Information Sharing Agreement - 403(b)(7)

ISA

Account Number

Instruction: The agreement is between the Employer and Provider, as described below, and is effective as of the date a fully executed Agreement is received by the Provider. Use this form in conjunction with the Transfer Instructions to LPL (External)(F2-CTD).

Please mail the completed form to LPL Financial, Attn: Trade Direct, P.O. Box 6025 Fort Mill, SC 29715-6025 or fax to (858) 202-8500.

Note: Original Customer Account Transfer Form must be mailed to LPL.

Information and Agreement

1. Account Holder Information

Account Holder Name

Social Security Number

2. Definitions

Agreement - The Information Sharing Agreement as described by the Department of the Treasury in the 403(b) Final Regulations effective 07/26/07.

Employer - An entity signing below and described in section 501(c)(3) of the Internal Revenue Code (Code) which is exempt from tax under Section 501(a) of the Code, or an educational organization described in Section 170(b)(1)(A)(ii) of the Code, or any other entity eligible under Section 403(b) of the Code to make contributions to custodial accounts.

Provider - LPL Financial LLC or The Private Trust Company, N.A. as designated in the Adoption Agreement or any successor to each thereto which qualifies to serve as custodian in the manner prescribed by Section 401(f)(2) of the Code.

3. Agreement

This Agreement applies to any 403(b)(7) custodial account established by the Provider on behalf of a participant or beneficiary (pursuant to sections 1.403(b)-2(b)(3) and (12) of the Treasury Regulations) relating to an exchange after September 24, 2007, from a prior 403(b) annuity contract/custodial account as described in section 1.403(b)-10(b) of the Treasury Regulations under the Employer's Section 403(b) plan (the "Plan").

The Employer agrees as follows:

1. The Employer acknowledge that the 403(b) plan under which the Provider's 403(b)(7) custodial account is maintained permits exchanges after September 24, 2007, and the Provider's 403(b) custodial account is available under the Employer's Plan.

2. On or before January 1, 2009 in accordance with applicable regulations, the Employer will adopt a written plan document for the Plan that authorizes exchanges executed in accordance with this Agreement.

3. The Employer agrees to notify the Provider promptly in writing in the event that it ceases to be an eligible employer under Section 403(b), or terminates or otherwise ceases to maintain the Plan.

4. The Employer is responsible for certifying that any requested payment or distribution is proper and is due to an event qualifying for a distribution according to the Plan and that such amounts are fully vested and nonforfeitable. The Employer further acknowledges that neither the Custodian, LPL, nor any of their affiliates shall be liable for any such payment or distributions made pursuant to any direction given to them herein and shall have no duty to determine whether any distribution is in accordance with the terms of the LPL 403(b)(7) Custodial Agreement or the Plan.

The Provider agrees as follows:

1. The participant or beneficiary has an accumulated benefit immediately after the exchange that is at least equal to the accumulated benefit of that participant or beneficiary immediately before the exchange (taking into account the accumulated benefit of the participant or beneficiary under both section 403(b) contracts immediately before the exchange).

2. The receiving contract is subject to distribution restrictions with respect to the participant that are not less stringent than those imposed on the contract being exchanged.

4. Acknowledgement

By signing below, the Employer and Provider agree to share with each other the following information:

1. Information necessary for the Provider's 403(b)(7) custodial account, or any other annuity contract/custodial account to which contributions have been made by the Employer under the 403(b) Plan on behalf of the participant or beneficiary, to satisfy Section 403(b), including information concerning the participant's employment, if applicable, and information that takes into account the participant or beneficiary's other Section 403(b) annuity contracts/ custodial accounts or qualified employer plans (such as a severance from employment for purposes of the distributions restrictions in Section 1.403(b)-6 of the Final Treasury Regulations and the hardship withdrawal rules of Section 1.403(b)-6(d)(2)).
2. Information necessary for the Provider's 403(b)(7) custodial account, or any other annuity contract/custodial account to which contributions have been made by the Employer under the Plan on behalf of the same individuals to satisfy other tax requirement (such as a Plan loan that satisfies the conditions in the Internal Revenue Code Section 72(p)(2)).

This Agreement is the Provider's current interpretation of contract exchange rules contained in the final 403(b) regulations. The Provider's interpretation may change as a result of future guidance issued by the IRS. This information is provided with the understanding that the Provider, its affiliates, employees and representatives do not render legal or tax advice.

Employer Authorization

Employer Name

Name/Title of Authorized Signatory of Employer

Account Holder Signature

Date

LPL Financial LLC, Provider

Authorized Officer Name

Title of Authorized Officer

Authorized Signature

Date

Account Number