ACT 44 DISCLOSURE FORM FOR ENTITIES PROVIDING

PROFESSIONAL SERVICES TO THE

PLUM BOROUGH MUNICIPAL AUTHORITY EMPLOYEES' PENSION SYSTEM

CHAPTER 7-A OF ACT 44 OF 2009 MANDATES the annual disclosure of certain information by every entity

(hereinafter "Contractor") which is a party to a professional services contract with one of the pension

funds of PLUM BOROUGH MUNICIPAL AUTHORITY (hereinafter the "Requesting Municipality"). Act 44

disclosure requirements apply to *Contractors* who provide professional pension services and receive

payment of any kind from the Requesting Municipality's pension fund. The Requesting Municipality

has determined that your company falls under the requirements of Act 44 and must complete this

disclosure form. You are expected to submit this completed form, to the Requesting Municipality below,

by <u>December 1, 2022</u>. If, for any reason you believe that Act 44 does not require you to complete this

disclosure form, please provide a written explanation of your reason(s) by November 15, 2022.

RETURN COMPLETED

DISCLOSURE TO: Howard Theis, Manager

Plum Borough Municipal Authority

4555 New Texas Road

Plum, PA 15239-1197

REQUIRED UPDATES:

Where noted, information in this form must be updated in writing as changes occur.

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DEFINITIONS FOR DISCLOSURE

TERM:	DEFINITION:			
CONTRACTOR	Any person, company, or other entity that receives payments, fees, or any other form of compensation from a municipal pension fund in exchange for rendering professional services for the benefit of the municipal pension fund.			
SUBCONTRACTOR OR ADVISOR	Anyone who is paid a fee or receives compensation from a municipal pension system – directly or indirectly from or through a contractor.			
AFFILIATED ENTITY	 Any of the following: A subsidiary or holding company of a lobbying firm or other business entity owned in whole or in part by a lobbying firm. An organization recognized by the Internal Revenue Service as a tax-exempt organization under section 501(c) of the Internal Revenue Code of 1986 (Public Law 99-514, 26 U.S.C. § 501 (c)) established by a lobbyist or lobbying firm or an affiliated entity. 			
Contributions	As defined in section 1621 of the act of June 3 rd , 1937 (P.L. 1333, No. 320), known as the Pennsylvania Election Code			
POLITICAL COMMITTEE	As defined in section 1621of the act of June 3 rd , 1937 (P.L. 1333, No. 320), known as the Pennsylvania Election Code			
EXECUTIVE LEVEL EMPLOYEE	 Any employee or person or the person's affiliated entity who: Can affect or influence the outcome of the person's or affiliated entity's actions, policies, or decisions relating to pensions and the conduct of business with a municipality or a municipal pension system; or Is directly involved in the implementation or development policies relating to pensions, investments, contracts or procurement or the conduct of business with a municipality or municipal pension system. 			
MUNICIPAL PENSION SYSTEM	Any qualifying pension plan, under Pennsylvania state law, for any municipality within the Commonwealth of Pennsylvania; includes the Pennsylvania Municipal Retirement System. Example: the Police Pension Plan for the Borough of Winchesterville			
MUNICIPAL PENSION SYSTEM OFFICIALS AND EMPLOYEES; MUNICIPAL OFFICIALS AND EMPLOYEES	Specifically, those listed in Table 2 titled: "List of Pension System and Municipal Officials and Employees" on the next page. Where applicable, includes any employee of the Requesting Municipality.			
PROFESSIONAL SERVICES CONTRACT	A contract to which the municipal pension system is a party that is: (1) for the purchase of professional services including investment services, legal services, real estate services, and other consulting services; and, (2) not subject to a requirement that the lowest bid be accepted.			

List of Municipal Officials for the Requesting Municipality

Certain requests for information in this form will refer to a "List of Municipal Officials."

To assist you in preparing your answers, you should consider the following names to be a complete list of pension system and municipal officials and employees. Throughout this Disclosure Form, the below

names will be referred to as the "List of Municipal Officials."

James C. Rumbaugh – Chairman

William Bonura - Vice Chairman

Dennis Hydock – Treasurer

William Fenk – Board Member

Keith Nowalk – Board Member

James Sandella – Board Member

Howard Theis - Non-voting Secretary/Manager

IDENTIFICATION OF CONTRACTORS & RELATED PERSONNEL

CONTRACTORS: (See "**Definitions**" – page 2) Any entity who currently provides service(s) by means of a Professional Services Contract to the Municipal Pension System of the **Requesting Municipality**, please complete all of the following:

Identify the Municipal Pension System(s) for which you are providing information:				
Indicate all that apply with an "X":	Х	Non- Uniform Plan		Police Plan
		Fire Plan		
**NOTE: For all that follow, you mattach it to this Disclosure if the space you are responding to by the appropri	e provi	ided is not sufficient. I	Please	reference each question / item
subcontractors of the Contractor,	dentifie identif	ed above. Also include ying them as such. Aft	the na er each	essional services to the Requesting mes and titles of <u>any advisors and</u> name provide a description of the being provided to each designated
Jerry Witt – acting solely in his c	capacit	ty as Client Service Man	iager w	vith Principal Life
2. Please list the name and title of disclosure; after each name, includ				
N/A				
 Are any of the individuals named in Requesting Municipality? IF "YES", provide the name and employment. 				
NO				
4. Are any of the individuals named	in Iten	n 1 or Item 2 above a c	urrent (or former registered Federal or State

No

date of their most recent registration /renewal.

F "YES", provide the name of the individual, specify whether they are a state or federal lobbyist, and the

- 5. Since December 17th 2009, has the *Contractor* or an *Affiliated Entity* paid compensation to or employed any third party intermediary, agent, or lobbyist that is to directly or indirectly communicate with an official or employee of the *Municipal Pension System* of the **Requesting Municipality** (OR), any municipal official or employee of the **Requesting Municipality** in connection with any transaction or investment involving the *Contractor* and the Municipal Pension System of the **Requesting Municipality**?
 - <u>This question does not apply</u> to an officer or employee of the *Contractor* who is acting within the scope of the firm's standard professional duties on behalf of the firm, including the actual provision of legal, accounting, engineering, real estate, or other professional advice, services, or assistance pursuant to the professional services contact with municipality's pension system.
- → IF "YES", identify: (1) whom (the third party intermediary, agent, or lobbyist) was paid the compensation or employed by the *Contractor* or *Affiliated Entity*, (2) their specific duties to directly or indirectly communicate with an official or employee of the *Municipal Pension System* of the **Requesting Municipality** (OR), any municipal official or employee of the **Requesting Municipality**, (3) the official they communicated with, and (4) the dates of this service.

No

- 6. Since December 17th 2009, has the *Contractor*, or any agent, officer, director or employee of the *Contractor* solicited a contribution to any municipal officer or candidate for municipal office in the **Requesting Municipality**, or to the political party or political action committee of that official or candidate?
- → IF "YES", identify the agent, officer, director or employee who made the solicitation and the municipal officials, candidates, political party or political committee who were solicited (to whom the solicitation was made).

No

- 7. Since December 17th, 2009: Has the *Contractor* or an *Affiliated Entity* made any contributions to a municipal official or any candidate for municipal office in the **Requesting Municipality**?
- → IF "YES", provide the name and address of the person(s) making the contribution, the contributor's relationship to the Contractor, The name and office or position of the person receiving the contribution, the date of the contribution, and the amount of the contribution.

No

- 8. Does the *Contractor* or an *Affiliated Entity* have any direct financial, commercial or business relationship with any official identified on the *List of Municipal Officials*, of the **Requesting Municipality?**
- **IF "YES"**, identify the individual with whom the relationship exists and give a detailed description of that relationship.

NOTE: A written letter is required from the **Requesting Municipality acknowledging the relationship and consenting to its existence. The letter must be attached to this disclosure. Contact the **Requesting Municipality** to obtain this letter and attach it to this disclosure before submission.

No

- 9. Has the *Contractor* or an *Affiliated Entity* given any gifts having more than a nominal value to any official, employee or fiduciary specifically, those on the *List of Municipal Officials* of the **Requesting Municipality?**
- **IF "YES"**, Provide the name of the person conferring the gift, the person receiving the gift, the office or position of the person receiving the gift, specify what the gift was, and the date conferred.

No

- **10.** Disclosure of contributions to any political entity in the Commonwealth of Pennsylvania **Applicability:** A "yes" response is required and full disclosure is required **ONLY WHEN ALL** of the following applies:
 - a) The contribution was made within the last 5 years (specifically since: December 18th 2004)
 - b) The contribution was made by an officer, director, executive-level employee or owner of at least 5% of the *Contractor* or *Affiliated Entity*.
 - c) The amount of the contribution was at least \$500 and in the form of:
 - 1. A single contribution by a person in (b.) above, <u>OR</u>
 - 2. The aggregate of all contributions all persons in (b.) above;
 - **d)** The contribution was for
 - 1. Any candidate for any public office or any person who holds an office in the Commonwealth of Pennsylvania;
 - 2. The political committee of a candidate for public office or any person that holds an office in the Commonwealth of Pennsylvania.
- IF "YES", provide the name and address of the person(s) making the contribution, the contributor's relationship to the *Contractor*, The name and office or position of the person receiving the contribution (or the political entity / party receiving the contribution), the date of the contribution, and the amount of the contribution.

No

11. With respect to your provision of professional services to the Municipal Pension System of the **Requesting Municipality:**

Are you aware of any apparent, potential or actual conflicts of interest with respect to any officer, director or employee of the *Contractor* and officials or employees of the **Requesting Municipality?**

NOTE: If, in the future, you become aware of any apparent, potential, or actual conflict of interest, you are expected to update this **Disclosure Form** immediately in writing by:

- Providing a brief synopsis of the conflict of interest (and);
- An explanation of the steps taken to address this apparent, potential, or actual conflict of interest.
- F "YES", Provide a detailed explanation of the circumstances which provide you with a basis to conclude that an apparent, potential, or actual conflict of interest may exist.

No

12. To the extent that you believe that **Chapter 7-A of Act 44 of 2009** requires you to disclose any additional information beyond what has been requested above, please provide that information below or on a separate piece of paper.

N/A

Please provide the name(s) and position(s) of the person(s) participating in the completion of this Disclosure. **One of the individuals** identified by the *Contractor* in *Item #1* above <u>must participate</u> in completing this Disclosure and must sign the below verification attesting to the participation of those individuals named below.

Name: Jerry Witt

Position: Client Service Manager

SIGNATURE

CLIENT SERVICE MANAGER

TITLE

10/26/2022

DATE

VERIFICATION

I, <u>Jerry Witt</u> , hereby state that I are (Name)	n a <u>Client Service Manager</u> for (Position)					
_ <u>Principal</u> and I am authorize (Contractor)	ed to make this verification.					
I hereby verify that the facts set forth in the foregoing A	act 44 Disclosure Form for Entities Providing					
Professional Services to Plum Borough Municipal Autho	rity Pension System are true and correct to the					
best of my knowledge, information and belief. I also	understand that knowingly making material					
misstatements or omissions in this form could subject the responding Contractor to the penalties in						
Section 705-A(e) of Act 44.						
I understand that false statements herein are made subject to the penalties of 18 P.A.C.S. § 4904						
relating to unsworn falsification to authorities.						
	funjt					
	Signature					
	10/26/2022					
	Date					