

ESOP DOCUMENT DESIGN CHECKLIST

1. Name of Corporate Plan Sponsor: _____
2. State of Incorporation: _____
3. Federal EID No.: _____
4. ESOP Plan Effective Date: _____
5. Type of Plan
 ESOP
 401(k)/ESOP
6. Provision for leveraging? Yes No
7. Will seller be utilizing IRC § 1042 provision (deferral of capital gains through purchase of qualifying security?) Yes No
8. Is Company a Sub "S" Corporation or "C" Corporation?
9. Company's Fiscal Year End _____
ESOP Plan Year End _____
10. Participation Rules:
 - a. Minimum age to be a Participant in the ESOP _____
 - b. Minimum Years of Service to be a Participant _____
 - c. Past service credit? _____
 - d. Minimum hours required? Yes (1,000 hours) No
 - e. Employee Classes Excluded:

 - f. Plan Entry Date(s) Annually Semi-Annually
 Quarterly Other: _____
11. Vesting Schedule:
 0 vesting for 3 years, then 20%/year, full vesting in 7 years
 5-year cliff vesting
 Other: _____
12. Minimum Hours for Vesting Year (cannot exceed 1,000): _____
13. Allocation Rules:
 - a. Minimum hours for contribution _____
 - b. Definition of Compensation for Allocation _____ Total Compensation _____
 - c. Employment on last day required? Yes No

14. Reallocation of Forfeitures
 Five-Year Break in Service
 Five-Year Break in Service or, If Earlier, Following Distribution

15. Break in Service = _____ Hours (cannot exceed 500)

16. Distribution Rules:

- a. Defer all until ESOP debt is retired? Yes No
- b. Retirees Year Following
 Other: _____
- c. Death Year Following
 Other: _____
 Do not defer until debt is repaid
- d. Disability Year Following
 Other: _____
 Do not defer until debt is repaid
- e. Quit or Fired Six Years Other: _____
 Minimum Distribution Amount
- f. Distribute Stock Yes No
- g. Distribute Cash Only Yes No
- h. Decision maker re: how to distribute (lump sum, etc.) Trustees Participant

17. Self-trusted? Yes No

Name of Trustee(s): _____
Member(s) of Plan's Administrative Committee: _____

18. Definition of Retirement:

Later of Age _____ or completion of _____ years of participation (cannot exceed 65 & 5)

19. Union Employees excluded automatically? Yes No

Prepared by:

Name and title
on behalf of:

Date

Company Name