Please tell us about the Participating Employer, which unless noted shall also be the Plan Sponsor:

Name of	Town of Juno Beach	Individual to Receive	Emily Alves
Government Entity		Plan Notices	
Address	340 Ocean Drive	Title	Finance/HR Director
Address		Telephone	(561) 656-0320
City, State Zip	Juno Beach, FL 33408	Email	ealves@juno-beach.fl.us
Your Plan Administrate	or is:	Contacts:	
Florida League of Cities	s. Inc.	Jeremy Button, Senior Analyst	. ibutton@flcities.com
301 S. Bronough Street		Rodney Walton, Account Exec	· •
P.O. Box 1757		Phone: (850) 222-9684	· · · · · · · · · · · · · · · · · · ·
Tallahassee, Florida 32	302	Fax: (850) 222-3806	
	DISC	LOSURE OF OTHER 401(a) PLAN(S)	
have one or more de			tion plan(s). If the Participating Employer does n name, name of the provider, and such other
	TYPE (OF ADOPTION AND EFFECTIVE DATE	
Section 401(a), as ap ("FMPTF") § 401(a) D	oplicable to a governmental qualifie	d defined contribution plan, and is par ("Plan"). By adopting this Adoption Agr	comply with Internal Revenue Code ("Code") tof the Florida Municipal Pension Trust Fund eement, the Participating Employer is adopting
This Adoption Agreen	ment is for the following purpose (ch	eck one):	
	· ·		ing Employer for its Employees effective greement, but not earlier than the beginning of
(insert effe adopted). 1	ctive date of this Adoption Agreem This Adoption Agreement is intended which was originally effective <u>June 29</u>	nent, but not earlier than the beginning I to amend and replace the Adoption Agr	pating Employer, to be effective March 27, 2025 g of the plan year in which the amendment is eement previously adopted by the Participating revious Adoption Agreement, as follows (please
☐ This is Agreer	_	more of the Participating Employer's o	ontribution elections in the existing Adoption
☐ Other	(must specify elective provisions in t	his Adoption Agreement that are being	changed):

This is an amendment and restatement of another defined contribution plan of the Participating Employer, effective

replace and serve as an amendment and restatement of the Participating Employer's preexisting plan, which became effective on

it is the Participating Employer's responsibility to ensure that the preexisting plan met all applicable state and federal requirements.

(insert effective date of this Adoption Agreement). This Adoption Agreement is intended to

_____ (insert original effective date of preexisting plan). The Participating Employer understands that

	SELECTION OF INVESTMENT OPTIONS				
NOTE: All investment selections are subject to the approval of the Master Trustees of the Florida Municipal Pension Trust Fund ("Master Trustee") and governed by the Basic Plan Document, the Master Trust Agreement, and the FMPTF Investment Policy.					
You seled	ct the following investment option (check one):				
	Master Trustee will select Investment option(s) in accordance with provisions of the participating defined contribution plans. The Master Trustee may establish one (1) or more investment options within the Defined Contribution Pension Plan Trust, each option being hereinafter referred to as an "investment option." The Master Trustee shall manage, acquire or dispose of the assets in an investment option in accordance with valid specific investment directions given by the Participating Employers or Participating Employees. The Master Trustee shall establish at least one (1) default investment option in the absence of valid Participating Employer or Participating Employee investment direction. From time to time, the Master Trustee may eliminate an investment option, and the proceeds thereof shall be reinvested in another investment option in accordance with the directions of the Master Trustee.				
	The Participating Employer will select and oversee investment options for the defined contribution plan through Open Architecture Investment. "Open Architecture Investment" means a Participating Employer that has been acknowledged through the Trust Joinder Agreement to select and oversee the investment options under and for the FMPTF 401(a) defined contribution retirement plan, rather than using the investment options selected by the Master Trustee. By selecting Open Architecture Investment, the Participating Employer acknowledges the Master Trustee and Plan Administrator are responsible for only the administrative services provided to the defined contribution plan. By selecting Open Architecture Investment, the Participating Employer accepts the responsibility for selecting and overseeing defined contribution plan investment option(s), including default investment option(s), rather than using the investment options selected by the Master Trustee. The Participating Employer acknowledges by the selection of Open Architecture Investment that neither the Plan Administrator nor the Master Trustee have any responsibility for and shall not have any liability relating to the selection or oversight of defined contribution plan investment options. The Master Trustee shall have no fiduciary duty or any liability for an investment option or any loss sustained by a Participating Employer, Participating Employee, Beneficiary, or Alternate Payee whose Account in whole or in part is invested through Open Architecture Investment. The Participating Employer is responsible for providing the Plan Administrator with all information and updates concerning selected investment option(s), including the default investment option(s), for the defined contribution plan.				
	PLAN PROVISIONS				
	<u>FLAIV PROVISIONS</u>				
	icipating Employer will use the FMPTF's § 401(a) Defined Contribution Retirement Plan Document. For any Plan choice that this Adoption ent fails to specify, the Participating Employer is deemed to have specified the first-displayed choice.				
Your Plai	n Year is:				
\boxtimes	October 1 – September 30				
	January 1 – December 31				
	Other (specify):				
	PAYROLL PERIOD				
The Payr	roll Period of the Participating Employer is:				
	Weekly Bi-weekly Semi-monthly Monthly Other (specify):				

	WHO'S ELIGIBLE			
Generally, the following Employee classes are allowed to participate in the Plan:				
	General Employees Police Officers Firefighters			
	AGE CONDITION			
An Emplo	byee is eligible if he or she has attained:			
\boxtimes	No age requirement			
	Age 16 Age 18			
	Age 21			
	SERVICE CONDITION			
An Emplo	byee is eligible if he or she has completed:			
\boxtimes	No service requirement			
	3 Months of Service as an otherwise Eligible Employee			
	1 Year of Service as an otherwise Eligible Employee Other (must specify):			
	EXCLUDED EMPLOYEES			
Every Em below:	aployee shares in Non-elective Contributions and Matching Contributions except an Employee who belongs to a classification specified			
	No excluded employees			
\boxtimes	Part-time Employees (specify definition of part-time if other than an Employee who normally works (or, if a schedule applies, is regularly			
	scheduled to work) less than 20 hours per week):			
	Other (must specify):			
<u>~</u>	Police department officers			

PARTICIPATING EMPLOYER CONTRIBUTIONS
A Participating Employer may make Non-elective Contributions and/or Matching Contributions as specified below. Non-elective Contributions and Matching Contributions that are tied to Payroll Periods (as defined in this Adoption Agreement) must be remitted to the Plan Administrator no later than 15 business days after the Payroll Period. Annual Contributions must be remitted to the Plan Administrator no later than 15 business days after the Plan Year. A Participating Employer may establish different classes of Employees for contribution purposes in this Adoption Agreement. The Participating Employer hereby elects to make Contributions as follows (choose one or both as applicable):
Non-elective Contributions – Participating Employer Non-elective Contributions will be made on the following basis (must specify): 10% non-elective employer contribution for employees without Town Manager title
15% non-elective employer contribution for employees with Town Manager title
Matching Contributions
Matching Contributions are Participating Employer Contributions that may be made to match all or a portion of a Participant's contribution to an eligible 457(b) deferred compensation plan (Employee Basic Contributions).
If the Participating Employer provides Matching Contributions, the amount of Matching Contributions made for a Participant each Plan Year will be (choose only one):
100% match, up to% of such Participant's Employee Contributions.
% of the Participant's Employee Basic Contributions, which cannot exceed% of the Participant's Compensation.
Other formula (requires approval from the FMPTF)
Non-elective Contributions and Matching Contributions in the year of termination
A Participant shall receive the Employer Contribution during the year of termination regardless of time completed, subject to the vesting schedule

MANDATORY EMPLOYEE CONTRIBUTIONS

If there are no Employee Contributions to **this** Plan, do not complete this Section.

A Participating Employer may require Employee Contributions to the Plan as specified below. A Participating Employer may also elect whether to pick-up the Employee Contributions to the Plan under Code Section 414(h)(2) (generally resulting in the contributions being made to the plan on a pre-tax basis). Employee Contributions must be remitted to the Plan Administrator no later than 15 business days after the Payroll Period. The Participating Employer hereby elects to require Employee Contributions as follows:

 2% mandatory employee contribution for employees without Town Manager title
 0% mandatory employee contribution for employee with Town Manager title

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- By checking this box, effective as of the date of this Adoption Agreement, the Participating Employer shall pick up the Employee

con Part of c	tributions to the Plan pursuant to Code Section 414(h)(2). The Employee Contributions, although designated as employee tributions, are being paid by the Employer to the Plan in lieu of contributions by the Employee. No contributions prior to the cicipating Employer's action shall be picked-up under the terms of this Adoption Agreement. Employees shall not be given the option hoosing to receive the contributed amounts directly instead of having them paid by the Employer to the Plan. The Employer's pick-of Employee Contributions shall be done under one of the following options:
	Salary Reduction Pick-up – The above contributions, even though designated as Employee Contributions, are being paid by the Employer on behalf of the Employee via a reduction in salary.
	Such contributions will not be included in the gross income of the Employees for certain tax reporting purposes, that is, for federal, state or local income tax withholding, until distributed from the Plan as a benefit. Such contributions will be included in the gross income of the Employees for FICA taxes when they are made.
	New Money Pick-up – The above contributions, even though designated as Employee Contributions, are being paid by the Employer on behalf of the Employee in addition to regular compensation as a supplemental contribution that is separate and distinct from the Employees' current or future contributions, and in lieu of contributions by the Employees.
	Such contributions will not be included in the gross income of the Employees for any tax reporting purposes, that is for federal, state, local income tax withholding, or FICA taxes, until distributed from the Plan as a benefit.

BENEFIT COMPENSATION
Benefit Compensation means the Participant's:
Benefit Compensation as defined in Provision 3.11 in the Basic Plan Document.
Other (must specify; requires approval from the FMPTF):
Compensation paid after Severance-from-employment.
A Participating Employer may elect to include certain post-severance payments in Benefit Compensation for purposes of computing Contributions under the Plan, but only if these amounts are paid no later than 2½ months after Severance-from-employment or, if later, the end of the calendar year that includes a Participant's Severance-from-employment. The Participating Employer makes the following election with respect to including post-severance payments in Benefit Compensation (Note: if the following is not completed, no post-severance payments will be included in Benefit Compensation by default):
No post-severance payments will be included in Benefit Compensation for purposes of computing contributions under the Plan (if this box is checked, skip to "Vesting for Participating Employer Contributions" below).
For purposes of calculating contributions under the Plan, the following post-severance payments will be included in Benefit Compensation, as long as they are paid no later than 2½ months after Severance-from-employment or, if later, the end of the calendar year that includes the Participant's Severance-from-employment. (check all that apply):
Regular compensation paid after Severance-from-employment for services rendered prior to severance during the Participant's regular work hours, which, absent a Severance-from-employment would have been paid to the Participant while the Participant continued in employment with the Participating Employer.
Post-severance payments for unused accrued bona fide sick, vacation or other leave, but only if the Participant would have been able to use the leave if employment had continued.

VESTING FOR PARTICIPATING EMPLOYER CONTRIBUTIONS

A Participating Employer may establish a vesting schedule for Participating Employer Non-elective Contributions and Matching Contributions. This

means that if the Participant leaves the Participating Employer's employment prior to completing a specified minimum period of service, the Participant forfeits the Participating Employer's Non-elective Contributions and Matching Contributions. However, upon Death, Disability, or the Termination of the Plan, the Participant is 100% vested in the Participant's Participating Employer Non-elective Contributions and Matching Contributions, notwithstanding any vesting schedule. If a vesting schedule is established, it is the Participating Employer's responsibility to calculate the Participant's service and report it to the Plan Administrator. The Participating Employer hereby elects the following:																
	eant with the title of Town Mar cions Account according to:	nager b	ecomes	Vested	in his o	r her Em	nployer	Non-ele	ective Co	ontribut	ions Acc	count	and Em	nployer	Matchi	ng
\boxtimes	Immediate vesting															
	The schedule marked below:															
	Years of Vesting Service	1	2	3	4	5	6	7	8	9	10]				
		***	***	***	***	***	***	***	***	***	***					
A Participant without the title of Town Manager becomes Vested in his or her Employer Non-elective Contributions Account and Employer Matching Contributions Account according to: Immediate vesting								'er								
\boxtimes	The schedule marked below:															
	Years of Vesting Service	1	2	3	4	5	6	7	8	9	10					
		0%	0%	0%	0%	100%	***	***	***	***	***					
Beginning	g date of vesting period (if blan	nk, defa	ult will l	be the P	articipa	nt's firs	t day of	employ	/ment a	s an Elig	gible Em	ploye	e):			
	<u>Plan</u> – If this is a Restated Pla er the pre-amended vesting sc		_	deferre	ed comp	ensatio	n plan a	and the	vesting	schedu	le has be	een ar	nendec	d by the	Restat	ed
	The schedule has not been ar	nended														
□ The schedule marked below:																
	Years of Vesting Service	1	2	3	4	5	6	7	8	9	10]				
		0%	0%	0%	0%	50%	60%	70%	80%	90%	100%					
												_				

YEARS OF VESTING SERVICE					
A year of vesting service shall be measured from the Participant's date of hire. The completion of twelve calendar months from the date of hire shall count as a year of vesting service. Any years of vesting service credited from prior years shall remain credited, regardless of revised provisions, unless specifically indicated otherwise, as follows: Years of vesting service credited from prior years shall not remain credited Years of vesting service credited from prior years shall not remain credited					
Also, different periods of service as an eligible Employee will be added together in determining whether the vesting period has been satisfied, unless otherwise provided, as follows: Different periods of service as an eligible Employee will not be added together in determining whether vesting has been satisified Different periods of service as an eligible Employee will not be added together in determining whether vesting has been satisified					
FORFEITURES					
Forfeitures shall be held in a Forfeiture Account and be used to reduce future Participating Employer Contributions. If a Participant experiences a Forfeiture, but subsequently if the Participant returns to service with the Plan Sponsor as an Eligible Employee, the segregated forfeiture: Will not be reinstated. Will be reinstated if the Participant returned to service within one year. Will be reinstated if the Participant returned to service within three years.					
NORMAL RETIREMENT AGE					
An Employee may separate service at any time, and access the vested portion of their Account balance. The 401(a) Basic Plan Document declares a Normal Retirement Age, but the Plan Sponsor may declare their own Normal Retirement Age if they wish. The Plan utilizes the Normal Retirement Age in the Basic Plan Document. The Plan utilizes an alternative Normal Retirement Age (no later than 70½). (must specify)					
HARDSHIP DISTRIBUTIONS					
An Employee must present sufficient information to the Plan Sponsor in order to request a Hardship Distribution from the Plan. A Participating Employer may limit Employee Hardship Distributions from the Plan. All Hardship Distributions must meet the standards set forth in the Plan Document. Hardship Distributions are limited to the following: An Employee may make a Hardship Distributions 1 time(s) events.					
 ☐ An Employee make a Hardship Distributions 1 time(s) every months. ☐ Hardship Distributions are disallowed from the Plan for any reason. 					

INVOLUNTARY DISTRIBUTIONS
On his/her Severance-from-employment, for a Participant (or Beneficiary) with an Account balance that does not exceed \$5,000, then
Participant Election: The Participant may elect to receive all or any portion of his/her Account.
Involuntary (Mandatory) Distribution: The Plan Administrator will distribute the Participant's entire Account. If the Involuntary Distribution is more than \$1,000 and it is an Eligible Rollover Distribution, and if the recipient of the distribution does not elect to have the distribution paid directly to an Eligible Retirement Plan specified by the recipient in a direct rollover or does not elect to receive the distribution directly, the Involuntary Distribution will be paid as a direct rollover to an IRA designated by the Plan Sponsor. If the Involuntary Distribution is \$1,000 or less, it will be paid in money as a lump sum.
LOANS
A Participating Employer may choose to offer loans. (Note: If this section is not completed, no loans will be allowed under the Plan by default):
☐ No Loans. The Plan does not permit Participant loans.
☑ Loans Permitted. The Plan will permit Participant loans, subject to the provisions in the Basic Plan Document.
One outstanding loan at a time.
☐ Two outstanding loans at a time.

CHANGING AND TERMINATING THIS ADOPTION AGREEMENT

If a Participating Employer desires to amend any of its elections contained in this Adoption Agreement, the Participating Employer by official action must adopt an amendment to the Adoption Agreement or a new Adoption Agreement must be adopted and forwarded to the FMPTF for approval.

This Adoption Agreement may be terminated only in accordance with the Plan.

ADOPTING THE PLAN

By signing below, the Participating Employer adopts the FMPTF 401(a) Defined Contribution Retirement Plan, including the Basic Plan Document and FMPTF Defined Contribution Pension Plan Trust. The Participating Employer acknowledges that it received a copy of the Plan. The Participating Employer shall receive copies of any Plan amendments made by the FMPTF. The Participating Employer shall abide by the terms of this Adoption Agreement, as completed by the Employer, and shall abide by all terms of the Plan, including all investment, administrative, and services of the Plan, and all applicable provisions of the Code and other applicable law.

The Participating Employer acknowledges that the Master Trustees are only responsible for the Plan and have no responsibility for other employee benefit plans maintained by the Participating Employer.

The Participating Employer's signer represents that he or she is a obligation of the Participating Employer.	proper officer of and has authority to enter into this Adoption Agreement as an
	BY:
Date:	
	Name:
	Title:
Accepted for the:	
Florida Municipal Pension Trust Fund	
By the Administrator:	
Florida League of Cities, Inc.	
Date:	