

Susquehanna Trust & Investment Company

ACT 44 Disclosure for Entities Providing Professional Services to the Pennsylvania Municipality Pension Systems

REQUESTING MUNICIPALITY PENSION PLAN:

THE BOROUGH OF WAYNESBORO

SUSQUEHANNA TRUST & INVESTMENT COMPANY

ACT 44 DISCLOSURE FOR ENTITIES PROVIDING PROFESSIONAL SERVICES TO THE PENNSYLVANIA MUNICIPALITY PENSION SYSTEMS

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 1621 of 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. <i>Example: the Police Pension Plan for the Borough of Winchesterville</i>
Municipal Pension System Officials and Employees; Municipal Officials and employees	<u>Specifically</u> , 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.

SUSQUEHANNA TRUST & INVESTMENT COMPANY

ACT 44 DISCLOSURE FOR ENTITIES PROVIDING PROFESSIONAL SERVICES TO THE PENNSYLVANIA MUNICIPALITY PENSION SYSTEMS

Identification of Contractors & Related Personnel

CONTRACTORS: (See "Definitions for Disclosure") 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:

The Borough of Waynesboro

Indicate all that apply with an "X": [X] Non-Uniform Plan [X] Police Plan [] Fire Plan

NOTE: For all that follow, you may answer the questions / items on a separate sheet of paper and attach it to this Disclosure if the space provided is not sufficient. Please reference each question / item you are responding to by the appropriate number. (Example: REF – Item #1.)

- 1. Please provide the names and titles of all individuals providing professional services to the Requesting Municipality's pension plan(s) identified above. Also include the names and titles of any advisors and subcontractors of the Contractor, identifying them as such. After each name provide a description of the responsibilities of that person with regard to the professional services being provided to each designated pension plan.

Name of Contractor Entity Providing Service: Susquehanna Trust & Investment Co.
Corporate Address of Entity Providing Service: 1570 Manheim Pike, PO Box 3300
Corporate Address of Entity Providing Service: Lancaster PA 17604-3300
Capacity of Contractor: Trustee and Investment Manager
Name/Capacity of Employee: Workman, Maurice C, Investment Officer
Name/Capacity of Employee: Magill, Robert R, Trust Operations Manager
Name/Capacity of Employee: Click on Down Arrow
Name/Capacity of Employee: Click on Down Arrow
Name/Capacity of Employee: Click on Down Arrow

Name of Advisor/Subcontractor of Contractor Valley Forge Asset Management Corp
Address of Advisor/Subcontractor 150 South Warner Road, Suite 200
Address of Advisor/Subcontractor Valley Forge PA 19482
Capacity of Advisor/Subcontractor: Investment and Retirement Plan Administrative Services

- 2. Please list the name and title of any Affiliated Entity and their Executive-level Employee(s) that require disclosure; after each name, include a brief description of their duties. (See: Definitions)

Valley Forge Asset Management Corp is a wholly owned subsidiary of Susquehanna Bancshares Inc. which also owns Susquehanna Trust & Investment Company. Therefore, information on Valley Forge Asset Management's executive level employees is provided herewith:

Affiliated Entity: Valley Forge Asset Management Corp

SUSQUEHANNA TRUST & INVESTMENT COMPANY

ACT 44 DISCLOSURE FOR ENTITIES PROVIDING PROFESSIONAL SERVICES TO THE PENNSYLVANIA MUNICIPALITY PENSION SYSTEMS

Affiliated Entity:

Executive Level Employee of Affiliated Entity:

Valley Forge Asset Management Corp

Bernard A Francis Jr, Chief Investment Officer, Susquehanna Trust & Investment Co. and President and Chief Executive Officer of Valley Forge Asset Management Corp.

Executive Level Employee of Affiliated Entity:

James E Gibson, Chief Investment and Operations Officer, Valley Forge Asset Management Corp.

Executive Level Employee of Affiliated Entity:

Maureen M. Hayburn, Senior Vice President, Retirement Plan Services

3. Are any of the individuals named in **Item 1 or Item 2** above, a current or former official or employee of the **Requesting Municipality**? **NO**

➔ **IF “YES”**, provide the name and of the person employed, their position with the municipality, and dates of employment. **Not Applicable**

4. Are any of the individuals named in **Item 1 or Item 2** above a current or former registered Federal or State lobbyist? **NO**

➔ **IF “YES”**, provide the name of the individual, specify whether they are a state or federal lobbyist, and the date of their most recent registration /renewal. **Not Applicable**

NOTICE: All information provided for items 1- 4 above must be updated as changes occur.

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? **NO**

This question does not apply 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. **Not Applicable**

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? **NO**

➔ **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). **Not Applicable**

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**? **NO**

SUSQUEHANNA TRUST & INVESTMENT COMPANY

ACT 44 DISCLOSURE FOR ENTITIES PROVIDING PROFESSIONAL SERVICES TO THE PENNSYLVANIA MUNICIPALITY PENSION SYSTEMS

➔ **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. **Not Applicable**

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**? **NO**

➔ **IF “YES”**, identify the individual with whom the relationship exists and give a detailed description of that relationship. **Not Applicable**

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. **Not Applicable**

9. **Since December 17th, 2009:** 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**? **NO**

➔ **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. **Not Applicable**

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) **NONE**
- b) The contribution was made by an officer, director, executive-level employee or owner of at least 5% of the Contractor or Affiliated Entity. **NONE**
- 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, **OR NONE**
 2. The aggregate of all contributions all persons in (b.) above; **NONE**
- d) The contribution was for
 1. Any candidate for any public office or any person who holds an office in the Commonwealth of Pennsylvania; **NONE**
 2. The political committee of a candidate for public office or any person that holds an office in the Commonwealth of Pennsylvania. **NONE**

➔ **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. **Not Applicable**

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**? **NO**

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.

➔ **IF “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. **Not Applicable**

SUSQUEHANNA TRUST & INVESTMENT COMPANY

ACT 44 DISCLOSURE FOR ENTITIES PROVIDING PROFESSIONAL SERVICES TO THE PENNSYLVANIA MUNICIPALITY PENSION SYSTEMS

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.

Susquehanna Trust & Investment Company is a wholly owned subsidiary of Susquehanna Bancshares Inc., a bank holding company headquartered in Lititz PA. Susquehanna Bancshares Inc. maintains a Political Action Committee (PAC) which “may make contributions directly to either (i) candidates for election to federal, state and local offices, (ii) other duly organized federal and state political action committees, and (iii) to the state bankers association’s PAC’s, if any, in the states where SBI does business”. Susquehanna Trust & Investment Co has no knowledge of the actual contributions being made by this PAC nor does the Trust Company participate in any decisions relative to the operation of the PAC. However, for full disclosure purposes, the existence of this PAC is made because of the parent/affiliate relationship of Susquehanna Bancshares Inc. to Susquehanna Trust & Investment Co.

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 must participate in completing this Disclosure and must sign the below verification attesting to the participation of those individuals named below.

Name:	Robert R Magill	Position	Trust Operations Manager
Name:	Click on Down Arrow	Position	Click on Down Arrow
Name:	Click on Down Arrow	Position	Click on Down Arrow



SIGNATURE

SENIOR VICE PRESIDENT - OPERATIONS

TITLE

OCTOBER 08, 2014

DATE

SUSQUEHANNA TRUST & INVESTMENT COMPANY

ACT 44 DISCLOSURE FOR ENTITIES PROVIDING PROFESSIONAL SERVICES TO THE PENNSYLVANIA MUNICIPALITY PENSION SYSTEMS

Verification

I, **Robert R Magill** hereby state that I am the Trust Operations Manager for Susquehanna Trust & Investment Company (Contractor) and I am authorized to make this verification. I hereby verify that the facts set forth in the foregoing Act 44 Disclosure Form for Entities Providing Professional Services to **The Borough of Waynesboro** 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.



SIGNATURE

SENIOR VICE PRESIDENT - OPERATIONS

TITLE

OCTOBER 08, 2014

DATE