

Email completed forms ONLY to: CompletedInvestmentChangeForms@AspireOnline.com. Email questions/inquiries to: InvestmentAdmin@AspireOnline.com. Please note the email for Completed Investment Forms is ONLY for completed request forms – it is not for questions, inquiries, etc. All questions/inquiries, including status updates on existing requests, should be sent to the Investment Admin email.



Model Portfolio Update Form - Investlink

Please note that options on this form will NOT affect standalone investment balances or elections. If changes are needed for standalone options, the Standalone Investment Update Form must be completed.

STEP 1 PLAN INFORMATION

Plan Name	Plan ID

*If changes are needed for more than seven plans, fill out the "Plan List" tab of the Model Portfolio Update Template.

STEP 2 IMPLEMENTATION DATE (MUST be a minimum of seven (7) business days from date of submission to Aspire to allow for processing time)

NOTE: The implementation date requested is dependent on forms being submitted in good order. Forms with missing or incomplete information may result in a delay in the requested implementation date.

PLEASE IMPLEMENT THE REQUESTED CHANGES EFFECTIVE AS OF:

- -
 Date (month | day | year)

STEP 3 ADDING NEW MODEL PORTFOLIO(S) ***REQUIRED*** (Select Only One Option)

- No model portfolio additions.
- Add the model portfolio(s) in the completed "Add New Model(s)" tab of the attached Model Portfolio Update Template as investment options for the plan(s) listed in Step 1.

STEP 4 MODEL PORTFOLIO NAME CHANGE(S) ***REQUIRED*** (Select Only One Option)

- No model portfolio name changes.
- Update the model portfolio name(s) based on the completed "Name Changes" tab of the attached Model Portfolio Update Template for the plan(s) listed in Step 1. If updates are being requested in Step 5 and/or Step 6, the NEW model portfolio name(s) must be used for those sections.

STEP 5 UPDATING INVESTMENTS INSIDE A MODEL PORTFOLIO ***REQUIRED*** (Select Only One Option)

If model portfolio name changes were requested in Step 4, the NEW model portfolio names must be used when completing the Model Portfolio Update Template.

- No updates to investments inside a model portfolio.
- Replace investments inside a model portfolio based on the completed "Replacements" tab of the attached Model Portfolio Update Template. This will result in 100% liquidation of the investment's balance within the designated model portfolio(s) with the proceeds from that liquidation being invested 100% into the replacement investment within the model portfolio(s) for the plan(s) listed in Step 1. This will also update the allocation of future money coming into the model portfolio(s) for the plan(s) listed in Step 1.
- Reallocate and rebalance the model portfolio(s) based on the completed "Updated Allocation(s)" tab of the attached Model Portfolio Update Template. This will result in liquidation of investment balances in the model portfolio necessary to purchase investments in the percentages specified. This will also update the allocation of future money coming into the model portfolio(s) for the plan(s) listed in Step 1.

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STEP 6 AUTO REBALANCING FOR MODEL PORTFOLIOS *REQUIRED*** (Select Only One Option)**

Selecting an auto rebalance option will result in all underlying investment balances within the specified model portfolio being rebalanced to the model allocations that exist AT THE TIME of the rebalance.

If model portfolio name changes were requested in Step 4, the NEW model portfolio names must be used when completing the Model Portfolio Update Template.

- No updates.
- Update all models in the completed "Auto Rebalance" tab of the attached Model Portfolio Update Template for the plan(s) listed in Step 1 to:

*****REQUIRED*** (Select Only One Option)**

<u>Frequency</u>	<u>Will occur on or around</u>
<input type="checkbox"/> No Auto rebalance	n/a
<input type="checkbox"/> Quarterly	3/15, 6/15, 9/15, 12/15
<input type="checkbox"/> Semi-Annual	6/15, 12/15
<input type="checkbox"/> Annual	12/15

STEP 7 CONTACT INFORMATION

- Aspire will contact the person named in this Step 7 within two (2) business days to confirm receipt of the request. If you are not contacted by Aspire within two (2) business days after submitting your request, you must notify Aspire immediately.
- Aspire will notify the person named below upon completion of the requested changes. If you do not receive this notification within ten (10) business days following the requested effective date of the changes, you must notify Aspire immediately.
- Upon receipt of the notice from Aspire that the changes have been completed, you are responsible for promptly reviewing the changes the changes made by Aspire and are responsible for notifying Aspire within ten (10) business days of any errors or issues related to the changes processed.
- Upon the expiration of the ten (10) business day period following the notice that the changes have been completed, all changes will be deemed to have been completely correctly by Aspire, and Aspire shall have no obligation to pay any amounts necessary to correct an error or issue later discovered.

Name (required): _____

Email Address (required): _____

Phone Number: _____

STEP 8 SIGNATURE & ACCEPTANCE

By signing below, the signer represents and warrants that he or she is duly authorized to execute this form on behalf of the applicable Advisory Firm or Strategist Firm and that, on behalf of the Advisory Firm or Strategist Firm, he or she represents and warrants that:

- i. all required notices related to the requested changes have been provided to all applicable persons/entities;
- ii. the requesting person/entity has the requisite authority to make the changes requested on this form;
- iii. the changes requested on this form are not prohibited by the affected plans' governing documents or applicable law, regulation, or agreement;
- iv. the requesting party understands and agrees with the responsibilities outlined above; and
- v. the requesting party will indemnify and hold harmless Aspire Financial Services, LLC ("Aspire"), Aspire's affiliates, and the shareholders, directors, officers, employees, agents, successors, and assigns of each, for any claims arising out of Aspire's implementation of the requested changes or for failure to correct any error or issue of which Aspire did not receive notice within ten (10) business days.

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Date (month | day | year)

Signature of Person Representing Advisory Firm or Plan Sponsor

Printed Name of Signer _____

Title _____

Name of Advisory Firm or Plan Sponsor _____

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