MassMutual
Pension Resource Center

Retirement Plan Fact Finder

ABOUT THIS RETIREMENT PLAN FACT FINDER:

This Retirement Plan Fact Finder will assist you in the initial stages of information gathering in order to generate a customized provider analysis and/or investment monitoring report, as well as a plan design review of ERISA plan types.

The team at the Pension Resource Center will review the data provided in this Retirement Plan Fact Finder and schedule a one on one consultation with you to outline next steps. We leverage a sophisticated provider analysis and investment monitoring system to generate options for the plan sponsor to consider. The following reports are available:

Provider Analysis
Our process allows you to compare the cost and quality aspects of your client's current service provider against the capabilities of other bidding providers. Comparisons from **live** provider RFP responses include a plan's complexity, parameters, investment lineup considerations and service requirements.

The final benchmarking report provides side-by-side comparisons of provider costs and services to isolate differences in a variety of key areas.

Fiduciary Investment Review
Our approach combines sophisticated, institutional measurement techniques with an easy to understand 10-point pass/fail scoring process. We break down the individual elements of success that distinguish superior investment options within a particular asset class.

Sample Investment Policy Statement (IPS)
Used in conjunction with the Fiduciary Investment Review.

Plan Design Review
We can provide you with the tools to present plan design elements that will drive employee participation and engagement to help ensure that employees are being steered in a desired direction… towards the path to successful retirement outcomes.

AFTER COMPLETION:

Click on the "Submit Completed Form" button on the top right of page 1 and email the required supporting documents; or scan and email the retirement plan fact finder with supporting documents to the Pension Resource Center. Our email address is **mprcsales@massmutual.com**

QUESTIONS?

If you have any questions about the Retirement Plan Fact Finder, or if you need assistance in completing this form, please call the Pension Resource Center at 1-800-842-4015.

Pension Resource Center - Retirement Plan Fact Finder

Submit Completed Form

REPRESENTATIVE INFORMATION

Name ______________________________

Address ______________________ City ______________ State ______ Zip ________

Phone ______________ Email ______________________________

Agency # ____________

Type of Sale: ☐ Education Only with Institutional 3(21) Fiduciary Service ☐ Education Only with Institutional 3(38) Fiduciary Service

Requested Commission: ________ Upfront ________ Trail

Type of Sale: ☐ MML Plan Solutions

Requested Advisory Fee: Basis Points ______ or Flat Dollar Amount $ ________

Do you plan to split compensation with other Representatives? If yes, list Representatives and % of split.

Representative Name ______________________ % of Compensation

Representative Name ______________________ % of Compensation

CLIENT INFORMATION

Plan Name ______________________________

Trust Name *(if different that Plan Name)* ______________________________

Address ______________________ City ______________ State ______ Zip ________

Contact Name & Title ______________________ Plan Sponsor/Client Federal Tax ID ______________

For-Profit Entity Type ☐ Corporation ☐ Union ☐ Partnership ☐ Sole Proprietorship

Not- For-Profit Entity Type ☐ IRC 501(c)(3) ☐ Church ☐ Healthcare ☐ Governmental ☐ Other ______________

CURRENT PLAN INFORMATION

Current Provider ______________________________

Current Product Name ______________________________

Plan Type *(Note: More than one may apply.)*

☐ 403(b) ERISA ☐ Church Plan (ERISA exempt) ☐ SIMPLE IRA ☐ 457(b) Governmental ☐ Defined Benefit

☐ 403(b) non ERISA ☐ 401(a) Profit Sharing ☐ SEP/IRA ☐ 457(b) Select Group ☐ Other ____________

☐ 403(b) Church Plan (ERISA) ☐ 401(a) Money Purchase ☐ 401(k) ☐ 457(b) Tax Exempt

Proposal Type ☐ Start-Up ☐ Takeover ☐ Existing client due diligence

If Start-Up

Desired Plan Type ☐ Defined Contribution ☐ Defined Benefit

Estimated Annual Contributions ______________________

Number of Expected Eligible Employees ______________________

If Takeover, are you the current broker of record? ☐ Yes ☐ No

Current Assets in Plan ______________________

Annual Employer Contributions ______________________

Annual Employee Contributions ______________________

Number of Participants with Balances ______________________

Number of Eligible Participants ______________________

If surrender charges apply, please include dollar amount ______________________

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REQUESTED REPORTS

☐ Provider Analysis
Please provide current 408(b)(2) fee disclosure statement with current assets broken down by fund.

☐ Fiduciary Investment Review
Please provide current 408(b)(2) fee disclosure statement with current assets broken down by fund.

☐ Sample Investment Policy Statement (IPS)

☐ Plan Design Review
Please provide a complete employee census.

RECORDKEEPING/ADMINISTRATION

Prefer Fully Bundled Solution	☐ Y	☐ N
Prefer Unbundled Solution *Does the Plan Sponsor have a specific Third Party Administrator it would prefer to use?* ☐ Yes ☐ No *If yes, specify* ____	☐ Y	☐ N
Plan Sponsor wants their current provider to be included in the comparison report	☐ Y	☐ N

ADDITIONAL COMMENTS