

**CERTIFICATION REGARDING INTERIM AMENDMENTS**

Under penalties of perjury, I hereby certify to the best of my knowledge and belief that all necessary interim amendments required by the Internal Revenue Service to retain the qualified status of my Pre-Approved Plans (formerly known as master and prototype plans and volume submitter specimen plans) have been made a part of such Pre-Approved Plans timely and communicated timely to all my adopting employers.

\_\_\_\_\_  
Type or print name of Pre-Approved Plan Provider

Signed \_\_\_\_\_  
(person authorized to sign for Pre-Approved  
Plan Provider)

\_\_\_\_\_  
Type or print name of authorized person

Dated \_\_\_\_\_