PSATS Pennsylvania Municipalities Pension Trust

DISCLOSURE FORM

1) State the names and titles of each individual in your firm who will be providing professional services to the Trust including, if any, outside advisors or subcontractors; and describe the responsibilities of each named individual.

A. Diane L. Calhoun, Director of Insurance Services, 
Pennsylvania State Association of Township Supervisors 
Provides overall administration of the pension program. Works with members to establish a new pension plan or to upgrade a current plan. Provides members with reports, cost sheets, state forms and other pension information. Corresponds with state auditors.

B. Joseph F. Bonasera, President 
Summit Financial Corporation 
Provides overall administration of the PSATS Pension Trust. Communicates with and educates township officials in the decision-making process of investing the plan assets. Oversees the Investment Due Diligence on trust assets. Assists the Board of Trustees with the fund selection and monitoring process.

C. Jason A. Denton, Senior Retirement Consultant 
Summit Financial Corporation 
Provides actuarial services for the PSATS Pension Trust participants by preparing the following:

i. Customized pension plan quotes
ii. Completion of Actuarial Valuation reports and Individual Retirement Illustration reports
iii. Preparation of Minimum Municipal Obligation forms
iv. Preparation of Act 205 forms
v. Completion of requests for audit information
vi. Calculation of monthly benefit payments
vii. Consult with township officials on any plan issue, Act 44 requirements, etc.

D. Michelle Seesholtz, Case Service Specialist – Retirement Services 
Nationwide 
Main contact for service to the PSATS Pension Trust

2) State whether any of the above named individuals, or your firm

▷ Is a current or former official or employee of the Trust, or any Pennsylvania municipality  No

▷ Is or has been a registered federal or state lobbyist  No
What are the responsibilities of each individual named above with regard to the proposed contract? Same as #1

3) If the answer in either case is ‘yes’, explain the circumstances, including dates of employment. Not applicable

4) Confirm that resumes of any of the above named individuals will be provided upon request. Yes

5) Confirm that any information provided in this form will be updated annually and if and when changes occur. Yes

6) State whether your firm has provided employment or compensation to any third party intermediary, agent, or lobbyist to directly or indirectly communicate with the Trust or any participating municipality in connection with any transaction or investment involving your firm and the Trust or any Pennsylvania municipality. No

7) State whether your firm, or any agent, officer, director, or employee of your firm has solicited or made a contribution to any Pennsylvania municipal official or candidate for Pennsylvania municipal office or to the political party or political action committee of such an official or candidate. No

8) State whether, following the advertisement of the Request for Proposal by the Trust, your firm has caused or knowingly allowed any third party to communicate with the Trust about the award of a professional services contract, except for requests for technical clarification. No

9) State whether your firm, or any affiliated entity, has made a contribution within the previous two years to the Trust, or to trustee, or to any Pennsylvania municipal official, or candidate for Pennsylvania municipal office in a Pennsylvania municipality which controls the Trust. State the dates of any such contributions. No

10) State whether your firm, or any affiliated entity, has any direct financial commercial or business relationship with any official of the Trust or municipality, which controls the Trust. None

11) State whether your firm or any affiliated entity has offered or conferred a gift of more than nominal value to any official, employee, or fiduciary of the Trust or any municipality, which controls the Trust. No

12) State and disclose all contributions made by your firm or any affiliated entity which meet the following criteria: None

   i. The contribution was made within the last five years
ii. The contribution was made by an officer, director, executive-level employee or owner of at least 5% of your firm or affiliated entity

iii. The amount of the contribution was at least $500 in a form of:
   a) A single contribution by a person included in subparagraph ii.
   b) The aggregate of all contributions by all persons in subparagraph ii.

iv. The contribution was made to:
   a) a candidate for any public office in the Commonwealth or to an individual who holds that office.
   b) a political committee of a candidate for public office in the Commonwealth or of an individual who holds that office.

The information provided under this item shall be updated annually.

13) State the following information with respect to all persons identified as contributors in the preceding sub-paragraph: Not applicable

   Name and address of the contributor
   The contributor's relationship to your firm
   The name and office or position of each person who received a contribution
   The amount of the contribution
   The date of the contribution

14) State and disclose any gifts to an official, or employee of the Trust or any municipality, which controls the Trust.

None

15) State whether your firm employs or retains any third party intermediary agent or lobbyist; and that person's duties.

No

16) State whether there exists any financial relationship between your firm, or any affiliated entity, and any official of the Trust or of a municipality, which controls the Trust.

No

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Pension Trust

By [Signature]
Date November 21, 2013