

# GET (K)ONNECTED 401(K) PLAN NEWSLETTER



RETIREMENT  
SAVINGS PLAN



## DID YOU GET STUCK BEING THE PLAN FIDUCIARY?

Every qualified retirement savings plan has at least one plan fiduciary. If your company sponsors its own 401(k) or 403(b) plan, you may be it! If you are, as the person ultimately responsible for other people's savings, you have certain duties and responsibilities that you cannot avoid.

Plan fiduciaries will include any individual who exercises discretion or control over the plan and its assets. This will typically include the plan trustee, the plan committee, any investment advisors to the plan, and any other individuals with discretionary authority. If you are approving the final investment menu for the plan or approving distribution and loan requests, list "fiduciary" as another one of your titles.

Under the Employee Retirement Income Security Act of 1974 (ERISA), fiduciaries must, among other things, operate the plan for the exclusive purposes of providing benefits and paying reasonable expenses for plan operation. This duty requires that fiduciaries make decisions that will facilitate the accumulation of adequate retirement savings by the employees they serve. Ultimately, this means that the plan fiduciaries are responsible for any

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part of the plan and its operation that can affect a participant's ability to accumulate adequate retirement savings. Plan fiduciaries must:

- \* Prudently select and monitor the investment alternatives offered to the participants;
- \* Prudently select and monitor the plan's service providers, including the recordkeeper, third party administrator, and investment advisor;
- \* Assist employees with understanding the importance of participating in the plan and deferring adequately to achieve their retirement goals;
- \* Provide assistance to employees with the appropriate allocation of their funds within the plan (among prudently selected and monitored investment options);
- \* Make sure that any expenses paid out of plan assets are reasonable in light of the services received (since the expenses of operating the plan and those inherent in the investments held by the plan are major factors that impact the accumulation of adequate retirement savings).

If this is all news to you, don't delay. With the recent litigation involving Plan fiduciaries and qualified retirement savings plans, it is important that you review your plan and administrative practices today.

## OUT-SOURCE KEY FIDUCIARY DUTIES

If you are worried that you have neither the time nor the expertise to act as a prudent plan fiduciary, joining our multiple employer plan may be the best move you ever made. With the help of the Plan's trusted advisors, we will:

- \* Select and monitor the Plan's investment menu
- \* Deliver prospectuses as participants make initial investments
- \* Maintain all plan documents
- \* Provide a Qualified Default Investment Alternative
- \* Distribute all required notices, including Summary Plan Descriptions, to each participant
- \* Select service providers and monitor plan expenses
- \* Provide participant investment education

**If you would like more information about joining a multiple employer plan, contact us today!** We will arrange a plan consultation with a retirement specialist to help you determine if joining a multiple employer plan is the right move for your company.

Name of the Company: \_\_\_\_\_

Form of Entity (check one):

<input type="checkbox"/> Corporation	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Non-Profit/Tax-Exempt	<input type="checkbox"/> Sole Proprietorship
<input type="checkbox"/> LLC	<input type="checkbox"/> LLP	<input type="checkbox"/> Partnership	<input type="checkbox"/> Other

Business Product or Service: \_\_\_\_\_

Company Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Company Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Contact: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Alternative Contact: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Return this form to::**

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