

Filing Authorization
for the 2017 Form 5500 / Form 5500-SF

Name of Plan: «Plan_Name»

EIN / PN: «Tax_ID_Number» / «IRS_Number»

Plan Year Ending: «Plan_Year_End»/2017

PART I Authorization of Practitioner to Electronically Sign and File

I hereby authorize Professional Pension Planners, Inc. to electronically sign and file the above-named return/report through EFAST2.

I understand that in granting this authority:

- I/we must manually sign and date page 1 of the Form 5500 and / or page 1 of Form 5500-SF and provide a scanned copy of that signature page to Professional Pension Planners, Inc. before the electronic filing can be initiated;
- Professional Pension Planners, Inc. will retain a copy of this written authorization in its records;
- Professional Pension Planners, Inc. will notify the individual(s) signing below as plan administrator/employer about any inquiries and information it receives from EFAST2, DOL, IRS, or PBGC regarding this annual return/report; and
- A copy of my signature, as it appears on page 1 of the Form 5500 and / or page 1 of Form 5500-SF, will be included with the return/report posted by the Department of Labor on the Internet for public disclosure.
- Professional Pension Planners, Inc. shall not be deemed an administrator or other fiduciary with respect to any Plan solely on account of the services performed under this authorization.

This authorization is applicable only to the filing for the above-named Plan and applies only for Plan year end stated above.

Plan Administrator: _____ Date: _____

Employer/Plan Sponsor: _____ Date: _____

PART II Acknowledgement of Receipt of Authorization

On behalf of Professional Pension Planners, Inc., I hereby certify that the firm will use the authority granted only for the express purposes described above; that the firm will not disclose confidential information to any parties other than the DOL, as required for EFAST filing; and that the firm will take reasonable steps to assure that confidential information provided by the Plan Administrator or Plan Sponsor is protected from unauthorized disclosure.

For Professional Pension Planners, Inc.: _____ Date: _____

Mark Sadoff, Vice President

The forms will be available on the website after we receive and process these forms. To view the signed Form 5500 go to www.efast.dol.gov. Go to: Filings Form 5500.5500-SF Search.

The designated service provider must retain this authorization.

Do not submit this form to the DOL unless requested to do so.