



ROLE AND RESPONSIBILITIES OF BOARD OF TRUSTEES

The Board of Trustees has oversight responsibility of the Plan and may delegate authority or responsibility for activities, including the following, as it deems appropriate.

- ▶ Act in an ethical manner with respect to all business of the Plan, avoiding conflicts of interest, and managing the plan for the benefit of members
- ▶ Ensure that the Plan is in compliance with the National Pensions Law and/or Regulations
- ▶ Develop an adequate range of Lifecycle Funds so as to cater to a range of member risk profiles
- ▶ Identify asset classes that are deemed appropriate and prudent for utilization within the Lifecycle Program, taking into account the need for diversification, the costs involved and the resources available for program oversight
- ▶ Select qualified investment managers and/or funds which fulfill the criteria of the asset classes comprising of the Lifecycle Program
- ▶ Appoint the auditor to audit the accounts annually, selecting a custodian, an Administrator, NAV calculation agent and other professional advisors as appropriate
- ▶ Monitor investment results by means of regular reviews and analyses to determine whether those responsible for investment results are meeting the guidelines and criteria identified
- ▶ With the assistance of the plan’s Consultant monitor the asset allocation of each Lifecycle Fund and direct the custodian to rebalance to the target allocation at least quarterly, or more frequently if the actual allocation drifts more than 5% from the target of each fund Monitor the expenses of the Plan
- ▶ Decide on and take appropriate action if objectives are not being met or if policies and guidelines are not being followed
- ▶ Attend Trustee meetings no less frequently than once per calendar quarter.
- ▶ **Current meetings are on or about the third Monday of each month**

I the undersigned am a member of the Cayman Islands Chamber of Commerce Pension Plan ('Plan') and would like to volunteer to be a Trustee of the Plan.

My member number (or Date of Birth) is _____

Email _____

Phone (Mobile) _____

Office _____

_____/_____/_____

Signature of Member

Print Name

Date

PLEASE ATTACH A SHORT PERSONAL BIOGRAPHY