

Midland Wealth Management Retirement Plan Services Company Retirement Plan Checkup Questionnaire

Part I. Company Information

Company Name _____ Company Contact Name _____

Company Address _____ City _____ State _____ Zip _____

Telephone Number _____ Email address: _____

Respond by checking appropriate line. Give yourself 5 points for each "Yes" response and 0 points for all other responses. Keep a copy for your records.

Part II. Plan Compliance

Yes No I Don't Know

1. Do you conduct an annual plan review with your current vendor? _____ pts.
2. Have you benchmarked your overall plan fees to determine if they are reasonable according to Department of Labor standards? _____ pts.
3. Does the plan have a designated trustee instead of the company? _____ pts.
4. Do you have an investment advisor who selects investments that the plan offers to plan participants? _____ pts.
5. Does your plan exclude offering proprietary investments owned by your current vendor? _____ pts.

Part III. Plan Administration

1. Does your plan design meet the needs of your employees? _____ pts.
2. Do more than 60% of your employees participate in the plan? _____ pts.
3. Do you feel that the fees you are paying your current vendor are appropriate for the service you are receiving? _____ pts.
4. Does your current vendor respond timely to your plan inquiries? _____ pts.

Part IV. Plan Education

1. Does the retirement plan education provided to your employees help increase plan enrollment? _____ pts.
 2. Are your employees asking for more in-person investment guidance from your retirement vendor? _____ pts.
 3. Are your employees receiving comprehensive financial wellness education beyond retirement plan education? _____ pts.
- _____ pts.

Retirement Plan Health Excellent = Score of 55 Good = Score of 50 Fair = Score of 45 Poor = Score 40 or below

Schedule a meeting with Midland Retirement Plan Services to discuss your answers.

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