# Instructions for Completing the SIMPLE IRA Adoption Agreement

charles SCHWAB

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These instructions are designed to help you, the Employer, along with your attorney and/or tax advisor, complete the Adoption Agreement for the Schwab SIMPLE IRA. The instructions are to be used only as a general guide and are not intended as a substitute for qualified legal and tax advice. We recommend that you obtain the advice of your legal or tax advisor before you sign the Adoption Agreement.

### **Employer Information**

Fill in the requested information. The "Adopting Employer's Federal Tax Identification Number" is the tax identification number assigned to your business. Do not use your Social Security Number. If your business does not have a Federal Tax Identification Number, you or your tax advisor may obtain one immediately online or by telephone; the instructions for IRS Form SS-4 (available on the IRS website at www.irs.gov) explain how to proceed. If you have filed IRS Form SS-4 to request a number but have not received it, print "Applied for" on the "Adopting Employer's Federal Tax Identification Number" line. After you receive a tax identification number, be sure to let us know what that number is.

#### 1. Establishment and Purpose of Plan

There are no elections required for Section 1. Refer to the Basic Plan Document for information regarding this section.

#### 2. Effective Dates

This SIMPLE IRA Plan is either a new plan (an initial adoption) or a restatement of an existing SIMPLE IRA Plan.

#### Option A. New Plan Effective Date

If this is a new SIMPLE IRA Plan, fill in the Effective Date. The Effective Date is usually the first day of the Plan Year in which this Adoption Agreement is signed. For example, if an Employer maintains a Plan on a calendar-year basis and this Adoption Agreement is signed on September 23, 2004, the Effective Date would be January 1, 2004. However,

- The Plan may not become effective during the period from October 1 through December 31 unless the Employer comes into existence after October 1 and establishes the Plan as soon as possible thereafter.
- · If the Employer had a previous SIMPLE IRA Plan, it may adopt a new SIMPLE IRA Plan only with a January 1 effective date.

#### Option B. Amendment and Restatement Date

If the reason you are adopting this Plan is to amend and replace an existing SIMPLE IRA Plan, complete this section. The existing SIMPLE IRA Plan to be replaced is called a "Prior Plan." You will need to know the Effective Date of the Prior Plan. The best way to determine its Effective Date is to refer to the Prior Plan Adoption Agreement. The Effective Date of this amendment and restatement is January 1 of the calendar year in which the new Adoption Agreement is signed.

# 3. Eligibility and Participation Requirements

Note: Section 3 should be completed even if you do not have Employees.

Within limits, you as the Employer may restrict participation by requiring a certain amount of Compensation in prior years or the current year or both. Note that the eligibility requirements, which you set up for the Plan, also apply to you.

Suppose, for example, you establish a service requirement requiring Employees to earn at least \$5,000 in Compensation from you during any two preceding years and require the Employee to be expected to earn at least \$5,000 during the current year. Only those Employees (including yourself) would be eligible to participate in the Plan.

#### Part A. Service Requirement

If you want all Employees to be eligible to participate in the Plan, check Option 1.

If you want to limit participation, check Option 2 and fill in the amount of annual Compensation required for participation. In addition, provide the number of preceding years (0, 1, or 2) Participants are required to satisfy the minimum Compensation requirement.

# Part B. Exclusion of Certain Classes of Employees

All Employees will be eligible to become Participants when they meet the service requirement unless indicated otherwise in the Adoption Agreement. To exclude a particular class of Employee, select the boxes under the class of Employees you wish to exclude from participating in this Plan. The following classes of Employees may be excluded:

- 1. Employees covered by the terms of a collective bargaining agreement (e.g., a union agreement) as described in Section 3.02(A) of the Plan, where retirement benefits were the subject of good faith bargaining.
- 2. Employees who are non-resident aliens with no U.S. income.
- 3. New Employees as a result of an acquisition or similar transaction (during a transition period).

### Part C. Election Periods

Specify a period or periods of time, in addition to the Election Period (November 1 to December 31) when all Participants may make or modify a salary reduction (Elective Deferral) agreement.

# 4. Contributions

# Part A. Catch-Up Contributions

If the Plan will allow Participants who attain age 50 by the end of the year to make an additional Catch-Up Contribution, check Option 1. If not, then check Option 2.

# Part B. Employer Contributions

Each year you must make Matching or Nonelective Contributions to the SIMPLE IRAs of the Participants in accordance with the Basic Plan Document. Fill in the amount of annual Compensation required for Participants to be eligible to receive Nonelective Contributions, should they be made. This amount may not be greater than the amount of annual Compensation required for participation, as chosen in Section 3, Part A, Option 2.

#### Part C. Use of Designated Financial Institution

There are no elections required for Section 4, Part C. In adopting the Schwab SIMPLE IRA Plan, the Employer elects to allow each eligible Participant to select the financial institution for his or her SIMPLE IRA.

#### 5. Amendment or Termination of Plan

There are no elections for Section 5. Refer to the Basic Plan Document for information regarding this section.

# 6. Employer Signature

An authorized representative of the Employer must sign and date the Adoption Agreement.

#### 7. Prototype Sponsor

Charles Schwab & Co., Inc. is the entity that makes this prototype plan available to employers for adoption.

# SIMPLE IRA Adoption Agreement

# charles SCHWAB

- · Complete all sections of this form.
- Make a copy for your plan records and return the original, along with your Schwab IRA Account Application, to Schwab.

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Employer Information			
Business Name of Adopting Empl	oyer		Federal Tax Identification Number (EIN)
Business Street Address (no P.O.	boxes)	City	State Zip Code
Business Telephone Number		Income Tax Year-End (mm/dd)	Business Email Address
( )			
1. Establishment and	Purpose of Plan		
There are no elections rec	uired for Section 1. Refer to the E	Basic Plan Document for information regarding	this section.
2. Effective Dates (Con	nplete Option A or B.)		
Option A:	initial adoption of a SIMPLE IRA pl	lan by the Employer.	
The Effective	ve Date of this Plan is		·
Note: The E	Effective Date may be any date bet	tween January 1 and October 1.	
Option B:	mendment and restatement of an	n existing SIMPLE IRA plan (a Prior Plan).	
The Prior PI	an was initially effective on		·
The Effective	e Date of this amendment and re	estatement is January 1,	
3. Eligibility and Partic	cipation Requirements (Complet	te Parts A through C.)	
Part A. Service Requireme	ent		
Option 1: 🗌 Full	Eligibility. All Employees are eligib	ole.	
Option 2:  Lim	ited Eligibility. Eligibility is limited	to each Employee who satisfies the requirement	ents in both (a) and (b) below.
(a) I	Prior Year Compensation. An Emp	loyee who has received at least \$5,000, or _ ify 0 or 1), if less, preceding Years (need not b	, if lesser, in Compensation
	Current Year Compensation. An Er lesser, in Compensation during th	mployee who is reasonably expected to receiv e current Year.	e at least \$5,000, or, if
Note: If no option i	s selected, Option 1 shall be deen	ned to be selected.	
Part B. Exclusion of Certai	in Classes of Employees		
All Employees will	be eligible to become Participants	s in the Plan, except the following. Select any	that apply.
		cribed in Section 3.02(A) of the Plan. If not sel in Section 1.03 of the Plan applies.	ected, this box will be deemed to be selected in
2. Non-resider	nt aliens as described in Section 3	3.02(B) of the Plan.	
· ·		3.02(C) of the Plan. If not selected, this box wo an acquisition or similar transaction as desc	vill be deemed to be selected if there is a failure cribed in Section 1.03(A) of the Plan.
Part C. Election Periods (S	Select one.)		
	60-day Election Period described in general Election Periods:	in Section 3.04 of the Plan, a Participant may	make or modify a Salary Reduction Agreement
(Specify a period of	or periods [e.g., semi-annually, qu	arterly, monthly or daily] that will apply uniform	nly to all Participants.)



David A (	<b>tributions</b> (Review and complete, where applicable, Part	ts A through C.)		
Part A.	Catch-Up Contributions.			
١	Will Catch-Up Contributions, as described in Section 4.01	of the Plan, be permitted under this F	Plan? Select one.	
(	Option 1:			
(	Option 2:  No			
1	Note: If no option is selected, Option 1 will be deemed to	be selected.		
	Employer Contributions (Complete only if Section 3, Part A			
E V	Each Year the Employer shall make either Matching Contri with the rules described in Section 4.02 of the Plan. For a	ibutions or Nonelective Contributions is any Year the Employer makes Nonelect (enter a dollar amount no le	tive Contributions, such	contributions will be made
t	Use of Designated Financial Institution. In adopting the So the financial institution to receive each eligible Employer's IRA account at the financial institution that he or she sele	s contributions. To receive contribution		
	andment or Tormination of Dian			
There ar	rendment or Termination of Plan re no elections required for Section 5. Refer to the Basic I  bloyer Signature	Plan Document for information regardi	ng this section.	
There ar  6. Emp I acknow this Plan	re no elections required for Section 5. Refer to the Basic I	the completion of this Adoption Agree	ment and the legal and	tax implications of adopting
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Approved by		Print Name of Approver	r									
Date Approved	Source Code	Branch Office and Account Number			_				_			

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