

## **REPURCHASE LIABILITY STUDY DOCUMENT REQUEST LIST**

To ensure prompt completion of the Subject Company's repurchase liability study, please provide the following documents and other information in writing:

- 1. Plan Document**
- 2. Summary Plan Description**
- 3. Vesting Schedule**
- 4. Allocation Method (pro rata or based on point system)**
- 5. All Loan Information**
  - a. Length and type of loan
  - b. Paid and unpaid principal and interest
  - c. Cost basis
  - d. Number of unallocated shares
  - e. Release method
- 6. Corporate Plan Year End**
- 7. Stock Class Information**
  - a. Include contribution method
- 8. Current Market Value Per Share**
- 9. Whether Dividends are Declared**
- 10. Whether Diversification Applies**
- 11. Employee Information (see page 2)**
  - a. Actual stock account balances
  - b. Other investment accounts (cash)
  - c. Diversified stock account balance

## REPURCHASE LIABILITY STUDY QUESTIONNAIRE

Please provide the following in a Microsoft Excel Spreadsheet. Each column should be labeled with the appropriate category. For example: Employee ID, Name, etc. Each row need not be labeled. **No commas should be used.**

1. **Employee ID Number** - This number is usually the employee's social security number, but specific employee ID numbers may also be used.
2. **Name** – Last name first. Again, **No comma separating, only a space.**
3. **Category** – These are discernible subgroups within your census. Generally, these categories will be divided between executives, management and non-management. More specific subgroups can be divided by turnover rates, compensation growth rates, participant growth rates, differences in average salaries, etc. If there are no discernible subgroups, then a single category is acceptable. The categories should be numbered 1,2,3...etc. The definition of each category should be included with the Additional Information category below.
4. **Gender**
5. **Date of Birth**
6. **Date of Hire**
7. **Date of Participation** – The date the individual joined the plan. This will be the plan implementation date for your census.
8. **Annual Compensation**

*Example of the foregoing:*

ID#	Name	Category	Gender	DOB	DOP	Ann. Comp.
555-55-5555	Doe John	1	M	10/23/62	1/1/00	35715

**Additional Information** – Please define each category from the Category section above. As of what date are we performing this RLS? What had been contributed as of that date? What had been allocated as of that date? What is the plan for future contributions? Will additional stock contributions come from existing shares or newly issued shares? Who should we contact with any additional questions?