Limited <sup>(4)</sup> – No	Participant Level Access	
ADDITIONAL CONTACTS				
Name:		Title:		
Phone Number:		Email:		
Additional Role(s):	☐ Primary A	uthorized Signer <sup>(1)</sup>	☐ Secondary Authorized Signer <sup>(2)</sup>	
riaditional riolo(o).	☐ Payroll Co	□ Payroll Contact <sup>(3)</sup>		
Sponsor Website Access:	☐ Full	☐ Limited <sup>(4)</sup> – No I	Participant Level Access	
Name:		Title:		
Phone Number:		Email:		
Additional Dala(a)	☐ Primary A	uthorized Signer <sup>(1)</sup>	☐ Secondary Authorized Signer <sup>(2)</sup>	
Additional Role(s):	☐ Payroll Co	□ Payroll Contact <sup>(3)</sup>		
Sponsor Website Access:	☐ Full	☐ Limited <sup>(4)</sup> – No I	Participant Level Access	
			s on behalf of the Plan Sponsor, including the only have one Primary Authorized Signer. The	

Primary Authorized Signer will automatically have full access to the secure portal.

<sup>&</sup>lt;sup>(2)</sup>The Secondary Authorized Signer is an additional person authorized to sign legal documents on behalf of the Plan Sponsor. This person cannot approve loan requests.

<sup>&</sup>lt;sup>(3)</sup>The Payroll Contact is the person Employee Fiduciary will contact for payroll related issues and will upload 401(k) plan contributions via our website.

<sup>(4)</sup> Users with limited access will not have access to participant level records.

### **PLAN SERVICE OPTIONS**

PARTICIPANT STATEMENT PREFERENCES (choose one)
☐ Standard – Online with email reminders
Quarterly statements are posted to participant's account on the web. Participants with valid email addresses also receive email notification that their quarterly statement has been posted to the web. Participants are responsible for maintaining valid email addresses.
☐ Paper statements mailed to all participants.
Mailed statements are \$1.50 each, subject to postal rates.
INVOLUNTARY CASH-OUT THRESHOLD (for terminated participants)
□ \$1,000 or □ \$5,000
Involuntary cash-outs in excess of \$1,000 must be rolled into an IRA on behalf of the participant. If limit chosen is greater than \$1,000, plan sponsor must execute an "IRA rollover" services agreement.
SELF-DIRECTED BROKERAGE ACCOUNTS
Will plan investment options include self-directed brokerage accounts (SDBAs)? □ Yes □ No
Participants with SDBAs will be charged \$100 per year by Employee Fiduciary, in addition to account maintenance fees and trading costs charged by the brokerage firm, TD Ameritrade. If recordkeeping or advisory fees are paid from plan assets, it will be the plan sponsor's responsibility to ensure all SDBAs maintain the cash balance necessary to pay these fees.

### **PLAN INVESTMENTS (see spreadsheet)**

#### **INVESTMENT LINEUP**

Please select the Plan's investment lineup using the spreadsheet provided to you. You may choose up to 40 investments. If any of your selections are unavailable we will notify you and allow you to choose replacement investments.

### **DEFAULT FUND**

Please indicate your plan's default investment selection on the spreadsheet. You may choose a single default investment that will apply for all participants without investment elections, or a series of investments (such as target date funds) based on the employees' birth-dates. If the second option is chosen, you must also provide instructions to map each default investment choice to a birth-date range.

### **FORFEITURE FUND**

Please indicate your plan's forfeiture account investment selection on the spreadsheet. The forfeiture fund is how money forfeited from non-vested accounts will be invested. Forfeitures should be invested in a cash equivalent fund such as a money market.

### **BANK DEBIT AUTHORIZATION**

To achieve quick and accurate contribution processing, Employee Fiduciary uses an automated process to fund payroll contributions via Automated Clearing House (ACH).

Please complete the Account information section below to provide Employee Fiduciary with information about the bank account to be used to fund contributions. Please authorize Employee Fiduciary to ACH this account by completing the Company Authorization section.

**ACCOUNT INFORMATION** 

Name on Account:					
Bank Name:					
Bank Address:					
City, State, Zip:					
Type of Account:		Checking		Savings	
ABA Routing Number:			Account Numbe	er:	
COMPANY AUTHORIZA	TIOI	N			
bank account below via A and applicable loan pay Fiduciary. We agree to	Auton ment man nount nain	nated Clearing ts to the plan intain a suffici s to this accou- in effect until ca	House (ACH). The as indicated on patient balance to count, should there be a anceled in writing	plan custodian to transfer funds from transferred amounts reflect contribution ayroll contribution file sent to Employer such transfers. This also proving a need for adjustment or entry correct	ions yee ides
Signature of Plan Trustee	; UI <i>F</i>	Authonzed Pers	5UI1	Date	
Printed Name				Title	

## **PLAN SPECIFICATIONS FORM**

Please refer to the PLAN DESIGN CONSIDERATIONS section of this form for more information about design options.

A. GENERAL INFORMATION			
Plan Effective Date:		_ Plan Year-E	nd:
Plan Effective Date will affect plan con January 1, 2012 effective date, contrib is elected, contributions will be based	utions will be calculated	based on full 2012 cor	
Type of Plan:			
□ 401(k) Plan □ 403(	(b) Plan 🚨	457(b) Plan	
Plan Features:			
☐ Pre-tax Deferrals ☐ Roth	Deferrals $\Box$	Safe Harbor	■ Match
☐ Profit Sharing			
B. ELIGIBILITY			
Service Requirement: 401(kg	)/ Safe Harbor	Match	Profit Sharing
One Year of Service			
None			
Other			
Age Requirement:			
Age 21			
None			
Other			
Entry Dates:			
Semi-annual			
Quarterly			
Monthly			
Immediate			
Other			
Will plan waive above-selected elig	gibility provisions for A	LL employees emplo	oyed on a particular date?
·	special effective date:		•
Will an employee have to work 1,0	•		
□ No □ Yes		,	, , , , , , , , , , , , , , , , , , ,
Excluded Employees:			
□ None	☐ Union Employee	s DN	Ionresident Aliens
☐ Leased Employees			

C. COMPENSATION			
Plan compensation shall except:	mean wages and othe	er payments for which the em	ployer must file a Form W-2,
☐ Fringe Benefits	☐ Post-Se	everance <sup>(1)</sup>	Other <sup>(2)</sup>
1)"Post-severance" compens termination.	ation is unused sick, va	cation, or other leave paid withir	the 2½ months following date o
	special "IRC 414(s)		la cannot elect this option. Othe an compensation definition fo
For an employee's first ye	ar of participation, thi	s compensation shall be reco	gnized from:
☐ The first day of the pla	n year 🔲 The day	the employee is eligible to e	nter the plan
D. EMPLOYEE CONTRIB	BUTIONS		
` '		mpensation. <i>If percentage is</i> also applies to Roth Deferrals	not indicated, 401(k) deferrals s (if applicable).
An employee may start or	modify a 401(k) defe	rral election on the following	requency:
□ Per Payroll	■ Monthly	Quarterly	□ Semi-annually
Will plan provide for autor	natic enrollment?	☐ No, if no skip to section E	□ Yes
Automatic enrollm	ent default percentage	e:% (minimum 3%)	
Is feature to qualif	y as a QACA?	□ No □ Yes	
What is	default escalation sch	edule:	
What is	vesting schedule?	☐ 100% immediate	2-year cliff
E. SAFE HARBOR CON	<b>TRIBUTIONS</b>		
Effective date of safe harl	oor feature:	☐ Plan Effective Date ☐	Date
selects a January 1, 201	2 effective date, safe	ation for the 1st plan year. For harbor contributions will be arbor contributions will be based	example: if a calendar year plan calculated based on full 2012 on pro-rated compensation.
Choose one of the two sa	fe harbor contribution	options below:	
☐ Safe Harbor Matching	Contribution - choose	e only one of the three followi	ng options:
		ontributions up to the first 3% at 2% of Compensation	of Compensation, plus 50%
Enhanced Form	nula:% of ap	pplicable contributions up to _	% of Compensation
	• • •	contributions up to the first 1% of Compensation (QAC	of Compensation, plus 50% A plans only)
The Safe Harbor r	natching contribution	formula elected above is appl	ied separately for each:
Per Payroll	Monthly	Quarterly	Annually
☐ Safe Harbor Non-Elec	tive Contribution		
% (no less th	an 3%) of included co	ompensation	

1 . 14	ATCHING CONTRIBUTIONS					
The	employer match will be:    Discretionary    Fixed (i.e. Required)					
If fix	If fixed, describe match formula:% of 401(k) up to% of Compensation					
Mat	hing Contributions will be allocated to participant accounts at the following time(s):					
	er Payroll					
Allo	ation restrictions (if applicable) – check either a <u>or</u> b and/or c:					
	a. An employee must be employed with the employer on the last day of the plan year OR must have more than 500 hours of service for the plan year,					
	<u>or</u>					
	b. An employee must be credited with at leasthours of service (may not exceed 1,000) during the plan year					
	c. An employee must be employed with the employer on the last day of the plan year					
	If any of the above are checked, the employer match must be funded annually (not per payroll). If the plan is a narbor 401(k) plan any allocation restriction will subject <b>ALL</b> matching contributions to non-discrimination testing.					
G. F	ROFIT SHARING CONTRIBUTIONS					
The	Profit Sharing contribution will be:    Discretionary    Fixed (i.e. Required)					
The	Profit Sharing formula will be:					
□ Pro Rata □ Integrated (integration level will be% of SSA Taxable Wage Base)						
	ro Rata					
	ro Rata					
<b>-</b> 1						
□ N	ew Comparability – one group per participant (additional fees apply)					
Prof	ew Comparability – one group per participant (additional fees apply)  Sharing Contributions will be allocated to participant accounts at the following time(s):					
Prof	ew Comparability – one group per participant (additional fees apply)  Sharing Contributions will be allocated to participant accounts at the following time(s):  er Payroll  Monthly  Quarterly  Annually					
Prof	ew Comparability – one group per participant (additional fees apply)  Sharing Contributions will be allocated to participant accounts at the following time(s):  er Payroll					
Prof	ew Comparability – one group per participant (additional fees apply)  Sharing Contributions will be allocated to participant accounts at the following time(s):  er Payroll					
Prof	ew Comparability – one group per participant (additional fees apply)  Sharing Contributions will be allocated to participant accounts at the following time(s):  er Payroll					
Profi	ew Comparability – one group per participant (additional fees apply)  Sharing Contributions will be allocated to participant accounts at the following time(s):  er Payroll					
Prof	ew Comparability – one group per participant (additional fees apply)  Sharing Contributions will be allocated to participant accounts at the following time(s):  er Payroll					
Profi	ew Comparability – one group per participant (additional fees apply)  Sharing Contributions will be allocated to participant accounts at the following time(s):  Payroll					

I. VESTING			
Employer contribution vesting schedule(s):	Match	Profit Sharing	l
100% Immediate			
3-Year Cliff (1-2 yrs = 0%, 3yrs = 100	0%)		
6-Year Graded (20% each yr after 2	yrs)		
Other (note schedule below)			
1 Year% 4 Years	%		
2 Years% 5 Years_	%		
3 Years% 6 Years	%		
Will the following service be excluded for ves	ting purposes?		
Service before the original effective of	date of this plan   No	☐ Yes	
Years of service before the employed	e's 18 <sup>th</sup> birthday    No	☐ Yes	
Special 100% vesting – an employee's vester	d percentage is increased	o 100% if the employee:	
☐ Dies ☐ Becomes o	lisabled		
J. DISTRIBUTIONS			
Will the lump sum form of distribution be the p	plan's sole form of distribut	ion?	
□ No □ Yes			
If no, optional forms available:	□ Partial payments	☐ Installments	
Are Hardship withdrawals permitted?	□ No	□ Yes	
Sources Available:	☐ All (excludes safe harbor)	☐ Employee contributions	s only

K. LOANS

Age:

Are In-Service withdrawals permitted?

Sources Available:

Will Plan permit loans? □ No □ Yes

Maximum number of loans permitted? □ One □ Other\_\_\_\_\_

□ No

□ 59 ½

☐ Yes

☐ NRA

☐ Age\_\_\_

☐ Employee contributions only

Loan repayments are deducted by payroll deduction and remitted along with payroll contributions.

### PLAN DESIGN CONSIDERATIONS

This form describes important considerations when choosing amongst the various options contained on the Plan Specifications Form.

#### A. GENERAL INFORMATION

Plan type and plan features are elected in this section. A 401(k)/Profit Sharing plan can be sponsored by private or tax-exempt organizations. A 403(b) plan can be sponsored by tax-exempt or public education organizations. A 457(b) plan can be sponsored by tax-exempt or certain government organizations.

If a plan feature is selected here, the applicable section of the Plan Specifications Form must also be completed. For example, if safe harbor is elected, the safe harbor section of the Plan Specifications Form must also be completed.

#### **B. ELIGIBILITY**

Employers may allow new employees to enter the plan immediately on hire or wait and set minimum age requirements. Employers may also limit plan entry dates to monthly, quarterly, or semiannual windows. Generally, employers with transient work force favor more restrictive eligibility requirements.

The law permits you to exclude union and nonresident alien employees from your plan without issue. You can exclude other classes of employee, but only if these classes do not exceed 30% of your workforce.

#### C. COMPENSATION

The law permits you to exclude certain types of compensation for plan purposes without issue, including compensation earned prior to plan entry and fringe benefits. You can exclude other types of compensation (bonuses, overtime, etc), but these exclusions will subject the compensation definition to special annual testing (additional fees apply).

### D. EMPLOYEE CONTRIBUTIONS

401(k) deferrals are pre-tax contributions made to a plan at the election of an employee, in lieu of receiving such amounts as cash compensation. Roth deferrals are similar to 401(k) deferrals, only they are contributed by employee on an after-tax basis.

An automatic enrollment feature allows an employer to enroll employees in a 401(k) plan without the employees' affirmative election, as long as the employees have the right to "opt out" of contributing or change the amount of automatic deferral. Adding an automatic enrollment feature to a 401(k) plan generally increases the level of employee participation in the plan.

A Qualified Automatic Contribution Arrangement (QACA) is special type of automatic enrollment feature that also satisfies safe harbor contribution requirements (see Safe Harbor Contributions).

### E. SAFE HARBOR CONTRIBUTIONS

A safe harbor 401(k) plan is a type of 401(k) that automatically satisfies ADP/ACP testing requirements. A safe harbor 401(k) plan will also automatically satisfy top heavy minimum contribution requirements for a year in which the only contributions made to the plan are elective deferrals (pre-tax or Roth) and safe harbor contributions (i.e., no profit sharing contributions).

Eligible safe harbor contributions include:

- 4% matching contribution
- 3.5% matching contribution (QACA safe harbor plans only see Employee Contributions section)
- 3% non-elective contribution

These contributions are non-discretionary (required) contributions. They must be subject to 100% vesting and not be subject to any allocation conditions.

#### F. MATCHING CONTRIBUTIONS

The plan may provide for a matching contribution based on the elective deferrals made by participants. The matching formula also may be discretionary, so that the employer will determine each year what the rate of match should be.

The following factors might be taken into consideration in designing a matching contribution formula: (1) whether the employer wants discretion in setting the amount each year, (2) whether the formula should be tiered (i.e., a different rate of match for different levels of elective deferrals), and (3) whether the amount of the match should be capped to a specific percentage of compensation or a specific dollar amount.

If the match is funded after the close of the year, the plan can require participants to satisfy certain allocation conditions in order to receive a contribution. For example, the plan can require participants to work a certain number of hours during the plan year (up to 1,000 hours) and/or be employed on the last day of the year.

### **G. PROFIT SHARING CONTRIBUTIONS**

A key advantage of a profit sharing contribution feature is that the employer can have flexibility in determining its annual contribution to the plan because of the ability to use a discretionary contribution formula. This way the employer is able to contribute more in years of high profitability, and to contribute less when business is not as good, without having to amend the plan's contribution formula.

There are three principle profit sharing allocation formulas:

- Pro rata allocates a uniform contribution percentage amongst participants
- Integrated provides a greater allocation on compensation earned in excess of the "integration level" (usually the Social Security taxable wage base)
- New Comparability permits different allocation rates based on employee class assuming nondiscrimination testing is passed

If the profit sharing is funded after the close of the year, the plan can require participants to satisfy certain allocation conditions in order to receive a contribution. For example, the plan can require participants to work a certain number of hours during the plan year (up to 1,000 hours) and/or be employed on the last day of the year.

### H. RETIREMENT AGE

At normal retirement age, participant accounts become immediately 100% vested. The maximum retirement age allowed by law is the later of 1) age 65 or 2) 5<sup>th</sup> anniversary of plan participation. The most commonly used retirement age is 65.

#### I. VESTING

401(k) and most safe harbor contributions must always be 100% immediately vested. Other contributions may be subject to a vesting schedule. When a participant terminates, they are only entitled to the vested portion of their account balance. Any unvested portion of their account must be forfeited to the plan. The plan can use these forfeitures to pay plan expenses or reduce future employer contributions. Generally, employers with transient work force favor lengthier vesting schedules in order to use forfeitures.

#### J. DISTRIBUTIONS

Often, plans only will only permit the lump sum form of distribution when a participant separates from service and is entitled to a distribution. Under the lump sum option, a participant must take their entire vested account balance in a single distribution. Other distribution forms available include installment payments and partial payments.

The plan can permit a participant to take a distribution while still employed. These are called "in-service" distributions. These distributions can be available upon the attainment of a certain age (59 ½ or greater) or a "hardship" event. Eligible hardship events are defined by the law.

The plan may permit the involuntary cash-out of small account balances. Balances under \$1,000 may be distributed in cash to the participant. Balances under \$5,000 may be involuntarily rolled into an IRA for the benefit of the participant.

### K. LOANS

The employer can allow or disallow loans. Loans are often very popular with employees but add administrative complexity for the employer, who often must sign off on loan requests.