



PAYROLL DEDUCTION IRA PROGRAM

EMPLOYER ESTABLISHMENT GUIDE

STEP 1 EMPLOYER PROFILE

Company Name

Contact Name

Address 1

Address 2

City

State

Zip

Telephone Number

Ext.

Fax

Email

Website

PAYROLL CONTACT PERSON

Payroll Processing Contact Name

Telephone Number

Ext.

Email

STEP 2 PAYROLL PROCESS

Does the Employer use a third party payroll provider? Yes No

If yes, provide payroll provider information:

Payroll Provider Name

Telephone Number

Ext.

Email

STEP 3 PAYROLL DEDUCTION IRA OPTION

Aspire Financial Services, LLC offers the two Payroll Deduction IRA options described below. Please select which Payroll Deduction IRA will be offered to your employees:

<input type="checkbox"/> OPEN ARCHITECTURE PAYROLL DEDUCTION IRA	<input type="checkbox"/> PAYROLL DEDUCTION IRA WITH FUND MENU
Investments: The open architecture payroll deduction IRA option allows employees to choose from thousands of investment options available through the account's custodian, Matrix Trust Company.	Investments: The payroll deduction IRA with fund menu option allows employees to choose from a smaller menu of diverse investment options. The current investment options are listed in the Payroll Deduction IRA with Fund Menu Application & Agreement and may be updated from time to time.
Enrollment: Employees open their IRAs by completing the Payroll Deduction IRA Application & Agreement available at: https://www.aspireonline.com/docs/default-source/form-library/payroll-deduction-ira-application-agreement-mg-trust.pdf?sfvrsn=16 .	Enrollment: Employees open their IRAs by completing the Payroll Deduction IRA with Fund Menu Application & Agreement available at: https://www.aspireonline.com/docs/default-source/form-library/pd-ira-with-fund-lineup-application-and-agreement.pdf?sfvrsn=6 .
Fees: Fees for the Open Architecture Payroll Deduction IRA include an Annual Maintenance Fee of \$40.00 and an Annual Custody and Administration Fee of 0.15% of the value of the account, plus transactional fees as outlined in the Payroll Deduction IRA Application & Agreement.	Fees: Fees for the Payroll Deduction IRA with Fund Menu include an Annual Maintenance Fee of \$40.00 and an Annual Custody and Administration Fee of 0.20% of the value of the account, plus transactional fees as outlined in the Payroll Deduction IRA with Fund Menu Application & Agreement.

STEP 4 AGREEMENT

By completing and signing this document, the Employer is designating the persons and entities listed above to act on behalf of the Employer with regard to the payroll deduction IRA program the Employer is establishing with Aspire Financial Services, LLC ("Aspire"), and is authorizing Aspire to rely on information and direction from these persons and entities with regard to the payroll deduction IRA program. The Employer acknowledges and agrees that it is not opening an account relationship with Aspire, but is establishing administrative processes for a payroll deduction IRA program for its employees. The Employer represents and warrants that it will ensure that employees' payroll deduction contributions are transmitted to the IRA custodian completely, correctly, and in a timely manner and that all information necessary for Aspire to process the contributions will be transmitted to Aspire clearly, completely, correctly, and in a timely manner. The Employer agrees to indemnify and hold harmless Aspire, its affiliates, and the officers, directors, employees, agents, successors, and assigns of each, from any liability that may result from failure of the Employer (or its agents) to transmit contributions and information clearly, completely, correctly, and in a timely manner or Aspire's (or Aspire's agents') reliance on the completeness, correctness, and timeliness of the contributions and information transmitted by the Employer or its agents.

Agreed to, on behalf of the Employer, by:

▶

Signature

- -

Date (month | day | year)

Printed Name

Title

Upload this form through the form submission tool at www.aspireonline.com/resources/forms-submission-tool or **Questions?** Call Client Services at 866.634.5873, M - F, 8am - 8pm EST

ACH Authorization Form

Employer Name

On behalf of the Employer, I hereby authorize Aspire, to initiate debit entries and/or correction entries to the bank and account number referenced below.

Bank Name

Name(s) on Bank Account

Account Type:

Checking

Savings

Bank Address

City

State

Zip

Routing Number

Account Number

Authorized by:

▶

Signature

- -

Date (month | day | year)

Printed Name

Title

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