

**ADOPTION AGREEMENT FOR
AMERICAN UNITED LIFE INSURANCE COMPANY
NON-STANDARDIZED 401(k) PROFIT SHARING PLAN AND TRUST**

The undersigned Employer adopts the American United Life Insurance Company Prototype Non-Standardized 401(k) Profit Sharing Plan and Trust and elects the following provisions:

CAUTION: Failure to properly fill out this Adoption Agreement may result in disqualification of the Plan.

EMPLOYER INFORMATION

1. EMPLOYER'S NAME, ADDRESS, TELEPHONE NUMBER AND TIN

Name: Hellebusch Tool & Die, Inc.

Address: 4 Southlink Drive

Street

Washington Missouri 63090

City

State

Zip

Telephone: (636) 239-7543

Taxpayer Identification Number (TIN): 43-1006595

2. TYPE OF ENTITY

- a. ☐ Corporation (including Tax-exempt or Non-profit Corporation)
- b. ☐ Professional Service Corporation
- c. ☒ S Corporation
- d. ☐ Limited Liability Company that is taxed as:
 - 1. ☐ a partnership or sole proprietorship
 - 2. ☐ a Corporation
 - 3. ☐ an S Corporation
- e. ☐ Sole Proprietorship
- f. ☐ Partnership (including Limited Liability)
- g. ☐ Other: _____ (must be a legal entity recognized under federal income tax laws)

3. EMPLOYER'S FISCAL YEAR means the 12-consecutive-month period:

- a. ☒ Beginning on January 1st (e.g., January 1st)
month day
and ending on December 31st
month day
- b. ☐ Other: _____ (must be the period used for IRS reporting purposes; e.g. the 12-month period ending on the last Saturday of December)

4. AFFILIATED EMPLOYERS/PARTICIPATING EMPLOYERS. Is the Employer a member of a controlled group or an affiliated service group (within the meaning of Code Section 414(b), (c), or (o))?

- a. ☒ No. (If selected, skip to Question 5.)
- b. ☐ Yes, Employer is a member of (select all that apply):
 - 1. ☐ a controlled group
 - 2. ☐ an affiliated service group

AND, will any of the Affiliated Employers adopt the Plan as Participating Employers?

- 3. ☐ Yes. (Complete a Participation Agreement for each Participating Employer.)
- 4. ☐ No. (The Plan could fail to satisfy the Code Section 410(b) coverage rules.)

PLAN INFORMATION

5. PLAN NAME:

Hellebusch Tool & Die, Inc. Retirement Plan

Non-Standardized 401(k) Profit Sharing Plan and Trust

6. EFFECTIVE DATE

- a. ☐ This is a new Plan effective as of _____ (hereinafter called the "Effective Date").
- b. ☒ This is an amendment and restatement of a plan which was originally effective May 1, 1989. The effective date of this amendment and restatement is July 1, 2011 (hereinafter called the "Effective Date").
- c. ☐ FOR EGTRRA RESTATEMENTS: This is an amendment and restatement to bring a plan into compliance with the Economic Growth and Tax Relief Reconciliation Act of 2001 ("EGTRRA") and other legislative and regulatory changes. The Plan's original effective date was _____. Except as specifically provided in the Plan, the effective date of this amendment and restatement is _____ (hereinafter called the "Effective Date"). (May enter a restatement date that is the first day of the current Plan Year. The Plan contains appropriate retroactive effective dates with respect to provisions for the appropriate laws.)

7. **PLAN YEAR** means the 12-consecutive-month period:

Beginning on January 1st (e.g., January 1st)
month day

and ending on December 31st
month day

EXCEPT that there will be a Short Plan Year (if the effective date of participation is based on a Plan Year, then coordinate with Question 16.):

- a. ☒ N/A
- b. ☐ beginning on _____ month _____ day, _____ year (e.g., July 1, 2007)
- and ending on _____ month _____ day, _____ year

8. VALUATION DATE means:

- a. ☒ [X] Every day that the Trustee, any transfer agent appointed by the Trustee or the Employer, and any stock exchange used by such agent are open for business (daily valuation).
- b. ☐ [] The last day of each Plan Year.
- c. ☐ [] The last day of each Plan Year half (semi-annual).
- d. ☐ [] The last day of each Plan Year quarter.
- e. ☐ [] Other (specify day or days): _____ (must be at least once each Plan Year).

9. PLAN NUMBER assigned by the Employer

- a. [X] 001
b. [] 002
c. [] Other:

10. TRUSTEE(S):

- a. [X] Individual Trustee(s) who serve as Discretionary Trustee(s) over assets not subject to control by a corporate Trustee. (If more than 6, add name(s) and title(s) to this Section and to the signature page.)

Name(s)	Title(s)
Jeff Hellebusch	Trustee
Wally Hellebusch	Trustee

Non-Standardized 401(k) Profit Sharing Plan and Trust

Address and Telephone number:

1. ☒ Use Employer address and telephone number.
2. ☐ Use address and telephone number below:

Address: _____
Street

City State Zip
Telephone: _____

- b. ☐ Corporate Trustee

Name: _____
Address: _____
Street

City State Zip
Telephone: _____

AND, the corporate Trustee shall serve as:

1. ☐ a Directed (nondiscretionary) Trustee over all Plan assets except for the following:

2. ☐ a Discretionary Trustee over all Plan assets except for the following:

AND, shall a separate trust agreement that is approved by the IRS for use with this Prototype Plan be used with this Plan?

- c. ☒ No.
- d. ☐ Yes, a Frontier Trust Agreement will be used.

NOTE: If Yes is selected, an executed copy of the trust agreement between the Trustee and the Employer must be attached to this Plan. The Plan and trust agreement will be read and construed together. The responsibilities, rights and powers of the Trustee shall be those specified in the trust agreement.

11. PLAN ADMINISTRATOR'S NAME, ADDRESS AND TELEPHONE NUMBER:

(If none is named, the Employer will be the Plan Administrator.)

- a. ☒ Employer (Use Employer address and telephone number).
- b. ☐ Use name, address and telephone number below:

Name: _____
Address: _____
Street

City State Zip
Telephone: _____

12. CONSTRUCTION OF PLAN

This Plan shall be governed by the laws of the state or commonwealth where the Employer's (or, in the case of a corporate Trustee, such Trustee's) principal place of business is located unless another state or commonwealth is specified: _____

13. CONTRIBUTION TYPES

The following contributions are authorized under this Plan. The selections made below should correspond with the selections made under the Contributions and Allocations Section of this Adoption Agreement.

- a. ☒ Elective Deferrals (Section 401(k) Salary Reductions including Roth contributions, if selected, at Question 27.)
- b. ☐ SIMPLE 401(k) Contributions (Question 28.)
- c. ☐ 401(k) Safe Harbor Contributions (Match/Nonelective) (Question 29.)
- d. ☒ Employer Matching Contributions (Question 30.)
- e. ☒ Employer Nonelective Profit Sharing Contributions (includes Prevailing Wage Contributions) (Question 31.)
- f. ☒ Rollover Contributions (Question 45.)
- g. ☒ After-tax Voluntary Employee Contributions (Question 46.)
- h. ☐ None. This is a frozen Plan effective: _____.

ELIGIBILITY REQUIREMENTS

14. ELIGIBLE EMPLOYEES (Plan Section 1.25) means all Employees (including Leased Employees) EXCEPT for the category of Employees selected in a. through f.: (select all that apply below)

NOTE: Unless otherwise specified in this Section at item f. below, Elective Deferrals include Roth Elective Deferrals, after-tax voluntary Employee contributions, and Rollover Contributions; Matching includes QMACs; and Nonelective Profit Sharing includes QNECs. ADP/ACP safe harbor contributions and SIMPLE 401(k) contributions are subject to the exclusions for Elective Deferrals except as provided in Question 29.

	All Contributions		Elective Deferrals	Matching	Nonelective Profit Sharing
a. No Exclusions	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
b. Union Employees (as defined in Plan Section 1.25)	1. <input checked="" type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
c. Nonresident Aliens (as defined in Plan Section 1.25)	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
d. Highly Compensated Employees	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
e. Leased Employees	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
f. Other: _____ (must be definitely determinable, may not be based on age or length of service, and, if using the average benefits test to satisfy Code Section 410(b) coverage testing, must be a reasonable classification).	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>

AND, by selecting item g. and/or h. below, such category of Employees will be **INCLUDED** in the definition of Eligible Employees:

	All Contributions		Elective Deferrals	Matching	Nonelective Profit Sharing
g. Employees who become Employees as the result of a "Code Section 410(b)(6)(C) transaction" (as defined in Plan Section 1.25) shall be INCLUDED in the definition of Eligible Employee without regard to the transition period.	1. <input checked="" type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
h. The term Leased Employee shall INCLUDE all leased employees without regard to the 1-year waiting period (set forth in Code Section 414(n)(2)(B)).	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>

15. CONDITIONS OF ELIGIBILITY (Plan Section 3.1)

Any Eligible Employee will be eligible to participate in the Plan upon satisfaction of the following (select a. or all that apply in b. – l.):

NOTE: Unless otherwise specified in this Section at item j. below, Elective Deferrals include Roth Elective Deferrals, after-tax voluntary Employee contributions, and Rollover Contributions; Matching includes QMACs; and Nonelective Profit Sharing includes QNECs. ADP/ACP safe harbor contributions and SIMPLE 401(k) contributions are subject to the conditions for Elective Deferrals except as provided in Question 29.

Non-Standardized 401(k) Profit Sharing Plan and Trust

	All Contributions		Elective Deferrals	Matching	Nonelective Profit Sharing
a. No age or service required	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
b. Age 20 1/2	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
c. Age 21	1. <input checked="" type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
d. Age _____ (may not exceed 21)	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
e. 6 months of service	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
f. 1 Year of Service	1. <input checked="" type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
g. 2 Years of Service	N/A	OR	N/A	3. <input type="checkbox"/>	4. <input type="checkbox"/>
h. _____ (not to exceed 1,000) Hours of Service within _____ (not to exceed 12) consecutive months from the Eligible Employee's employment commencement date. If an Employee does not complete the stated Hours of Service during the specified time period, the Employee is subject to the 1 Year of Service requirement in f. above.	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
i. _____ (not to exceed 12) consecutive months of employment from the Eligible Employee's employment commencement date. If an Employee does not complete the stated number of months, the Employee is subject to the 1 Year of Service requirement in f. above.	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
j. Other: _____ (must be an age or service requirement that is definitely determinable and may not exceed age 21 and for Elective Deferrals, 1 Year of Service; for Employer matching and/or profit sharing contributions, may not exceed 2 Years of Service).	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>

NOTE: For Employer matching and/or profit sharing contributions, if more than 1 Year of Service is selected, 100% immediate vesting is required for such contributions.

NOTE: If the service requirement is or includes a fractional year, then an Employee will not be required to complete any specified number of Hours of Service to receive credit for such fractional year. If expressed in months of service, then an Employee will not be required to complete any specified number of Hours of Service in a particular month, unless selected in h. above.

NOTE: Year of Service means Period of Service if Elapsed Time method is chosen.

AND, the service and/or age requirements specified above shall be waived in accordance with the following (leave blank if there are no waivers of conditions):

	All Contributions		Elective Deferrals	Matching	Nonelective Profit Sharing
k. If employed on _____ the following requirements will be waived. The waiver applies to any Eligible Employee unless otherwise specified in c. below. Such Employees shall enter the Plan as of such date (select a. and/or b. AND c. if applicable):	1. <input type="checkbox"/>	OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>
a. <input type="checkbox"/> service requirement (will let part-time Eligible Employees into the Plan)					
b. <input type="checkbox"/> age requirement					
c. <input type="checkbox"/> waiver is for: _____ (e.g., employees of a specific division).					

Non-Standardized 401(k) Profit Sharing Plan and Trust

1. If employed on _____ 1. ☐ **OR** 2. ☐ 3. ☐ 4. ☐
the following requirements will be waived.
The waiver applies to any Eligible Employee
unless otherwise specified in c. below. Such
Employees shall enter the Plan as of such date
(select a. and/or b. AND c. if applicable):
a. ☐ service requirement (will let part-time Eligible Employees into the Plan)
b. ☐ age requirement
c. ☐ waiver is for: _____ (e.g., employees of a specific division).

16. EFFECTIVE DATE OF PARTICIPATION (ENTRY DATE) (Plan Section 3.2)

An Eligible Employee who has satisfied the eligibility requirements will become a Participant in the Plan as of the date selected below:

NOTE: Option c. below can only be selected when eligibility is 6 months of service or less and age is 20 1/2 or less. However, options e.3. and e.4. may be selected when eligibility is 1 1/2 Years of Service or less and age is 20 1/2 or less and the Plan provides for 100% vesting.

NOTE: Unless otherwise specified in this Section at item f. below, Elective Deferrals include Roth Elective Deferrals, after-tax voluntary Employee contributions, and Rollover Contributions; Matching includes QMACs; and Nonelective Profit Sharing includes QNECs. ADP/ACP safe harbor contributions and SIMPLE 401(k) contributions are subject to the provisions for Elective Deferrals except as provided in Question 29.

- | | All
Contributions | | Elective
Deferrals | Matching | Nonelective
Profit Sharing |
|---|--|-----------|-------------------------------|-----------------------------|---------------------------------------|
| a. Date requirements met | 1. <input type="checkbox"/> | OR | 2. <input type="checkbox"/> | 3. <input type="checkbox"/> | 4. <input type="checkbox"/> |
| b. First day of the month coinciding
with or next following date requirements met | 1. <input type="checkbox"/> | OR | 2. <input type="checkbox"/> | 3. <input type="checkbox"/> | 4. <input type="checkbox"/> |
| c. First day of the Plan Year quarter coinciding
with or next following date requirements met | 1. <input type="checkbox"/> | OR | 2. <input type="checkbox"/> | 3. <input type="checkbox"/> | 4. <input type="checkbox"/> |
| d. First day of Plan Year or first day
of 7th month of Plan Year coinciding
with or next following date requirements
met | 1. <input checked="" type="checkbox"/> | OR | 2. <input type="checkbox"/> | 3. <input type="checkbox"/> | 4. <input type="checkbox"/> |
| e. First day of Plan Year coinciding
with or next following date requirements met | 1. <input type="checkbox"/> | OR | 2. <input type="checkbox"/> | 3. <input type="checkbox"/> | 4. <input type="checkbox"/> |
| f. Other: _____,
provided that an Eligible Employee who has satisfied the maximum age (21) and service requirements (1 Year (or Period)
of Service (or more than 1 year if full and immediate vesting)) and who is otherwise entitled to participate, shall commence
participation no later than the earlier of (a) 6 months after such requirements are satisfied, or (b) the first day of the first Plan
Year after such requirements are satisfied, unless the Employee separates from service before such participation date. | 1. <input type="checkbox"/> | OR | 2. <input type="checkbox"/> | 3. <input type="checkbox"/> | 4. <input type="checkbox"/> |

SERVICE

17. RECOGNITION OF SERVICE WITH OTHER EMPLOYERS (Plan Sections 1.60 and 1.85)

- a. ☒ No service with other Employers shall be recognized. (If selected, skip to Question 18.)

OR, service with the designated employers and purposes is recognized as follows (if more than 3 employers, complete the appropriate Section in Appendix A to the Adoption Agreement (Special Effective Dates and Other Permitted Elections)):

	Eligibility	Vesting	Contribution Allocation
b. <input type="checkbox"/> Employer name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. <input type="checkbox"/> Employer name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. <input type="checkbox"/> Employer name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. <input type="checkbox"/> Limitations: _____ (e.g., credit service with X only on/following 1/1/07 or credit all service with entities the Employer acquires after 12/31/06).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: If the other Employer(s) maintained this qualified Plan, then Years (and/or Periods) of Service with such Employer(s) must be recognized pursuant to Plan Sections 1.60 and 1.85 regardless of any selections above.

18. SERVICE CREDITING METHOD (Plan Sections 1.60 and 1.85)

NOTE: If no selections are made in this Section, then the Hours of Service method will be used (with actual Hours of Service) and the provisions set forth in the definition of Year of Service in Plan Section 1.85 will apply.

- a. ☐ **Elapsed Time Method** (Period of Service applies instead of Year of Service) shall be used for the following purposes (select all that apply):

1. ☐ all purposes. (If selected, skip to Question 19.)
2. ☐ eligibility to participate.
3. ☐ vesting.
4. ☐ sharing in allocations or contributions.

- b. ☒ **Hours of Service Method** shall be used for the following purposes (select all that apply):

1. ☒ eligibility to participate in the Plan. The eligibility computation period after the initial eligibility computation period shall:
 - a. ☒ shift to the Plan Year.
 - b. ☐ be based on each anniversary of the date the Employee first completes an Hour of Service.
2. ☒ vesting. The vesting computation period shall be:
 - a. ☒ the Plan Year.
 - b. ☐ the date an Employee first performs an Hour of Service and each anniversary thereof.
3. ☒ sharing in allocations or contributions (the computation period shall be the Plan Year).

AND, the following Hour of Service alternatives will apply (select 4. or 5. AND 6. below):

4. ☒ **Actual Hours of Service.** Actual Hours of Service will be counted for all Employees.
5. ☐ **Equivalency Method.** Instead of using actual Hours of Service, Hours of Service will be determined using the method selected below. Such method will apply to:
 - a. ☐ all Employees.
 - b. ☐ Employees for whom records of actual Hours of Service are not maintained or available (e.g., salaried employees). Actual Hours of Service will be counted for all other Employees whose records of actual Hours of Service are maintained or available.

ON THE BASIS OF:

- c. ☐ days worked (10 hours per day).
- d. ☐ weeks worked (45 hours per week).
- e. ☐ semi-monthly payroll periods worked (95 hours per semi-monthly pay period).
- f. ☐ months worked (190 hours per month).
- g. ☐ bi-weekly payroll periods worked (90 hours per bi-weekly pay period).

6. ☒ **Number of Hours of Service Required.** Year of Service means the applicable computation period during which an Employee has completed at least 1,000 (not to exceed 1,000) Hours of Service.

VESTING

19. VESTING OF PARTICIPANT'S INTEREST (Plan Section 6.4(b))

- a. ☐ N/A. No Employer profit sharing or Employer matching contributions are subject to a vesting schedule. (Skip to Question 23.)
- b. ☒ The vesting provisions selected below apply.

Vesting for Employer Profit Sharing Contributions.

- c. ☐ N/A. No Employer profit sharing contributions are subject to a vesting schedule. (Skip to g.)
- d. ☐ 100% vesting. Participants are 100% vested in Employer profit sharing contributions upon entering the Plan. (Required if eligibility requirement is greater than 1 Year (or Period) of Service.)
- e. ☐ 100% for those Participants employed on _____ (enter date). For those Participants hired after such date, the vesting provisions selected below apply.
- f. ☒ The following vesting schedule, based on a Participant's Years of Service (or Periods of Service if the Elapsed Time method is selected), applies to Employer profit sharing contributions:
1. ☒ 6 Year Graded: 0-1 year-0%; 2 years-20%; 3 years-40%; 4 years-60%; 5 years-80%; 6 years-100%
 2. ☐ 4 Year Graded: 1 year-25%; 2 years-50%; 3 years-75%; 4 years-100%
 3. ☐ 5 Year Graded: 1 year-20%; 2 years-40%; 3 years-60%; 4 years-80%; 5 years-100%
 4. ☐ 3 Year Cliff: 0-2 years-0%; 3 years-100%
 5. ☐ 7 Year Graded: 0-2 years-0%; 3 years-20%; 4 years-40%; 5 years-60%; 6 years-80%; 7 years-100%
 6. ☐ 5 Year Cliff: 0-4 years-0%; 5 years-100%
 7. ☐ Other - Must be at least as liberal as either 5. or 6. above in each year without switching between the two schedules; or, if the following applies to any Employer matching contributions, as liberal as either 1. or 4. above in each year without switching between the two schedules:

Service	Percentage
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %

Vesting for Employer Matching Contributions.

- g. ☐ N/A. There are no Employer matching contributions subject to a vesting schedule.
- h. ☒ The schedule in d. through f. (except for f.5. or f.6.) above shall also apply to Employer matching contributions.
- i. ☐ 100% vesting. Participants are 100% vested in Employer matching contributions upon entering the Plan. (Required if eligibility requirement is greater than 1 Year (or Period) of Service.)
- j. ☐ 100% for those Participants employed on _____ (enter date). For those Participants hired after such date, the vesting provisions selected below apply.
- k. ☐ The following vesting schedule, based on a Participant's Years of Service (or Periods of Service if the Elapsed Time method is selected), applies to Employer matching contributions:
1. ☐ 6 Year Graded: 0-1 year-0%; 2 years-20%; 3 years-40%; 4 years-60%; 5 years-80%; 6 years-100%
 2. ☐ 4 Year Graded: 1 year-25%; 2 years-50%; 3 years-75%; 4 years-100%
 3. ☐ 5 Year Graded: 1 year-20%; 2 years-40%; 3 years-60%; 4 years-80%; 5 years-100%
 4. ☐ 3 Year Cliff: 0-2 years-0%; 3 years-100%
 5. ☐ Other - Must be at least as liberal as either 1. or 4. above in each year without switching between the two schedules:

Service	Percentage
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %

Non-Standardized 401(k) Profit Sharing Plan and Trust

20. TOP-HEAVY VESTING (Plan Section 6.4(d))
If this Plan becomes a Top-Heavy Plan, the following vesting schedule, based on a Participant's Years of Service (or Periods of Service if the Elapsed Time method is selected) shall be as follows:
- ☒ N/A (the regular vesting schedule already satisfies one of the minimum top-heavy schedules). (Skip to Question 21.)
 - ☐ 6 Year Graded: 0-1 year-0%; 2 years-20%; 3 years-40%; 4 years-60%; 5 years-80%; 6 years-100%
 - ☐ 3 Year Cliff: 0-2 years-0%; 3 years-100%
 - ☐ Other - Must be at least as liberal as either b. or c. above in each year without switching between the two schedules. (If a different top-heavy schedule applies to different contribution sources, attach an addendum specifying the schedule that applies to each source):

Service	Percentage
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %

21. EXCLUDED VESTING SERVICE
- ☒ No exclusions.
 - ☐ Service prior to the initial Effective Date of the Plan or a predecessor plan.
 - ☐ Service prior to the computation period in which an Employee attains age 18.
22. VESTING FOR DEATH AND TOTAL AND PERMANENT DISABILITY
Regardless of the vesting schedule, Participants shall become fully Vested upon (select a. or all that apply of b. and c.):
- ☐ N/A. Apply vesting schedule, or all contributions to the Plan are fully Vested.
 - ☒ Death.
 - ☒ Total and Permanent Disability.

RETIREMENT AGES

23. NORMAL RETIREMENT AGE ("NRA") (Plan Section 1.52) means the:
- ☒ date of a Participant's 65th birthday (not to exceed 65th).
 - ☐ later of a Participant's _____ birthday (not to exceed 65th) or the _____ (not to exceed 5th) anniversary of the first day of the Plan Year in which participation in the Plan commenced.
24. NORMAL RETIREMENT DATE (Plan Section 1.53) means the:
- ☐ Participant's NRA.
- OR (select one)
- ☒ first day of the month coinciding with or next following the Participant's NRA.
 - ☐ Anniversary Date coinciding with or next following the Participant's NRA.
25. EARLY RETIREMENT DATE (Plan Section 1.21)
- ☐ N/A. No Early Retirement provision provided. (If selected, skip to Question 26.)
 - ☒ Early Retirement Date means the date on which a Participant satisfies the Early Retirement requirements.

AND, the Early Retirement requirements are:

- ☒ Participant attains age 55.
AND, completes (leave blank if not applicable)
 - ☒ at least 6 Years (or Periods) of Service for vesting purposes.
 - ☐ at least _____ Years (or Periods) of Service for eligibility purposes.
- ☐ Other: _____. (Must be definitely determinable.)

AND, shall a Participant become fully Vested upon attainment of the Early Retirement Date?

- ☒ Yes.
- ☐ No.

COMPENSATION

26. COMPENSATION (Plan Section 1.14) with respect to any Participant means:
- ☒ Wages, tips and other compensation on Form W-2.
 - ☐ Section 3401(a) wages (wages for withholding purposes).
 - ☐ 415 safe harbor compensation.

Non-Standardized 401(k) Profit Sharing Plan and Trust

COMPENSATION shall be based on the following determination period:

- d. ☒ the Plan Year.
 e. ☐ the Fiscal Year coinciding with or ending within the Plan Year.
 f. ☐ the calendar year coinciding with or ending within the Plan Year.

NOTE: The Limitation Year for Code Section 415 purposes shall be the Plan Year unless an alternative period is specified:
 _____ (must be a consecutive twelve month period).

ADJUSTMENTS TO COMPENSATION. Compensation shall be adjusted by (select all that apply):

NOTE: Unless otherwise specified in this Section at item o. below, Elective Deferrals include Roth Elective Deferrals and after-tax voluntary Employee contributions, Matching includes QMACs, and Nonelective Profit Sharing includes QNECs. ADP safe harbor matching contributions are subject to the provisions for Employer matching contributions.

	All Contributions	Elective Deferrals	Matching	Nonelective Profit Sharing	ADP Safe Harbor Nonelective
g. No Adjustments	1. <input type="checkbox"/> OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
h. including Salary Deferrals (401(k), 125, 132(f), 403(b), SEP, 414(h) pickup, & 457)	1. <input checked="" type="checkbox"/> OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
i. excluding reimbursements or other expense allowances, fringe benefits (cash or non-cash), moving expenses, deferred compensation (other than deferrals specified in h. above) and welfare benefits.	1. <input type="checkbox"/> OR	2. <input checked="" type="checkbox"/>	3. <input checked="" type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
j. excluding Compensation paid during the determination period while not a Participant in the component of the Plan for which the definition applies.	1. <input type="checkbox"/> OR	2. <input checked="" type="checkbox"/>	3. <input checked="" type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
k. excluding Compensation paid during the determination period while not a Participant in <i>any</i> component of the Plan for which the definition applies.	1. <input type="checkbox"/> OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
l. excluding overtime	1. <input type="checkbox"/> OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
m. excluding bonuses	1. <input type="checkbox"/> OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
n. excluding commissions	1. <input type="checkbox"/> OR	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>
o. Other: _____ (e.g., exclude shift differential pay).					

NOTE: Options l., m., n., or o. may not be selected for Nonelective Profit Sharing contributions if an integrated allocation formula is selected (i.e., if 31.f. is selected).

NOTE: If l., m., n., or o. is selected, the definition of Compensation could violate the nondiscrimination rules.

NOTE: If the post-severance compensation provisions of the proposed Code Section 415 Regulations were used, complete Appendix A (Special Effective Dates and Other Permitted Elections).

CONTRIBUTIONS AND ALLOCATIONS

27. SALARY REDUCTION ARRANGEMENT - ELECTIVE DEFERRALS (Plan Section 12.2)

- A. **Deferral Limit.** Each Participant may elect to have Compensation deferred by:
- a. ☐ up to _____%.
 - b. ☐ from _____% to _____%.
 - c. ☒ up to the maximum amount allowed by law (i.e., Code Sections 402(g) and 415).

Non-Standardized 401(k) Profit Sharing Plan and Trust

B. Additional Deferral Limits. Regardless of the above limits, the following apply (select all that apply):

- d. ☒ No additional limits. (Skip to C. below.)
- e. ☐ A Participant may make a separate election to defer up to _____% of any bonus.
- f. ☐ For Participants who are Highly Compensated Employees determined as of the beginning of a Plan Year, then instead of 27.A. applying, the deferral limit is (must be equal to or lower than limit selected in 27.A.):
 - 1. ☐ _____% of Compensation.
 - 2. ☐ the percentage equal to the deferral limit in effect under Code Section 402(g)(3) for the calendar year that begins with or within the Plan Year divided by the annual compensation limit in effect for the Plan Year under Code Section 401(a)(17).
 - 3. ☐ other: _____ (e.g., must be a specific limit that only applies to some or all HCEs).

C. Catch-Up Contributions. May eligible Participants make Catch-Up Contributions?

- g. ☐ No. (Skip to D. below.)
- h. ☒ Yes.

AND, Catch-Up Contributions

- 1. ☒ will be taken into account in applying any matching contribution under the Plan.
- 2. ☐ will not be taken into account in applying any matching contribution under the Plan (may not be selected if this Plan provides for ADP safe harbor contributions).

Special Effective Date. Is there a special effective date for the Catch-Up Contribution provisions?

- 3. ☐ No.
- 4. ☒ Yes, the effective date of the Catch-Up Contribution provisions is January 1, 2002 (enter special effective date or, if this is an EGTRRA restatement, enter the date (not earlier than January 1, 2002) when Catch-Up Contributions were first permitted).

AND, if the amount of Elective Deferrals that may be made to the Plan is limited in A. and/or B. above, are Catch-Up Contributions aggregated with other Elective Deferrals in applying such limits?

- 5. ☒ No or N/A. There are no limits or Catch-Up Contributions may be made in addition to any imposed limits.
- 6. ☐ Yes. (If selected, the limits in A. and/or B. must not be less than 75% of Compensation.)

D. Roth Contributions. May Participants designate all or a portion of their Elective Deferrals as Roth Elective Deferrals?

- i. ☒ No. (Skip to E. below.)
- j. ☐ Yes.

Special Effective Date. Is there a special effective date for the Roth Elective Deferral provisions?

- 1. ☐ No.
- 2. ☐ Yes, the effective date of the Roth Elective Deferral provisions is _____ (enter special effective date or, if this is an EGTRRA restatement, enter the date (not earlier than January 1, 2006) when Roth Elective Deferrals were first permitted).

E. Special Effective Date for Salary Deferrals. Is there a special effective date for the salary deferral component of the Plan?

- k. ☒ No. (Skip to F. below.)
- l. ☐ Yes, the effective date of the salary deferral component of the Plan is _____ (enter month day, year; may not be earlier than the date on which the Employer first adopts the salary deferral component of the Plan).

F. Deferral Modifications.

- m. ☒ PARTICIPANTS MAY commence salary deferrals on the effective date of participation and on the first day of any payroll period (must be at least once each calendar year).

Participants may modify salary deferral elections:

- n. ☒ As of each payroll period
- o. ☐ On the first day of each month
- p. ☐ On the first day of each Plan Year quarter
- q. ☐ On the first day of the Plan Year or the first day of the 7th month of the Plan Year
- r. ☐ Other: _____ (must be at least once each calendar year)

G. Automatic Deferral Provisions. Shall Participants who do not affirmatively elect to receive cash or have a specified amount of Compensation contributed to the Plan automatically have Compensation deferred?

- s. ☒ No. (Skip to Question 28.)
- t. ☐ Yes, subject to the following provisions:

Special Effective date of the automatic deferral provisions:

- 1. ☐ N/A. New Plan or provisions were in effect prior to this restatement. (Skip to 3. below.)
- 2. ☐ The provisions are first effective as of:
 - a. ☐ the date of this restatement.
 - b. ☐ Other: _____

Application to new Participants. The automatic deferral provisions apply to:

Non-Standardized 401(k) Profit Sharing Plan and Trust

- c. ☐ Employees who become Participants on or after the effective date of the automatic deferral provisions.
- d. ☐ Participants who were hired on or after the effective date of the automatic deferral provisions.

Application to existing Participants. The automatic deferral provisions apply to those Participants in the Plan as of the effective date of the automatic deferral provisions in accordance with the following (select one):

- e. ☐ **Election of at least automatic deferral amount.** All Participants, except those who have a Salary Reduction Agreement in effect on the automatic deferral provisions effective date, provided the Elective Deferral amount under the Agreement is at least equal to the automatic deferral amount.
- f. ☐ **No existing Salary Reduction Agreement.** All Participants, except those who have a Salary Reduction Agreement in effect on the automatic deferral provisions effective date (regardless of the Elective Deferral amount under that Agreement).

Type of Elective Deferral. The automatic deferral shall be a Pre-Tax Elective Deferral unless selected below:

3. ☐ The automatic deferral shall be a Roth Elective Deferral (may only be selected if Roth Elective Deferrals are permitted at 27.D. above).

Initial automatic deferral amount. Each Participant who is subject to the automatic deferral provisions will have Compensation deferred by the following amount unless otherwise elected by the Participant:

4. ☐ _____% of Compensation for each payroll period.
5. ☐ \$_____ for each payroll period.

Escalation of deferral amount.

6. ☐ N/A (no escalation)
7. ☐ The initial automatic deferral amount shall increase as elected below:
- a. ☐ _____% of Compensation per year up to a maximum of _____% of Compensation.
- b. ☐ \$_____ per year up to a maximum of \$_____.
- c. ☐ in accordance with the following schedule:

<u>Plan Year of application to a Participant</u>	<u>Automatic Deferral Amount</u>
1 - 2	3%
3	4%
4	5%
5 and thereafter	6%

- d. ☐ Other: _____

Timing of escalation. The escalation provision above shall apply as of:

- e. ☐ N/A (7.c. selected or entry at 7.d. includes timing provision).
- f. ☐ Each anniversary of the Participant's date of hire.
- g. ☐ Each anniversary of the Participant's Entry Date.
- h. ☐ The first day of each Plan Year.
- i. ☐ The first day of each calendar year.
- j. ☐ Other: _____

28. **SIMPLE 401(k) PLAN ELECTION (Plan Section 13.1)**

Shall the SIMPLE 401(k) provisions of Article XIII apply?

- a. ☒ No.
- b. ☐ Yes, the SIMPLE 401(k) provisions will apply. The Plan Year must be the calendar year and the Employer must be an "eligible employer" as defined in Plan Section 13.1(b)(1). (If selected, then skip to Question 34.)

29. **401(k) SAFE HARBOR PROVISIONS (Plan Section 12.8)**

Will the ADP and/or ACP test safe harbor provisions be used? (select a., b., or c.)

NOTE: If the Employer wants the discretion to determine whether the provisions will apply on a year-by-year basis, then the Employer may either select 29.a. (No) OR 29.b. or 29.c. and option 29.e.2.

- a. ☒ No. (If selected, skip to Question 30.)
- b. ☐ Yes, but only the ADP (and NOT the ACP) test safe harbor provisions will be used.
- c. ☐ Yes, both the ADP and ACP test safe harbor provisions will be used.

Non-Standardized 401(k) Profit Sharing Plan and Trust

IF c. is selected, does the Plan permit Employer matching contributions in addition to any safe harbor contributions selected in d. or e. below?

1. ☐ No or N/A. Any Employer matching contributions, other than any safe harbor matching contributions selected in d. below, will be suspended in any Plan Year in which the safe harbor provisions are used.
2. ☐ Yes, the Employer may make Employer matching contributions in addition to any ADP test safe harbor matching contributions selected in d. below. (If selected, complete the provisions of the Adoption Agreement relating to Employer matching contributions (i.e., Question 30.) that will apply in addition to any selections made in d. below. Also, no allocation conditions may be imposed at 30.E.)

THE EMPLOYER WILL MAKE THE FOLLOWING ADP TEST SAFE HARBOR CONTRIBUTION FOR THE PLAN YEAR: (Select either d. or e. below.)

NOTE: The ACP test safe harbor is automatically satisfied if the only matching contribution made to the Plan is either (1) a Basic Matching Contribution or (2) an Enhanced Matching Contribution that does not provide a match on Elective Deferrals in excess of 6% of Compensation.

d. ☐ **Safe Harbor Matching Contributions** (select 1. or 2. AND one from 3. - 6.)

1. ☐ **Basic Matching Contribution.** The Employer will make matching contributions to the Account of each "eligible Participant" in an amount equal to the sum of 100% of the amount of the Participant's Elective Deferrals that do not exceed 3% of the Participant's Compensation, plus 50% of the amount of the Participant's Elective Deferrals that exceed 3% of the Participant's Compensation but do not exceed 5% of the Participant's Compensation.
2. ☐ **Enhanced Matching Contribution.** The Employer will make matching contributions to the Account of each "eligible Participant" in an amount equal to the sum of:
 - a. ☐ _____% (may not be less than 100%) of the Participant's Elective Deferrals that do not exceed _____% (if over 6% or if left blank, the ACP test will still apply) of the Participant's Compensation, plus
 - b. ☐ _____% of the Participant's Elective Deferrals that exceed _____% of the Participant's Compensation but do not exceed _____% (if over 6% or if left blank, the ACP test will still apply) of the Participant's Compensation.

NOTE: a. and b. must be completed so that, at any rate of Elective Deferrals, the matching contribution is at least equal to what the matching contribution would be if the Employer were making Basic Matching Contributions (as defined in 29.d.1. above), but the rate of match cannot increase as deferrals increase. For example, if a. is completed to provide a match equal to 100% of deferrals up to 4% of Compensation, then b. need not be completed.

AND, the safe harbor matching contribution will be determined on the following basis (and Compensation for such purpose will be based on the applicable period):

3. ☐ the entire Plan Year.
4. ☐ each payroll period.
5. ☐ all payroll periods ending with or within each month.
6. ☐ all payroll periods ending with or within each Plan Year quarter.

e. ☐ **Safe Harbor Nonelective Contributions** (select 1., 2. or 3.)

1. ☐ **Fixed.** The Employer will make a Safe Harbor Nonelective Contribution to the Account of each "eligible Participant" in an amount equal to _____% (may not be less than 3%) of the Employee's Compensation for the Plan Year.
2. ☐ **Discretionary ("maybe").** The Employer may elect to make a Safe Harbor Nonelective Contribution after a Plan Year has commenced in accordance with the provisions of Plan Section 12.8(h). If this option e.2. is selected, the Safe Harbor Nonelective Contribution will be required only for a Plan Year for which the Plan is amended to provide for such contribution and the appropriate supplemental notice is provided to Participants.
3. ☐ **Other Plan.** The Employer will make a Safe Harbor Nonelective Contribution to another defined contribution plan maintained by the Employer (specify the name of the other plan): _____.

Non-Standardized 401(k) Profit Sharing Plan and Trust

FOR PURPOSES OF THE ADP test safe harbor contribution, the term "eligible Participant" means any Participant who is eligible to make Elective Deferrals with the following exclusions:

- f. ☐ N/A. No exclusions.
- g. ☐ Exclusions (select all that apply, if any):
 - 1. ☐ Highly Compensated Employees.
 - 2. ☐ Employees who have not satisfied the greatest minimum age and service conditions permitted under Code Section 410(a) (i.e., age 21 and 1 Year of Service with 1,000 Hours of Service), with the following deemed effective date of participation:
 - a. ☐ The same effective date of participation that applies to Elective Deferrals in Question 16.
 - b. ☐ Other: _____ (no later than the earlier of (a) 6 months after such requirements are satisfied, or (b) the first day of the first Plan Year after such requirements are satisfied).
 - 3. ☐ Other: _____ (must be a Highly Compensated Employee or an Employee who can be excluded under the permissive or mandatory disaggregation rules of Regulations Sections 1.401(k)-1(b)(4) and 1.401(m)-1(b)(4)).

SPECIAL EFFECTIVE DATE OF THE ADP AND ACP TEST SAFE HARBOR PROVISIONS

Is there a special effective date for the ADP and/or ACP test safe harbor provisions?

- h. ☐ No.
- i. ☐ Yes, the ADP and/or ACP test safe harbor provisions are effective for Plan Years beginning on or after: _____ (enter the first day of the Plan Year for which the provisions are effective and, if necessary, enter any other special effective dates that apply with respect to the provisions).

30. EMPLOYER MATCHING CONTRIBUTIONS (Plan Section 12.1(a)(2))

NOTE: Regardless of any selection below, if the ACP test safe harbor is being used (i.e., Question 29.c. is selected), then the Plan automatically provides that only Elective Deferrals up to 6% of Compensation are taken into account in applying the match set forth below and that the maximum discretionary matching contribution that may be made on behalf of any Participant is 4% of Compensation.

A. Matching Formula.

- a. ☐ N/A. There will not be any Employer matching contributions. (Skip to Question 31.)
- b. ☒ The Employer ... (select 1. or 2.)
 - 1. ☒ may make matching contributions equal to a discretionary percentage, to be determined by the Employer, of the Participant's Elective Deferrals.
 - 2. ☐ will make matching contributions equal to _____% (e.g., 50) of the Participant's Elective Deferrals, plus:
 - a. ☐ N/A.
 - b. ☐ an additional matching contribution of a discretionary percentage, to be determined by the Employer, but not to exceed _____% (leave blank if not applicable) of Compensation.

AND, in determining the Employer matching contribution above, only Elective Deferrals up to the percentage or dollar amount specified below will be matched: (select 3. and/or 4. OR 5.)

- 3. ☐ _____% of a Participant's Compensation.
- 4. ☐ \$_____.
- 5. ☒ a discretionary percentage of a Participant's Compensation or a discretionary dollar amount, the percentage or dollar amount to be determined by the Employer on a uniform basis for all Participants.
- c. ☐ The Employer may make matching contributions equal to a discretionary percentage, to be determined by the Employer, of each tier, to be determined by the Employer, of the Participant's Elective Deferrals.
- d. ☐ The Employer will make matching contributions equal to a uniform percentage of each tier of each Participant's Elective Deferrals, determined as follows:

NOTE: Fill in only percentages or dollar amounts, but not both. If percentages are used, each tier represents the amount of the Participant's applicable contributions that equals the specified percentage of the Participant's Compensation (add additional tiers if necessary).

Tiers of Contributions (indicate \$ or %)	Matching Percentage
First _____	_____ %
Next _____	_____ %
Next _____	_____ %
Next _____	_____ %

Non-Standardized 401(k) Profit Sharing Plan and Trust

- e. ☐ The Employer will make matching contributions equal to a uniform percentage of each Participant's Elective Deferrals based on the Participant's Years of Service (or Periods of Service if the Elapsed Time method is selected), determined as follows (add additional tiers if necessary):

Service	Matching Percentage
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %

For purposes of the above Employer matching contribution formula, a Year (or Period) of Service means a Year (or Period) of Service for:

1. ☐ vesting purposes.
2. ☐ eligibility purposes.

NOTE: If c., d., or e. above is selected, the Plan may violate the Code Section 401(a)(4) nondiscrimination requirements if the rate of Employer matching contributions increases as a Participant's Elective Deferrals or Years (or Periods) of Service increase.

- B. **Matching Limit.** The Employer matching contribution made on behalf of any Participant for any Plan Year will not exceed:

f. ☐ N/A. No limit on the amount of matching contribution.

g. ☐ \$_____.

h. ☒ 4% of Compensation.

- C. **Period of Determination.** The Employer matching contribution formula will be applied on the following basis (and any Compensation or dollar limitation used in determining the match will be based on the applicable period):

i. ☐ the entire Plan Year.

j. ☒ each payroll period.

k. ☐ all payroll periods ending within each month.

l. ☐ all payroll periods ending with or within each Plan Year quarter.

m. ☐ Other: _____

- D. **QMACs.** Shall the Employer matching contributions be Qualified Matching Contributions?

n. ☐ Yes, ALL Employer matching contributions will be fully Vested, subject to restrictions on withdrawals as set forth in the Plan and may be used in either the ADP or ACP test.

o. ☒ No.

- E. **Allocation Conditions.** Select p. OR all that apply of q., r., s. and t. **Note:** If the ACP test safe harbor provision is used (Question 29.c.), no conditions (i.e. option p. below) must be selected.

p. ☒ **No conditions.** All Participants share in the allocations regardless of service completed during the Plan Year or employment status at the end of the Plan Year. (If selected, skip to Question 31.)

q. ☐ **Conditions for Participants employed at the end of the Plan Year.**

1. ☐ No service requirement.

2. ☐ A Participant must complete a Year of Service (or Period of Service if the Elapsed Time method is selected).

3. ☐ A Participant must complete at least _____ (may not exceed 1,000) Hours of Service during the Plan Year.

NOTE: Options 2. and 3. above could cause the Plan to violate coverage requirements under Code Section 410(b).

r. ☐ **Conditions for Participants NOT employed at the end of the Plan Year.**

1. ☐ A Participant must complete at least _____ (may not exceed 1,000) Hours of Service (or _____ (not to exceed 6) months of service if the Elapsed Time method is selected).

2. ☐ A Participant must complete a Year of Service (or Period of Service if the Elapsed Time method is selected).

3. ☐ Participants will NOT share in the allocations, regardless of service.

4. ☐ Participants will share in the allocations, regardless of service.

5. ☐ Other: _____ (must be definitely determinable, not subject to Employer discretion and may not require more than 1 Year of Service (or Period of Service if the Elapsed Time method is selected)).

NOTE: Options 1., 2., 3. and 5. above could cause the Plan to violate coverage requirements under Code Section 410(b).

Non-Standardized 401(k) Profit Sharing Plan and Trust

- s. ☐ **AND, Waiver of conditions for Participants NOT employed at the end of the Plan Year.** Participants who are not employed at the end of the Plan Year due to the following shall be eligible to share in the allocations regardless of the above conditions (select all that apply):
1. ☐ Death.
 2. ☐ Total and Permanent Disability.
 3. ☐ Early or Normal Retirement.
- t. ☒ **Code Section 410(b) fail-safe.** If q.2. or 3. and/or r.1., 2., 3. or 5. is selected, shall the Code Section 410(b) ratio percentage fail-safe provisions apply (Plan Section 12.3(f))?
1. ☒ No or N/A.
 2. ☐ Yes, the Plan must satisfy the ratio percentage test of Code Section 410(b).

31. **FORMULA FOR DETERMINING EMPLOYER PROFIT SHARING CONTRIBUTION** (Plan Section 12.1(a)(3)) (d. may be selected in addition to b. or c.)
- a. ☐ N/A. No Employer Profit Sharing Contributions may be made (other than top-heavy minimum contributions). (Skip to Question 33.)
 - b. ☒ Discretionary contribution, to be determined by the Employer.
 - c. ☐ Fixed contribution equal to _____% of Compensation of Participants eligible to share in allocations.
 - d. ☐ Prevailing Wage Contribution. The Employer will make a Prevailing Wage Contribution on behalf of each Participant who performs services subject to the Service Contract Act, Davis-Bacon Act or similar Federal, State, or Municipal Prevailing Wage statutes. The Prevailing Wage Contribution shall be an amount equal to the balance of the fringe benefit payment for health and welfare for each Participant (after deducting the cost of cash differential payments for the Participant) based on the hourly contribution rate for the Participant's employment classification, as designated on Schedule A as attached to this Adoption Agreement. The Prevailing Wage Contribution shall not be subject to any age or service requirements set forth in Question 15. nor to any service or employment conditions set forth in Question 32. and will be 100% Vested.

AND, is the Prevailing Wage Contribution considered a Qualified Nonelective Contribution?

1. ☐ Yes.
2. ☐ No.

AND, shall the Prevailing Wage Contribution made on behalf of a Participant for a Plan Year reduce (offset) other Employer contributions allocated or contributed on behalf of such Participant for the Plan Year?

3. ☐ No, the Prevailing Wage Contribution will be in addition to other Employer contributions, if any.
4. ☐ Yes, in accordance with the following: (1) if the Prevailing Wage Contribution is a Qualified Nonelective Contribution as selected above, then it will offset any ADP test safe harbor contribution, and (2) if the Prevailing Wage Contribution is not a Qualified Nonelective Contribution as selected above, then it will offset any other Employer contributions under the Plan (other than any ADP test safe harbor contributions).

AND, shall Highly Compensated Employees be excluded from receiving a Prevailing Wage Contribution?

5. ☐ Yes.
6. ☐ No.

CONTRIBUTION ALLOCATIONS

If b. or c. above is selected, the Employer profit sharing contribution for a Plan Year will be allocated as follows:

- e. ☒ **NON-INTEGRATED ALLOCATION**
1. ☒ In the same ratio as each Participant's Compensation bears to the total of such Compensation of all Participants.
 2. ☐ In the same dollar amount to all Participants (per capita).
 3. ☐ In the same dollar amount per Hour of Service completed by each Participant in the following manner:

NOTE: If section e.3. is chosen above, such allocation must be non-discriminatory under Code Section 401(a)(4) and must be limited to no more than 2,080 Hours of Service per Plan Year.

f. ☐ **INTEGRATED (PERMITTED DISPARITY) ALLOCATION**

In accordance with Plan Section 4.3(b)(2) based on a Participant's Compensation in excess of:

1. ☐ The Taxable Wage Base.
2. ☐ _____% (not to exceed 100%) of the Taxable Wage Base. (See Note below.)
3. ☐ 80% of the Taxable Wage Base plus \$1.00.
4. ☐ \$_____ (not greater than the Taxable Wage Base). (See Note below.)

Non-Standardized 401(k) Profit Sharing Plan and Trust

NOTE: The integration percentage of 5.7% shall be reduced to:

1. 4.3% if 2. or 4. above is more than 20% and less than or equal to 80% of the Taxable Wage Base.
2. 5.4% if 3. is selected or if 2. or 4. above is more than 80% of the Taxable Wage Base.

g. ☐ **NON-SAFE HARBOR ALLOCATION METHODS**

1. ☐ **Grouping Method.** Pursuant to Plan Section 4.3(b)(3)(vi), the classifications are (select a. or b.):

- a. ☐ Each Participant constitutes a separate classification.
- b. ☐ Participants will be divided into the following classifications with the same allocation ratio (the classifications should be such that resulting allocations are provided in a definite predetermined formula that complies with Regulations Section 1.401-1(b)(1)(ii)):

Classification A shall consist of: _____.

Classification B shall consist of: _____.

Classification C shall consist of: _____.

Classification D shall consist of: _____.

Additional Classifications: _____ (specify the classifications).

NOTE: If a. or b. is selected, then the number of allocation rates must not exceed the maximum allowable number of allocation rates permitted under Plan Section 4.3(b)(3)(vi). HCEs may each be in separate allocation groups. The grouping of eligible NHCEs must be done in a reasonable manner and should reflect a reasonable classification in accordance with Regulations Section 1.410(b)-4(b). In the case of Self-Employed Individuals (i.e., sole proprietors or partners), the allocation method should not be such that a cash or deferred election is created for a Self-Employed Individual as a result of application of the allocation method.

2. ☐ **Age-Weighted Method.** The Schedule of Age-Weighted Allocation Factors is set forth in attached Exhibit A (which is hereby incorporated by reference and made a part of the Plan) and shall be based on the following interest rate (if no selection is made, c. shall be deemed to have been selected):

- a. ☐ 7.5% interest
- b. ☐ 8.0% interest
- c. ☐ 8.5% interest

32. **REQUIREMENTS TO SHARE IN ALLOCATIONS OF EMPLOYER PROFIT SHARING CONTRIBUTION AND FORFEITURES** (Select a. OR all that apply of b., c., d. and e.)

a. ☒ **No conditions.** All Participants share in the allocations regardless of service completed during the Plan Year or employment status at the end of the Plan Year. (If selected, skip to Question 33.)

b. ☐ **Conditions for Participants employed at the end of the Plan Year.**

1. ☐ No service requirement.
 2. ☐ A Participant must complete a Year of Service (or Period of Service if the Elapsed Time method is selected).
 3. ☐ A Participant must complete at least _____ (may not exceed 1,000) Hours of Service during the Plan Year.
- NOTE:** Options 2. and 3. above could cause the Plan to violate coverage requirements under Code Section 410(b).

c. ☐ **Conditions for Participants NOT employed at the end of the Plan Year.**

1. ☐ A Participant must complete at least _____ (may not exceed 1,000) Hours of Service (or _____ (not to exceed 6) months of service if the Elapsed Time method is selected).
2. ☐ A Participant must complete a Year of Service (or Period of Service if the Elapsed Time method is selected).
3. ☐ Participants will NOT share in the allocations, regardless of service.
4. ☐ Participants will share in the allocations, regardless of service.
5. ☐ Other: _____ (must be definitely determinable, not subject to Employer discretion and may not require more than one Year of Service (or Period of Service if the Elapsed Time method is selected)).

NOTE: Options 1., 2., 3. and 5. above could cause the Plan to violate coverage requirements under Code Section 410(b).

d. ☐ **AND, Waiver of conditions for Participants NOT employed at the end of the Plan Year.** Participants who are not employed at the end of the Plan Year due to the following shall be eligible to share in the allocations regardless of the above conditions (select all that apply):

1. ☐ Death.
2. ☐ Total and Permanent Disability.
3. ☐ Early or Normal Retirement.

- e. ☒ **Code Section 410(b) fail-safe.** If b.2. or 3. and/or c.1., 2., 3. or 5. is selected, shall the Code Section 410(b) ratio percentage fail-safe provisions apply (Plan Section 4.3(m))?
1. ☒ No or N/A.
 2. ☐ Yes, the Plan must satisfy the ratio percentage test of Code Section 410(b).
33. **FORFEITURES** (Plan Sections 1.34 and 4.3(e))
- A. **Timing of Forfeiture.** Except as provided in Plan Section 1.34, a Forfeiture will occur (if no selection is made, b. will apply):
- a. ☐ N/A. (This may only be selected if all contributions are fully Vested; skip to Question 34.)
 - b. ☒ As of the earlier of (1) the last day of the Plan Year in which the Former Participant incurs five (5) consecutive 1-Year Breaks in Service, or (2) the distribution of the entire Vested portion of the Participant's Account.
 - c. ☐ As of the last day of the Plan Year in which the Former Participant incurs five (5) consecutive 1-Year Breaks in Service.
- B. **Plan Expenses.** May Forfeitures first be used to pay any administrative expenses?
- d. ☒ Yes.
 - e. ☐ No.
- C. **Use of Forfeitures.**
Forfeitures attributable to amounts other than Employer matching contributions will be:
- f. ☐ added to any Employer discretionary contribution (e.g., matching or profit sharing) and allocated in the same manner.
 - g. ☒ used to reduce any Employer contribution (e.g., matching, profit sharing or ADP test safe harbor contribution).
 - h. ☐ added to any Employer discretionary matching contribution and allocated as an additional matching contribution.
 - i. ☐ allocated to all Participants eligible to share in the allocations of profit sharing contributions or Forfeitures in the same proportion that each Participant's Compensation for the Plan Year bears to the Compensation of all Participants for such year.
 - j. ☐ other: _____ (describe the treatment of Forfeitures in a manner that is definitely determinable and not subject to Employer discretion; e.g., Forfeitures attributable to transferred balances from Plan X are allocated as additional discretionary contributions only to former Plan X Participants).
- Forfeitures attributable to Employer matching contributions will be:
- k. ☒ N/A. Same as above or no Employer matching contributions.
 - l. ☐ used to reduce any Employer contribution (e.g., matching, profit sharing or ADP test safe harbor contribution).
 - m. ☐ added to any Employer discretionary matching contribution and allocated as an additional matching contribution.
 - n. ☐ added to any Employer discretionary profit sharing contribution.
 - o. ☐ other: _____ (describe the treatment of Forfeitures in a manner that is definitely determinable and not subject to Employer discretion; e.g., Forfeitures attributable to transferred balances from Plan X are allocated as additional discretionary contributions only to former Plan X Participants).
34. **ALLOCATION OF EARNINGS** (Plan Section 4.3(c))
Allocation of earnings with respect to amounts which are not subject to Participant investment direction and which are contributed to the Plan after the previous Valuation Date will be determined:
- a. ☒ N/A. All assets in the Plan are subject to Participant investment direction.
 - b. ☐ by using a weighted average based on the amount of time that has passed between the date a contribution or distribution is made and the prior Valuation Date.
 - c. ☐ by treating one-half of all such contributions as being a part of the Participant's nonsegregated Account balance as of the previous Valuation Date.
 - d. ☐ by using the method specified in Plan Section 4.3(c) (balance forward method).
 - e. ☐ other: _____ (must be a definite predetermined formula that is not based on Compensation, that satisfies the nondiscrimination requirements of Regulations Section 1.401(a)(4)-4, and that is applied uniformly to all Participants).
35. **TOP-HEAVY MINIMUM ALLOCATION**
The minimum allocation requirements for any Top-Heavy Plan Year shall be applied (select one):
- a. ☒ Only to Non-Key Employee Participants.
 - b. ☐ To both Non-Key and Key Employee Participants.

DISTRIBUTIONS

36. FORM OF DISTRIBUTIONS (Plan Sections 6.5 and 6.6)

Distributions under the Plan may be made in (select all that apply):

- a. ☒ Lump-sums.
- b. ☒ Substantially equal installments.
- c. ☐ Partial withdrawals, provided the minimum withdrawal is \$_____ (leave blank if no minimum).
- d. ☒ Partial withdrawals or installments are only permitted for required minimum distributions under Code Section 401(a)(9).
- e. ☐ Other: _____ (must be definitely determinable and not subject to Employer discretion).

AND, pursuant to Plan Section 6.13, the Qualified Joint and Survivor Annuity and Qualified Pre-Retirement Survivor Annuity provisions:

- f. ☒ **Do not apply.** No annuities are allowed (Plan Section 6.13(b) will apply and the joint and survivor rules of Code Sections 401(a)(11) and 417 will not apply to the Plan). (Skip to m. and n.)
- g. ☐ **Apply.** Annuities are the normal form of distribution. Plan Section 6.13 will not apply and the joint and survivor rules of Code Sections 401(a)(11) and 417 will automatically apply. The Pre-Retirement Survivor Annuity (minimum spouse's death benefit) will be equal to:
 - 1. ☐ 100% of a Participant's interest in the Plan.
 - 2. ☐ 50% of a Participant's interest in the Plan.
 - 3. ☐ _____% (may not be less than 50%) of Participant's interest in the Plan.
- h. ☐ **Apply if annuity is selected by Participant.** Annuities are allowed but are not the normal form of distribution. Plan Section 6.13(c) will apply and the joint and survivor rules of Code Sections 401(a)(11) and 417 will apply only if an annuity form of distribution is selected by a Participant.

AND, if g. or h. is selected, the normal form of the Qualified Joint and Survivor Annuity will be a joint and 50% survivor annuity unless otherwise selected below:

- i. ☐ N/A.
- j. ☐ Joint and 100% survivor annuity.
- k. ☐ Joint and 75% survivor annuity.
- l. ☐ Joint and 66 2/3% survivor annuity.

NOTE: If only a portion of the Plan assets may be distributed in an annuity form of payment, then select both f. AND g. and specify the assets that are subject to the joint and survivor annuity provisions: _____ (e.g., the money purchase pension plan that was merged into this Plan).

AND, distributions may be made in:

- m. ☒ Cash only (except for annuity contracts or (as permitted by the Plan's loan procedures) Participant loans).
- n. ☐ Cash or property, except that the following limitation(s) apply: _____ (leave blank if there are no limitations on property distributions).

37. CONDITIONS FOR DISTRIBUTIONS UPON TERMINATION OF EMPLOYMENT. Distributions upon termination of employment pursuant to Plan Section 6.4(a) will not be made unless the following conditions have been satisfied:

A. Accounts in excess of \$5,000.

- a. ☒ Distributions may be made as soon as administratively feasible following termination of employment.
- b. ☐ Distributions may be made as soon as administratively feasible after the Participant has incurred _____ 1-Year Break(s) in Service (or Period(s) of Severance if the Elapsed Time method is selected).
- c. ☐ Distributions may be made as soon as administratively feasible after the last day of the Plan Year coincident with or next following termination of employment.
- d. ☐ Distributions may be made as soon as administratively feasible after the last day of the Plan Year quarter coincident with or next following termination of employment.
- e. ☐ Distributions may be made as soon as administratively feasible after the Valuation Date coincident with or next following termination of employment.
- f. ☐ Distributions may be made as soon as administratively feasible after _____ months have elapsed following termination of employment.
- g. ☐ No distributions may be made until a Participant has reached Early or Normal Retirement Date.
- h. ☐ Other: _____ (must be objective conditions which are ascertainable and are not subject to Employer discretion except as otherwise permitted in Regulations Section 1.411(d)-4 and may not exceed the limits of Code Section 401(a)(14) as set forth in Plan Section 6.7).

B. Accounts of \$5,000 or less.

- i. ☒ Same as above.
- j. ☐ Distributions may be made as soon as administratively feasible following termination of employment.
- k. ☐ Distributions may be made as soon as administratively feasible after the Participant has incurred _____ 1-Year Break(s) in Service (or Period(s) of Severance if the Elapsed Time method is selected).

Non-Standardized 401(k) Profit Sharing Plan and Trust

- l. ☐ Distributions may be made as soon as administratively feasible after the last day of the Plan Year coincident with or next following termination of employment.
- m. ☐ Other: _____ (must be objective conditions which are ascertainable and are not subject to Employer discretion except as otherwise permitted in Regulations Section 1.411(d)-4 and may not exceed the limits of Code Section 401(a)(14) as set forth in Plan Section 6.7).

- C. **Participant consent (i.e., involuntary cash-outs).** Should vested Account balances less than a certain dollar threshold be automatically distributed without Participant consent (mandatory distributions)?

NOTE: The Plan provides that distributions of amounts of \$5,000 or less do not require spousal consent and are only paid as lump-sums.

NOTE: If this is an EGTRRA restatement and there are special effective dates for the Participant consent provisions, complete n. or o. based on the current Plan provisions and complete q. or r. below.

- n. ☐ No, Participant consent is required for all distributions.
- o. ☒ Yes, Participant consent is required only if the distribution is over:
1. ☒ \$5,000
 2. ☐ \$1,000
 3. ☐ \$_____ (less than \$1,000)

NOTE: If 2. or 3. is selected, rollovers will be included in determining the threshold for Participant consent.

AND, if this is an EGTRRA restatement, the following apply:

- p. ☒ N/A. Not an EGTRRA restatement.
- q. ☐ Provisions above at n. or o. apply to distributions made on or after March 28, 2005.
- r. ☐ Provisions above at n. or o. are effective for distributions made on or after _____ (enter a date later than March 28, 2005). The following applies to distributions prior to such date but after March 28, 2005:
1. ☐ No mandatory distributions.
 2. ☐ Participant consent is required only if the distribution is over:
 - a. ☐ \$5,000
 - b. ☐ \$1,000
 - c. ☐ \$_____ (less than \$1,000)

- D. **Exclusion of rollovers in determination of \$5,000 threshold.** In determining the \$5,000 threshold (or other dollar threshold in C. above) for the timing of distributions, form of distributions, or consent rules, effective for distributions made after December 31, 2001, rollover contributions will be:

- s. ☒ included.
- t. ☐ excluded.

38. DISTRIBUTIONS UPON DEATH (Plan Section 6.8(b)(2))

Distributions upon the death of a Participant prior to receiving any benefits shall:

- a. ☒ be made pursuant to the election of the Participant or Beneficiary.
- b. ☐ begin within 1 year of death for a designated Beneficiary and be payable over the life (or over a period not exceeding the life expectancy) of such Beneficiary, except that if the Beneficiary is the Participant's spouse, begin prior to December 31st of the year in which the Participant would have attained age 70 1/2.
- c. ☐ be made within 5 (or if lesser _____) years of death for all Beneficiaries.
- d. ☐ be made within 5 (or if lesser _____) years of death for all Beneficiaries, except that if the Beneficiary is the Participant's spouse, begin prior to December 31st of the year in which the Participant would have attained age 70 1/2 and be payable over the life (or over a period not exceeding the life expectancy) of such surviving spouse.

39. HARDSHIP DISTRIBUTIONS (Plan Sections 6.12 and/or 12.9)

- a. ☐ Hardship distributions are NOT permitted. (Skip to Question 40.)
- b. ☒ Hardship distributions are permitted from the following Participant Accounts:
1. ☐ All Accounts.
 2. ☒ Only from the following Accounts (select all that apply):
 - a. ☒ Pre-Tax Elective Deferral Account.
 - b. ☐ Roth Elective Deferral Account.
 - c. ☐ Account attributable to Employer matching contributions.
 - d. ☐ Account attributable to Employer profit sharing contributions.
 - e. ☒ Rollover Account.
 - f. ☐ Transfer Account.

NOTE: Distributions from a Participant's Elective Deferral Account are limited to the portion of such Account attributable to such Participant's Elective Deferrals (and earnings attributable thereto up to December 31, 1988).

Non-Standardized 401(k) Profit Sharing Plan and Trust

NOTE: Hardship distributions are NOT permitted from a Participant's Qualified Nonelective Contribution Account or Qualified Matching Contribution Account (including any 401(k) Safe Harbor Contributions.)

AND, shall the safe harbor hardship rules of Plan Section 12.9 apply to hardship distributions made from all Accounts? (**NOTE:** The safe harbor hardship rules automatically apply to hardship distributions of Elective Deferrals.)

3. ☐ No or N/A. The provisions of Plan Section 6.12 apply to hardship distributions from all Accounts other than a Participant's Elective Deferral Account.
4. ☒ Yes. The provisions of Plan Section 12.9 apply to all hardship distributions.

AND, the following limitations apply to hardship distributions:

5. ☐ N/A. No additional limitations.
6. ☒ Additional limitations (select all that apply):
- a. ☐ The minimum amount of a distribution is \$_____ (may not exceed \$1,000).
 - b. ☐ Distributions may only be made from Accounts which are fully Vested.
 - c. ☒ A Participant does not include a former Employee at the time of the hardship distribution.

40. IN-SERVICE DISTRIBUTIONS (Plan Section 6.11)

- a. ☐ In-service distributions are NOT permitted (except as otherwise selected for Hardship Distributions; skip to Question 41.)
- b. ☒ In-service distributions may be made to a Participant who has not separated from service provided any of the following conditions have been satisfied (select all that apply):
- 1. ☒ the Participant has attained age 59 1/2.
 - 2. ☐ the Participant has reached Normal Retirement Age.
 - 3. ☐ the Participant has been a Participant in the Plan for at least _____ years (may not be less than five (5)).
 - 4. ☐ the amounts being distributed have accumulated in the Plan for at least 2 years.

NOTE: Distributions from a Participant's Elective Deferral Account, Qualified Matching Contribution Account and Qualified Nonelective Contribution Account (including 401(k) safe harbor contributions) are subject to restrictions and generally may not be distributed prior to age 59 1/2.

AND, in-service distributions are permitted from the following Participant Accounts:

5. ☐ All Accounts.
6. ☒ Only from the following Accounts (select all that apply):
- a. ☒ Pre-Tax Elective Deferral Account.
 - b. ☐ Roth Elective Deferral Account.
 - c. ☒ Account(s) attributable to Employer matching contributions (includes safe harbor match).
 - d. ☒ Account attributable to Employer profit sharing contributions.
 - e. ☒ Qualified Nonelective Contribution Account (includes safe harbor nonelective).
 - f. ☒ Rollover Account.
 - g. ☒ Transfer Account.

AND, the following limitations apply to in-service distributions:

7. ☒ N/A. No additional limitations.
8. ☐ Additional limitations (select all that apply):
- a. ☐ The minimum amount of a distribution is \$_____ (may not exceed \$1,000).
 - b. ☐ Distributions may only be made from Accounts which are fully Vested.
 - c. ☐ Distributions from the Roth Elective Deferral Account (i.e. 40.b.5. or b.6.b. selected), may only be made if the distribution is a "qualified distribution."

NONDISCRIMINATION TESTING

41. HIGHLY COMPENSATED EMPLOYEE (Plan Section 1.38)

The top-paid group election and the calendar year data election are not used unless selected below (the selections made for the latest year will continue to apply to subsequent Plan Years unless the Plan is amended):

- a. ☐ **The Top-Paid Group Election** will be used for Plan Years beginning on or after _____.
- b. ☐ **The Calendar Year Data Election** will be used for Plan Years beginning on or after _____.

Non-Standardized 401(k) Profit Sharing Plan and Trust

42. ADP AND ACP TESTS (Plan Sections 12.4 and 12.6)

NOTE: The selections made below for the latest year will continue to apply to subsequent Plan Years unless the Plan is amended.

- A. **ADP Test.** The ADP ratio for Nonhighly Compensated Employees will be based on the following:
- a. ☐ N/A. This Plan satisfies the ADP test safe harbor rules for all Participants for all Plan Years to which this Plan applies.
 - b. ☒ **Prior Year Testing Method.** The prior year ratio will be used for Plan Years beginning on or after January 1, 2009. If this selection is made for the first year the Code Section 401(k) feature is added to this Plan (unless this Plan is a successor plan), then for the first Plan Year only, the amount taken into account as the ADP of Nonhighly Compensated Employees for the preceding Plan Year will be:
 - 1. ☒ N/A. (Effective date of prior year testing is after effective date of the Code Section 401(k) feature.)
 - 2. ☐ the greater of 3% or the actual percentage for the initial Plan Year.
 - c. ☐ **Current Year Testing Method.** The current year ratio will be used for Plan Years beginning on or after _____.
- B. **ACP Test.** The ACP ratio for Nonhighly Compensated Employees will be based on the following:
- d. ☐ N/A. This Plan satisfies the ACP test safe harbor rules for all Participants for all Plan Years to which this Plan applies.
 - e. ☒ **Prior Year Testing Method.** The prior year ratio will be used for Plan Years beginning on or after January 1, 2009. If this selection is made for the first year the Code Section 401(m) feature is added to this Plan (unless this Plan is a successor plan), then for the first Plan Year only, the amount taken into account as the ACP of Nonhighly Compensated Employees for the preceding Plan Year will be:
 - 1. ☒ N/A. (Effective date of prior year testing is after effective date of the Code Section 401(m) feature.)
 - 2. ☐ the greater of 3% or the actual percentage for the initial Plan Year.
 - f. ☐ **Current Year Testing Method.** The current year ratio will be used for Plan Years beginning on or after _____.

MISCELLANEOUS

43. LOANS TO PARTICIPANTS (Plan Section 7.6)

- a. ☐ Loans are NOT permitted.
- b. ☒ Loans are permitted.

44. DIRECTED INVESTMENTS (Plan Section 4.10)

- a. ☐ Participant directed investments are NOT permitted. (Skip to Question 45.)
- b. ☒ Participant directed investments are permitted.

AND, is it intended that the Plan comply with ERISA Section 404(c) with respect to the Accounts subject to Participant investment direction?

- 1. ☐ No.
- 2. ☒ Yes.

45. ROLLOVERS (Plan Section 4.6)

- a. ☐ Rollovers will NOT be accepted by this Plan. (Skip to Question 46.)
- b. ☒ Rollovers will be accepted by this Plan, subject to approval by the Plan Administrator.

AND, if b. is selected, rollovers may be accepted from all Participants who are Employees as well as the following (select all that apply):

- 1. ☒ Eligible Employees who are not Participants.
- 2. ☐ Participants who are Former Employees.

AND, distributions from a Participant's Rollover Account may be made:

- 3. ☒ at any time.
- 4. ☐ only when the Participant is otherwise entitled to a distribution under the Plan.

46. AFTER-TAX VOLUNTARY EMPLOYEE CONTRIBUTIONS (Plan Section 4.8)

(Note: This Section does not include Roth Elective Deferrals.)

- a. ☐ After-tax voluntary Employee contributions are NOT permitted.
- b. ☒ After-tax voluntary Employee contributions are permitted.

Non-Standardized 401(k) Profit Sharing Plan and Trust

The adopting Employer may rely on an opinion letter issued by the Internal Revenue Service as evidence that the Plan is qualified under Code Section 401 only to the extent provided in Rev. Proc. 2005-16.

The Employer may not rely on the opinion letter in certain other circumstances or with respect to certain qualification requirements, which are specified in the opinion letter issued with respect to the Plan and in Rev. Proc. 2005-16. In order to have reliance in such circumstances or with respect to such qualification requirements, application for a determination letter must be made to Employee Plans Determinations of the Internal Revenue Service.

This Adoption Agreement may be used only in conjunction with Basic Plan Document #02. This Adoption Agreement and the Basic Plan Document shall together be known as American United Life Insurance Company Non-Standardized 401(k) Profit Sharing Plan and Trust #02-005.

The adoption of this Plan, its qualification by the IRS, and the related tax consequences are the responsibility of the Employer and its independent tax and legal advisors.

American United Life Insurance Company will notify the Employer of any amendments made to the Plan or of the discontinuance or abandonment of the Plan. Furthermore, in order to be eligible to receive such notification, the Employer agrees to notify American United Life Insurance Company of any change in address.

This Plan may not be used, and shall not be deemed to be a Prototype Plan, unless an authorized representative of American United Life Insurance Company has acknowledged the use of the Plan. Such acknowledgment is for administrative purposes only. It acknowledges that the Employer is using the Plan but does not represent that this Plan, including the choices selected on the Adoption Agreement, has been reviewed by a representative of the sponsor or constitutes a qualified retirement plan.

American United Life Insurance Company

By: Signature on File

With regard to any questions regarding the provisions of the Plan, adoption of the Plan, or the effect of an opinion letter from the IRS, call or write:

American United Life Insurance Company
One American Square
Indianapolis, IN 46282-0001
(317) 285-1877

Non-Standardized 401(k) Profit Sharing Plan and Trust

The Employer and Trustee hereby cause this Plan to be executed on the date(s) specified below:

EMPLOYER: Hellebusch Tool & Die, Inc.

By: _____

Jeff Hellebusch

6-23-11

DATE SIGNED

TRUSTEE:

☐ The signature of the Trustee appears on a separate trust agreement attached to the Plan,

OR

Jeff Hellebusch

Jeff Hellebusch

6-23-11

DATE SIGNED

Wally Hellebusch

Wally Hellebusch

6-23-11

DATE SIGNED

APPENDIX A
SPECIAL EFFECTIVE DATES AND OTHER PERMITTED ELECTIONS

A. Special effective dates. The following special effective dates apply: (Select a. OR all that apply at b. - e.)

- a. ☒ N/A. No special effective dates selected below.
- b. ☐ **Employer Matching Contributions.** The Employer Matching Contribution provisions under Question 30. are effective: _____.
- c. ☐ **Employer Profit Sharing Contributions.** The Employer Profit Sharing Contribution provisions under Questions 31. and 32. are effective: _____.
- d. ☐ **Distribution elections.** The distribution elections under Questions _____ (Choose 36. - 40. as applicable) are effective: _____.
- e. ☐ **401(k) current/prior year testing.** The current/prior year testing elections under Question 42. are effective: _____.

B. Other Permitted Elections. Select a. or any of the following elections that apply at b. - j.:

- a. ☐ N/A. No other elections selected below.
- b. ☒ **Deemed 125 compensation** (Plan Sections 1.14 and 1.37). Deemed 125 compensation shall be included in Compensation and 415 Compensation effective as of Plan Years and Limitation Years beginning on or after January 1, 2009 (insert the later of January 1, 1998, or the first day of the first Plan Year the Plan used this definition).
- c. ☐ **Beneficiary if no beneficiary elected by Participant** (Plan Section 6.2(e)). In the event no valid designation of Beneficiary exists, then in lieu of the order set forth in Plan Section 6.2(e), the following order of priority will be used: _____ (specify an order of beneficiaries; e.g., children per stirpes, parents, and then step-children).
- d. ☐ **411(d)(6) protected benefits** (Plan Section 8.1(b)). The following are Code Section 411(d)(6) protected benefits that are preserved under this Plan (specify the protected benefits and the accrued benefits that are subject to the protected benefits).
1. _____
 2. _____
 3. _____
 4. _____
- e. ☐ **415 Limits when 2 defined contribution plans are maintained** (Plan Section 4.4).
 If any Participant is covered under another qualified defined contribution plan maintained by the Employer, other than a "master or prototype plan," or if the Employer maintains a welfare benefit fund, as defined in Code Section 419(e), or an individual medical benefit account, as defined in Code Section 415(l)(2), under which amounts are treated as "annual additions" with respect to any Participant in this Plan, then the provisions of Plan Section 4.4(b) will apply as if the other plan were a "master or prototype plan" unless otherwise specified below:
1. ☐ Specify, in a manner that precludes Employer discretion, the method under which the plans will limit total "annual additions" to the "maximum permissible amount" and will properly reduce any "excess amounts": _____.
- f. ☐ **Top-heavy duplications when 2 defined contribution plans are maintained** (Plan Section 4.3(f)).
 This Section should only be completed when the Employer maintains another qualified defined contribution plan. Specifically, when a Non-Key Employee is a Participant in this Plan and another defined contribution plan maintained by the Employer, indicate which method shall be utilized to avoid duplication of top-heavy minimum benefits:
1. ☐ The full top-heavy minimum will be provided in each plan.
 2. ☐ A minimum, non-integrated contribution of 3% of each Non-Key Employee's 415 Compensation shall be provided in the following plan: _____.
 3. ☐ Specify the method under which the Plans will provide top-heavy minimum benefits for Non-Key Employees that will preclude Employer discretion and avoid inadvertent omissions, including any adjustments required under Code Section 415: _____.

NOTE: If 2. or 3. is selected and both plans do not benefit the same Participants, then the uniformity requirement of the Regulations under Code Section 401(a)(4) may be violated.

Non-Standardized 401(k) Profit Sharing Plan and Trust

- g. ☐ **Top-heavy duplications when a defined benefit plan is maintained** (Plan Section 4.3(i)). This Section should only be completed when the Employer maintains a defined benefit plan in addition to this Plan. Specifically, when a Non-Key Employee is a Participant in this Plan and a non-frozen defined benefit plan maintained by the Employer, indicate which method shall be utilized to avoid duplication of top-heavy minimum benefits: (If 1., 2., 3., or 4. is selected, 5. must also be completed.)
1. ☐ The full top-heavy minimum will be provided in each plan (if selected, Plan Section 4.3(i) shall not apply).
 2. ☐ 5% defined contribution minimum.
 3. ☐ 2% defined benefit minimum.
 4. ☐ Specify the method under which the Plans will provide top-heavy minimum benefits for Non-Key Employees that will preclude Employer discretion and avoid inadvertent omissions: _____.

NOTE: If 2., 3., or 4. is selected and the defined benefit plan and this Plan do not benefit the same Participants, the uniformity requirement of the Regulations under Code Section 401(a)(4) may be violated.

AND, the "present value" (Plan Section 9.2) for top-heavy purposes shall be based on:

5. ☐ Interest Rate: _____
Mortality Table: _____
6. ☐ The interest rate and mortality table specified to determine "present value" for top-heavy purposes in the defined benefit plan.

- h. ☐ **Recognition of Service with other employers** (Plan Sections 1.60 and 1.85). Service with the following employers (in addition to those specified at Question 17.) will be recognized as follows:

	Eligibility	Vesting	Contribution Allocation
1. <input type="checkbox"/> Employer name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. <input type="checkbox"/> Employer name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. <input type="checkbox"/> Employer name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. <input type="checkbox"/> Limitations: _____ (e.g., credit service with X only on/following 1/1/07 or credit all service with entities the Employer acquires after 12/31/06).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- i. ☐ **Post-severance Compensation (Code Section 415)** (Plan Section 1.14(e)). The post-severance Compensation provisions of the Proposed 415 Regulations shall apply to this Plan for Limitation Years and Plan Years beginning prior to July 1, 2007 and on or after _____ (may not be earlier than 2005). Specify any special rules that apply to the application of the Proposed 415 Regulations (e.g., whether the Regulations apply solely for 415 Compensation or for Compensation used for benefit or allocation purposes) ____.

- j. ☒ **Minimum distribution transitional rules (Plan Section 6.5(e))**

This Section should only be completed if it applies to the Plan. This section does not apply to (1) a new Plan or (2) an amendment or restatement of an existing Plan that never contained the provisions of Code Section 401(a)(9) as in effect prior to the amendments made by the Small Business Job Protection Act of 1996 (SBJPA).

The "required beginning date" for a Participant who is not a "five percent (5%) owner" is:

1. ☐ April 1st of the calendar year following the year in which the Participant attains age 70 1/2. (The pre-SBJPA rules continue to apply.)
2. ☒ April 1st of the calendar year following the later of the year in which the Participant attains age 70 1/2 or retires (the post-SBJPA rules), with the following exceptions (select one or both and if no election is made, both will apply effective as of January 1, 1996):
 - a. ☒ A Participant who was already receiving required minimum distributions under the pre-SBJPA rules as of January 1, 1996 (not earlier than January 1, 1996) was allowed to elect to stop receiving distributions and have them recommence in accordance with the post-SBJPA rules. Upon the recommencement of distributions, if the Plan permits annuities as a form of distribution then the following apply:
 1. ☐ N/A. Annuity distributions are not permitted.
 2. ☐ Upon the recommencement of distributions, the original Annuity Starting Date will be retained.
 3. ☐ Upon the recommencement of distributions, a new Annuity Starting Date is created.

Non-Standardized 401(k) Profit Sharing Plan and Trust

- b. ☒ A Participant who had not begun receiving required minimum distributions as of January 1, 1997 (not earlier than January 1, 1996) was allowed to defer commencement of distributions until retirement. The option to defer the commencement of distributions applied to all such Participants unless elected below:
1. ☐ The in-service distribution option is eliminated with respect to Participants who attain age 70 1/2 in or after the calendar year that begins after the later of (1) December 31, 1998, or (2) the adoption date of the amendment and restatement to bring the Plan into compliance with SBJPA.