

Request for Proposal (RFP) for



Dougherty County Schools Supplemental Retirement Plan(s)

Developed by:
Invest-N-U
4550 North Point Parkway, Suite 250
Alpharetta, GA 30022



Adapted 1st Edition Non-ERISA Covered
403(b) Plans – November 2008

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Section 1 – Introduction/Instructions

In an effort to provide the most competitive Employee Benefits for our employees and to ensure compliance with the new regulations, Dougherty County School System, has undertaken the effort of reviewing our Supplemental Retirement Plans. Dougherty County School System (“DCSS”) has retained Invest-N-U to lead an RFP process to select a plan administrator. A timeline outlining the process is included with the RFP. Eric Hansen, Senior Consultant, may be contacted at our firm’s main office located at 4550 North Point Parkway, Suite 250 Alpharetta, GA 30022 or via phone at 678-533-6080.

DCSS is seeking an administrator(s) to serve the school that can provide the most competitive proposal. The goals of the proposal review is to facilitate simplified administration for the school system and a higher quality retirement plan for the employees including open architecture investments, reduced restrictions and penalties, lower plan costs and improved education relating to retirement planning.

For investment selection, Invest-N-U will screen your universe of investments to select a menu of investments for the plan. Many employees may desire to use model portfolios that utilize the pre-screened menu of investments. Please provide a proposal that accommodates these needs. All CDSC's/Back-end/Surrender Charges must be waived and not apply for current and/or future Plan Assets. Proposals may include consolidation of plans or any combination of defined contribution plans that an administrator sees as the most appropriate arrangement given the goals of the school and to provide the most competitive proposal. Lastly, please explain how/why your organization is uniquely qualified vs. other vendors who may be responding to this RFP.

Currently, DCSS allows multiple vendors to solicit sales for 403(b) and 457 products. Plan details are estimated below.

| | |
|--|--------------|
| Estimated assets in all products: | \$18,000,000 |
| Estimated assets on new platform after first year: | \$6,000,000 |
| Participants: | 800 |
| Estimated annual contributions: | \$1,500,000 |
| Estimated number of eligible participants: | 2,400 |

Current providers are:

- AIG Valic
- GWN Securities
- ING Financial
- ABC Educational Services
- Wadell and Reed
- AXA Equitable
- Horace Mann
- Lincoln Financial
- AIG American General

Franklin Templeton
Allianz Life
Midland National
Aviva
Great American

A pre-bid question and answer session will be conducted August 4, 2010 at 1:00 PM at 601 Flint Avenue Albany, GA. **This meeting is not mandatory.**

The meeting to review the administrator selection will be held in September 2010. Please provide at least 2 hardcopies and 1 electronic version of your firm's RFP response. **The RFP Responses are due not later than Monday August 16th, 2010 at 2:30 PM.**

Please deliver all responses to:

Dougherty County School System
Supply Services
601 Flint Avenue
Albany, GA 31701
Attn: Jason Renfroe

Direct all inquiries to:

Eric Hansen
Senior Consultant
Invest-N-U
4550 North Point Parkway, Suite 250 Alpharetta, GA 30022
Phone: 678-533-6080

Section 2. Highlights/Considerations and Additional Questions.

Highlights/considerations:

- ❖ Please send your RFP hardcopy (2) responses and electronic (1) response to:

Dougherty County School System
Supply Services
601 Flint Avenue
Albany, GA 31701
Attn: Jason Renfroe
- ❖ Email: ehansen@invest-n-u.com Should you choose to decline to bid, please inform Invest-N-U.
- ❖ If you are offering an open architecture investment platform in your proposal, please bypass the investment section of this RFP and provide gross pricing for your services.
- ❖ Please be sure to include samples of your communications, contracts and other materials as requested within the RFP

Additional Questions to the standard SPARK 2nd edition RFP and the SPARK 1st Edition Non-ERISA-Covered 403(b) Plans RFP - November 2008:

1. Do you currently have information sharing agreements available for employers necessary to satisfy code section 403(b)?
 - a. Describe the information you will provide to satisfy code section 403(b) in regards to information sharing.
2. Are you capable of serving in the capacity as the administrator in a multi-vendor environment?
 - a. Please describe your capabilities as well as the responsibilities you are willing to assume.
 - b. Please describe any fees that may apply.
 - c. Would you provide a plan document?
 - d. How do you ensure exchanges, distributions and loans are accounted for?
 - e. What type of reporting do you provide to the plan sponsor and participants in regards to outside accounts.
3. Are you capable of maintaining a 403(b) compliant multi Vendor Plan Document?
4. Can you perform Multi Vendor Annual Reporting?
5. Regarding Reporting: please discuss plan level statements and reports.
6. Regarding Reporting: please discuss participant level statements and reports.

7. Regarding Communications and Education: How can and would you integrate with a third party communication team if applicable?
8. Regarding Communications and Education: What is the compensation structure of your representative who would provide education and advice if applicable?
9. Can you offer models as another investment choice? How- what method of selection is available for the participant? Is there a limit to the number of models available?
10. Please indicate the amount of current assets you already have with the plan.

Section 3 – Request for Proposal

A. Plan Sponsor Introduction, Background and Plan Details

| Plan Sponsor Information | |
|--|---|
| Plan Sponsor Name | Dougherty County Schools |
| Address for RFP submission | Dougherty County School System Supply Services 601 Flint Avenue Albany, GA 31701 Attn: Jason Renfroe |
| Contact person for questions | Eric H Hansen Senior Consultant Invest-N-U 4550 North Point Parkway, Suite 250 Alpharetta, GA 30022 678-533-6080 phone 678-533-6041 fax ehansen@invest-n-u.com |
| Type of business (Corporation, Partnership or Proprietorship) | Public School System |
| Industry | Education |
| Part of controlled group or affiliated service group? If so, how many companies involved? | n/a |
| Plan Information | |
| Name and type of plan (401(k), profit sharing, money purchase, thrift/savings, combination, etc.) | 403(b) and 457 |
| Who has investment direction for employee and employer contributions? (Plan Sponsor, Trustee or Participant) | Participant directed |
| Plan Information (continued) | |
| Type of plan document? (Prototype or Individually-designed) | Prototype |
| Plan Operational Information | |
| Name of current recordkeeper or service provider | n/a |
| Name of current custodial trustee(s) (External or Self-directed) | n/a |
| Name of payroll company | In house |
| Are contributions submitted through a | Single |

| | |
|--|----------------------------|
| single payroll or multiple? If multiple, how many? | |
| Frequency of data remittance | Monthly |
| Method of data remittance (Paper, Disk, Tape, Modem, On-line) | Electronic |
| Method of contribution remittance (Check, Bank Wire, Automated Clearing House) | Currently check and EFT |
| Plan Investment Information | |
| Amount of existing assets and as of what date? | Refer to Section I, page 3 |

| | |
|--|---|
| Search Criteria/Background Information | |
| Please provide a copy of the following: | |
| Administrator Implementation Schedule | RFP Issued: 7/15/10 RFP's Replies Due 8/15/10 Proposal Review / Finalists: 09/10 Administrator Selected: 9/30/10 Investment Selection: 10/15/10 Communication Meetings: 1/11 |
| Why are you seeking proposals: 1) Improve Employee Participation 2) Independent Employee Education and Advice 3) Lower Plan Cost and Restrictions 4) Improved Investment Menu 5) Redesign the Path of Least Resistance | |
| Search Criteria/Background Information (continued) | |
| What is the key criteria for selecting a new provider: 1) Institutional Recordkeeping Platform 2) Open Architecture Investment Platform 3) Proactive Plan Compliance Support 4) Quality of Website, Phone Support and Quarterly Statements 5) Employee Education and Communication 6) Lower Total Cost | |

B. Request for Proposal Questionnaire

ORGANIZATION AND HISTORY

1. Please provide the name(s), title(s), address, e-mail address, telephone and fax number(s) of the individual(s) responsible for responding to this request.
2. Provide a brief overview of your company and history of your organization including an organizational chart of your retirement plan operations. Please describe any parent/subsidiary/affiliate relationships. In addition, if you are a public company, please provide your current bond ratings from two of the major rating agencies.
3. Are you currently participating in any alliances or joint marketing efforts? If so, please describe in detail.
4. Indicate how many years your company has been active in the defined contribution business, i.e., 403(b), 457, 401(a) profit sharing, etc. (Indicate the period of time for each service, if different, such as investment management for X years, recordkeeping for Y years, trustee services for Z years.)
5. Indicate what percentage of your total company revenue is represented by your defined contribution/defined benefit business. (This figure should be representative of all lines of business including any foreign parent companies or subsidiaries).
6. Indicate the total value of assets in all defined contribution plans for which you provide Recordkeeping services.
7. What is the total number of participants in all defined contribution plans for which you provide recordkeeping services?
8. How many defined contribution plans do you currently administer in the following categories:

| Number of Employees* | Plans | Percentage of Total DC Plans |
|-----------------------------|--------------|-------------------------------------|
| Under 100 | | |
| 100-499 | | |
| 500-999 | | |
| 1,000-4,999 | | |
| Over 5,000 | | |
| Total | | |

9. Please provide a breakdown of the number of clients you service by plan type as a percentage of your total business:

| Type* | Plan Type - Percentage of Total Business | | |
|----------------|--|-----------------|---------------------|
| | Full Service | Investment Only | Administration Only |
| Profit Sharing | | | |
| 401(k) | | | |
| Money Purchase | | | |
| Thrift Savings | | | |
| Combination | | | |
| 403(b) | | | |
| 457 | | | |
| Other | | | |
| Total | | | |

CLIENT SERVICE / QUALITY ASSURANCE

1. Please describe the team that would deal directly with us during the transition and on an ongoing basis. Indicate staff size, experience and turnover rates.
2. What is the average number of clients managed by the plan administrator for plans of this size?
3. What type of training is required for new employees before they work on client plans?
4. How many of your employees work on defined contribution plans? Provide breakdown by functional area.
5. What are your client retention statistics for each of the last three years?
 - For those who left, what percentage left due to issues pertaining to services provided by your organization?
 - What is the average client relationship duration?
6. Describe your organization's commitment to quality and your philosophy/approach to client services.
7. Describe your procedures for monitoring
 - a. client satisfaction
 - b. participant satisfaction
8. Describe your service/timing standards.
9. Do you guarantee service performance? If so, please describe.
10. What checks and balances do you have in place to assure plan administration integrity and accuracy including participant account data?
11. Describe the compensation structure of the client relationship team?

RECORDKEEPING / ADMINISTRATION

1. Do you provide one main contact for the daily administrative needs of this plan?
2. Do you provide daily valuation? Describe in detail how your system allocates earnings.
3. What methods of data transmission are available?
4. Describe in detail how your system processes contributions.
5. Describe in detail, including timing, how your system processes withdrawals (i.e. in-service and hardship withdrawals).
6. Describe in detail, including timing, how your system processes:
 - a. lump-sum distributions
 - b. systematic payments/installments
 - c. annuities
 - d. rollovers to another plan or an IRA
 - e. required minimum distributions
7. What options are available to terminated/retired participants? Can funds be kept under the plan?
8. Describe in detail how your system processes transfers/exchanges (including frequency/limitations). Are confirmations sent?
9. Describe your process and methods of reallocation (percent and/or dollar).
10. Can employer and employee contributions be tracked separately?
11. Describe in detail your system's vesting capability. How many different schedules can your system support?
12. Describe in detail how your system handles Federal and State tax reporting (i.e. Form 1099R, W-2 for 457 plan). Do you provide tax form preparation and filing?
13. Describe in detail how you administer Qualified Domestic Relations Orders (QDROs).
14. What checks and balances do you have in place to ensure transactional integrity?
15. Do you provide an administration manual?
16. Will you recordkeep non-proprietary investment vehicles? Describe the process and systems used.
17. Please describe your process for notifying participants either on your website or VRU if any investments have fees assessed as a result of short-term trading.
18. What other administrative services do you provide?

REGULATORY SERVICES

1. Describe your capabilities for the following (if applicable):
 - a) Discrimination Testing ADP/ACP: 401(k) and 401(m)
 - b) Annual addition limitations (25%/\$30,000 limits): 415(c)
 - c) Monitoring of elective deferrals: (402(g))
 - d) Top-heavy testing: (416(c))
 - e) Identifying HCE's: 401(a)17
 - f) Coverage testing for controlled groups: 410(b)
2. How do you address violations for any of the testing covered in question 1?
3. Can you assist us in the following areas of plan documentation design? If so how?
 - a) Customized plan document
 - b) Prototype plan document
 - c) Customized SPD
 - d) Prototype SPD
 - e) Qualification submission
4. Describe the type of legal support included in your proposal and any fees that apply.
5. Do you provide either or both of the following:
 - a) Information to complete Form 5500
 - b) A signature-ready 5500
6. What fiduciary responsibility does your organization assume?
7. How do you keep Plan Sponsors informed and updated on any regulatory and legislative changes?
8. How will you ensure that our plan remains in compliance?
9. How do you ensure that your recordkeeping system is in compliance with all regulations?
10. Describe any past or pending litigation, within the last 5 years, relating to the services you are proposing.

Please provide a sample services agreement or contract.

PLAN LEVEL COMPLIANCE SERVICES

1. Please provide a brief summary of your overall plan-level compliance and administrative services capabilities and experience. Provide specific information on services that would apply across multiple providers in the plan. Additionally, you may provide information about any other plan-level compliance and administrative services capabilities not covered in your response to the following specific questions.
2. Can you, an affiliated or other related party provide necessary information sharing?
3. Describe your capabilities and processes for performing plan-level screening and or approval of the following items. Specify whether the processes are manual automated, and any limitations on the number of permitted providers:
 - a. Distributions generally.
 - b. Hardships.
 - c. Loans.
 - d. Contract exchanges.
4. Describe the support you provide in the event of a plan audit. Please specifically identify any costs associated with these services in the Fees and Expenses portion of your response.
5. Describe your processes and procedures to ensure:
 - a. Data integrity
 - b. Vendor neutrality
 - c. Data confidentiality

LOANS (IF APPLICABLE)

1. Describe in detail your loan processing capabilities.
2. Do you have paperless loan capabilities? If so, describe.
3. Describe the flexibility in your loan repayment processing (i.e., additional payments, multiple loans, missed payments).
4. How do you handle delinquent and/or defaulted loans?
5. What responsibility do we retain for initial and ongoing loan servicing?
6. Describe any other features and/or limitations of the loan system not detailed above (i.e., loan modeling, amortization scheduling, etc.)

REPORTING

1. Describe the standard reporting package that you would provide us as well as the medium(s) used (provide samples).
2. Describe any customized or ad hoc reporting capabilities including Internet capabilities.
3. Describe your standard participant level statements and documents (provide samples).
4. Describe your customization capabilities for participant level statements.
5. Can reports/statements be produced on other media? Please describe.
6. What is the standard timeframe for providing each report after the reporting period ends?

VOICE RESPONSE SYSTEM (VRS), INTERNET ACCESS AND CALL CENTER

Voice Response System

1. Describe the services available through your voice response system.
2. How are transactions processed? How are transactions documented? Are confirmations sent and if so how soon after the transaction?
3. Describe how data is secured within the system (i.e., PIN, audit trail, confirmations).
4. Describe the level of customization available within your VRS.
5. What are the standard hours of operation?
6. Are there any transactions that cannot be processed through the voice response system?
7. Is the menu easy for participants to use? Does it include “help” information? Please describe the structure in detail.
8. Can a participant elect to move from the VRS to a service representative? When and what services are available?
9. How often is the data on the VRS updated? How does the VRS interface with the recordkeeping system?

Internet Access

1. Describe the account services and transaction capabilities available through your participant website.
2. How are website transactions processed and documented?
3. Are there any transactions that cannot be processed through your website?
4. Describe how data is secured within the system (i.e., PIN, audit trail, confirmations).

5. Describe the level of customization available for clients using your internet services.
6. What are the standard hours of account access and transactional availability?
7. If a participant elects to move from the website to a call center service representative, describe the interface between the website and the service representative.
8. How often is the data on the website updated? How does the website interface with the recordkeeping system?
9. Please identify your website account access and transactional availability statistics (average availability per month as a percentage).

Call Center

1. Please identify your toll-free service center standards. Please include for each of the last three calendar quarters, statistics related to actual performance.
 - Number of calls
 - Average length of calls
 - Average response time
 - Percentage of calls requiring follow-up
 - Call abort rate
 - Percentage of incoming calls totally handled via VRS versus toll-free live service center representative assistance
 - Percentage of service requests handled via website versus call center and VRS
2. What training is provided to toll-free service center representatives before they are allowed to handle incoming calls?
3. Do you monitor and/or tape toll-free calls?
4. What are your case management procedures for calls that have service issues?
5. What information is available to toll-free service representatives to allow them to effectively answer participant questions? How is this information available to the service representative (written/web-based)? Please describe your procedures for updating this information when a plan change is made.
6. Please describe how your call center is structured. Are accounts handled by designated teams?

COMMUNICATION AND EDUCATION

1. Briefly describe your background and experience in providing communication and education programs.
2. Identify the key elements provided as part of a standard communication and education program package included in your proposal.

3. Identify non-standard elements to a communication and education program you may provide for an additional charge.
4. Describe separately your initial and on-going communication and education program (including printed material, visits, training, etc.). If the program is tailored to a specific plan sponsor need, identify the critical issues to be determined in designing such a program.
5. Can material be customized? Please describe in what capacity (logos, messages etc.) and if there are any additional charges.
6. Do you provide personnel resources as part of both the initial and on-going communication and education program?
7. Do you provide communication and education material in a foreign language? If so, what language(s) and what material?
8. Do you create all of your communication and education material in-house or through third-parties?
9. Describe the process you use to help plan sponsors measure the effectiveness of employee education efforts.
10. Does your organization provide any services (i.e., personal questionnaires, software) that would help individual participants with financial planning? Describe any electronic education tools you provide, both software-based and web-based.
11. Describe your position on providing investment advice to participants. What fiduciary responsibility do you assume if advice is provided?
12. If advice is offered, is it in-house or via a third party? Describe your process, mode and scope of advice.
13. Describe education tools or programs designed to support IRA rollovers and/or retirement distributions.
14. How many individuals in your organization are devoted to on-site training for defined contribution plans and where are they located? Please describe their compensation structure.
15. How many of these individuals would be assigned to the plan.

Provide samples of initial enrollment and on-going communication and education materials.

CONVERSION/IMPLEMENTATION

1. Explain your implementation/conversion process including time frame. What is the minimum time frame needed to ensure a smooth implementation?
2. What involvement will be required by all involved parties?
3. Do you provide a separate team apart from the ongoing administrative service team for implementation responsibilities? If so, where are they located?
4. What process can you offer to move existing assets for individual participants who want to move to the new service provider?
5. What type of education do you provide to inform employees of their rights to move assets to a new service provider?

SYSTEMS CAPABILITIES AND HARDWARE

1. Describe the hardware platform and software system you use to record keep and administer defined contribution plans.
2. Was the software developed internally, leased, or bought from another provider? Who has the ultimate responsibility/authority to make sure the software remains current to laws, regulations, client needs, etc.?
3. How often is the system upgraded?
4. What system enhancements do you have planned over the next three years for:
 - Core recordkeeping system
 - Service technology
5. Describe your documented disaster recovery plan. How often do you test your recovery system?
6. Describe your maintenance and backup procedures including daily backups, retention timetable and off-site backup storage approach. Where are your off-site backup facilities located?
7. Describe the method of maintaining plan sponsor and participant history on the system.
8. Describe the valuation methods offered by your system.
9. Are internal controls of your recordkeeping system audited by an independent accounting firm on an annual or more frequent basis? If so, please provide a copy of the most recent report.

10. Does the system allow for plan sponsor customization/limits such as:
 - transfer frequency
 - minimum/maximum contribution percentages
 - withdrawal frequency
 - investment election changes
 - other

11. Describe your system's maximum limits with regards to the following:
 - investment funds
 - money types
 - loans
 - transfers
 - other

12. Please provide ongoing transaction layouts if specific layouts are required.

INVESTMENTS

1. Discuss your organization's ability to provide investment vehicles for defined contribution plans. Be sure to disclose if you are providing these vehicles in-house or through external managers.
2. To the extent we wish to comply with 404(c), how can you assist us?
3. How long have you been providing investment services?
4. Please identify the number and types of investment vehicles you would make available. Does your organization offer proprietary investments? If so, please provide a listing.
5. Please provide a list of ticker symbols for the investment options that you will make available to us, please do so as an appendix to your response.
6. Do you offer models as an additional investment choice? If so how do you offer these to participants? Is there a limit to the number of models available?
7. Does your organization offer a self-directed brokerage window as a potential investment option? Please fully describe the service and fees associated with the administration of the brokerage accounts.
8. Does your organization offer an income solution for retirement? If so please describe your program and fees, restrictions etc.

9. If you have any additional information you would like to provide on the investment vehicles identified above, please do so as an appendix to your responses.
10. If the plan includes an automatic enrollment feature, do you offer funds that are eligible to be Qualified Default Investment Alternatives (QDIAs), such as life-cycle or target retirement date funds, balanced funds or professionally managed accounts? If so, please provide additional information.
11. For the stable value investment or other fixed investment with guaranteed interest, describe the current and minimum interest rate guarantees, how interest is credited, and the frequency of rate changes. Furthermore, provide the make-up of the underlying portfolio including asset type, grade and percentage breakdown.
12. Please specify any withdrawal provisions, including restrictions on transfers, associated with any of the investments options listed in this response.
13. Provide a copy of your investment contract.

TRUSTEE SERVICES

1. Will you allow us to self-trustee the plan?
2. Will you act as or provide availability to trustee services?
3. Will you work with an independent trustee?
4. If you provide Trustee Services, what are your fiduciary responsibilities?
5. Describe “checks and balances” employed in your trust accounting system.
6. Will you trustee outside investment funds?
7. What is your turn-around time on check issuance?
8. Do you process individual state tax withholding?
9. Do you provide information to plan participants regarding options on distributions?
10. Do you have a limit on the number of checks/wires available to participants who rollover their distributions?
11. Do you provide consolidated year-end ERISA reports for 5500 filings?
12. Do you maintain all loan documentation (i.e., promissory notes) as part of your files?

13. Is your trust accounting system integrated with your recordkeeping system?

Provide a copy of your custodial trust agreement.

14. Will you allow us to maintain an independent GIC portfolio with your trust as custodian of the contracts? If so, describe procedure.

INSURANCE INFORMATION

1. Describe your organization's bonding, E&O, and similar insurance coverage's applicable to the services proposed.

EXPENSES

1. PLEASE PROVIDE GROSS PRICING.

NOTE: IF YOU ARE NOT PROVIDING GROSS PRICING PLEASE COMPLETE THE EXPENSE SCHEDULE BELOW.

Please attach a schedule of all expenses covering each of the services and activities identified on the following listing. Also, please identify if the expense is:

- | | |
|---|-----------------------------|
| • one time or on-going charge | • performance adjustable |
| • breakpoint impacted | • discount oriented |
| • participant paid (direct or account adjustment) and | • plan sponsor paid (billed |
| | billing frequency) |
| • guaranteed (and length of guarantee) daily | • absorbed in determining |
| value | investment share/unit |

Use the specific information provided in this RFP about our plan in determining and illustrating your expenses. If assumptions are necessary, please fully explain your assumptions and quote the related expenses on a unit cost basis, if possible.

2. What are the start-up/conversion costs and the termination costs?
3. For how long will you guarantee specific expenses?
4. What are the factors you consider in determining future increases and when they are to occur?
5. Are there additional charges made at the time of plan changes we initiate or legislated or regulated changes? Please address the differences should we use a prototype or individually designed plan.
6. Describe what plan consulting services are included and related hourly charges and out-of-pocket expenses.

7. How are expenses adjusted if a sizable number of participants are added or removed from the plan (such as either acquisition or divestiture or partial plan termination)?
8. Do you offer any expense arrangement whereby we share in your firm's upside potential as participants and plan assets increase over time?
9. If you offer an alliance relationship, please identify any "offset" to expenses.
10. In addition to the expense schedule, please identify any other service or activity not covered on the "Service Activity" listing, i.e., postage, handling, supplies, servicing commissions, etc. Please be specific.

EXPENSE SCHEDULE

Use the listing of Services and/or Activities on the following pages to complete the chart below. Identify all assumptions used below the chart. (A sample expense chart is shown below.)

| Expense | Service/Activity Covered | Comments |
|---------|--------------------------|----------|
| | | |

Assumptions:

SAMPLE LAYOUT

| Expense | Service/Activity Covered | Comments |
|--|--------------------------|-----------------------------|
| \$xxx Conversion Fee | | One time |
| \$xx Annual Fee Per Participant | | On-going, xx Year guarantee |
| \$xxx Annual Trustee Services | | On-going, xx Year guarantee |
| .00% Asset-based Fee (Sep Acct charges, M&A, etc.) | | On-going |
| \$xxx Testing Fee | | On-going |