

<b>Form 5500-SF</b>  Department of the Treasury Internal Revenue Service  Department of Labor Employee Benefits Security Administration  Pension Benefit Guaranty Corporation	<b>Short Form Annual Return/Report of Small Employee Benefit Plan</b>  This form is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).  <b>▶ Complete all entries in accordance with the instructions to the Form 5500-SF.</b>	OMB Nos. 1210-0110 1210-0089  <b>2010</b>  <b>This Form is Open to Public Inspection</b>
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<b>Part I</b>	<b>Annual Report Identification Information</b>
For calendar plan year 2010 or fiscal plan year beginning <u>01/01/2010</u> and ending <u>12/31/2010</u>	
<b>A</b> This return/report is for:	<input checked="" type="checkbox"/> single-employer plan <input type="checkbox"/> multiple-employer plan (not multiemployer) <input type="checkbox"/> one-participant plan
<b>B</b> This return/report is for:	<input type="checkbox"/> first return/report <input checked="" type="checkbox"/> final return/report <input checked="" type="checkbox"/> an amended return/report <input type="checkbox"/> short plan year return/report (less than 12 months)
<b>C</b> Check box if filing under:	<input type="checkbox"/> Form 5558 <input type="checkbox"/> automatic extension <input type="checkbox"/> DFVC program <input type="checkbox"/> special extension (enter description)

<b>Part II</b>	<b>Basic Plan Information</b> —enter all requested information				
<b>1a</b> Name of plan <u>INSTITUTE FOR EDUCATIONAL INQUIRY DEFINED CONTRIBUTION RETIREMENT PLAN</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;"><b>1b</b> Three-digit plan number (PN) ▶</td> <td style="width:40%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2"><b>1c</b> Effective date of plan <u>01/01/2003</u></td> </tr> </table>	<b>1b</b> Three-digit plan number (PN) ▶	<u>001</u>	<b>1c</b> Effective date of plan <u>01/01/2003</u>	
<b>1b</b> Three-digit plan number (PN) ▶	<u>001</u>				
<b>1c</b> Effective date of plan <u>01/01/2003</u>					
<b>2a</b> Plan sponsor's name and address (employer, if for single-employer plan) <u>INSTITUTE FOR EDUCATIONAL INQUIRY</u>  <u>117 EAST LOUISA STREET #371</u> <u>SEATTLE, WA 98102</u>	<b>2b</b> Employer Identification Number (EIN) <u>94-3129409</u>				
	<b>2c</b> Plan sponsor's telephone number <u>206-325-3010</u>				
	<b>2d</b> Business code (see instructions) <u>611000</u>				
<b>3a</b> Plan administrator's name and address (if same as Plan sponsor, enter "Same") <u>INSTITUTE FOR EDUCATIONAL INQUIRY</u> <u>117 EAST LOUISA STREET #371</u> <u>SEATTLE, WA 98102</u>	<b>3b</b> Administrator's EIN <u>94-3129409</u>				
	<b>3c</b> Administrator's telephone number <u>206-325-3010</u>				
<b>4</b> If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN, and the plan number from the last return/report. Sponsor's name	<b>4b</b> EIN				
	<b>4c</b> PN				
<b>5a</b> Total number of participants at the beginning of the plan year .....	<b>5a</b> <u>1</u>				
<b>b</b> Total number of participants at the end of the plan year .....	<b>5b</b> <u>0</u>				
<b>c</b> Total number of participants with account balances as of the end of the plan year (defined benefit plans do not complete this item) .....	<b>5c</b> <u>0</u>				
<b>6a</b> Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.) .....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<b>b</b> Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? (See instructions on waiver eligibility and conditions.) .....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<b>If you answered "No" to either 6a or 6b, the plan cannot use Form 5500-SF and must instead use Form 5500.</b>					

<b>Part III</b>	<b>Financial Information</b>																																										
<b>7</b> Plan Assets and Liabilities	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th></th> <th style="width:20%; text-align: center;">(a) Beginning of Year</th> <th style="width:20%; text-align: center;">(b) End of Year</th> </tr> <tr> <td><b>a</b> Total plan assets .....</td> <td style="text-align: right;"><b>7a</b> <u>29703</u></td> <td style="text-align: right;"><u>0</u></td> </tr> <tr> <td><b>b</b> Total plan liabilities .....</td> <td style="text-align: right;"><b>7b</b> <u>0</u></td> <td style="text-align: right;"><u>0</u></td> </tr> <tr> <td><b>c</b> Net plan assets (subtract line 7b from line 7a) .....</td> <td style="text-align: right;"><b>7c</b> <u>29703</u></td> <td style="text-align: right;"><u>0</u></td> </tr> </table>		(a) Beginning of Year	(b) End of Year	<b>a</b> Total plan assets .....	<b>7a</b> <u>29703</u>	<u>0</u>	<b>b</b> Total plan liabilities .....	<b>7b</b> <u>0</u>	<u>0</u>	<b>c</b> Net plan assets (subtract line 7b from line 7a) .....	<b>7c</b> <u>29703</u>	<u>0</u>																														
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<b>8</b> Income, Expenses, and Transfers for this Plan Year	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th></th> <th style="width:20%; text-align: center;">(a) Amount</th> <th style="width:20%; text-align: center;">(b) Total</th> </tr> <tr> <td><b>a</b> Contributions received or receivable from:</td> <td></td> <td></td> </tr> <tr> <td>  <b>(1)</b> Employers .....</td> <td style="text-align: right;"><b>8a(1)</b> <u>5187</u></td> <td></td> </tr> <tr> <td>  <b>(2)</b> Participants .....</td> <td style="text-align: right;"><b>8a(2)</b> <u>0</u></td> <td></td> </tr> <tr> <td>  <b>(3)</b> Others (including rollovers) .....</td> <td style="text-align: right;"><b>8a(3)</b> <u>0</u></td> <td></td> </tr> <tr> <td><b>b</b> Other income (loss) .....</td> <td style="text-align: right;"><b>8b</b> <u>3932</u></td> <td></td> </tr> <tr> <td><b>c</b> Total income (add lines 8a(1), 8a(2), 8a(3), and 8b) .....</td> <td style="text-align: right;"><b>8c</b> <u>9119</u></td> <td></td> </tr> <tr> <td><b>d</b> Benefits paid (including direct rollovers and insurance premiums to provide benefits) .....</td> <td style="text-align: right;"><b>8d</b> <u>38822</u></td> <td></td> </tr> <tr> <td><b>e</b> Certain deemed and/or corrective distributions (see instructions) .....</td> <td style="text-align: right;"><b>8e</b> <u>0</u></td> <td></td> </tr> <tr> <td><b>f</b> Administrative service providers (salaries, fees, commissions) .....</td> <td style="text-align: right;"><b>8f</b> <u>0</u></td> <td></td> </tr> <tr> <td><b>g</b> Other expenses .....</td> <td style="text-align: right;"><b>8g</b> <u>0</u></td> <td></td> </tr> <tr> <td><b>h</b> Total expenses (add lines 8d, 8e, 8f, and 8g) .....</td> <td style="text-align: right;"><b>8h</b> <u>38822</u></td> <td></td> </tr> <tr> <td><b>i</b> Net income (loss) (subtract line 8h from line 8c) .....</td> <td style="text-align: right;"><b>8i</b> <u>-29703</u></td> <td></td> </tr> <tr> <td><b>j</b> Transfers to (from) the plan (see instructions) .....</td> <td style="text-align: right;"><b>8j</b> <u>0</u></td> <td></td> </tr> </table>		(a) Amount	(b) Total	<b>a</b> Contributions received or receivable from:			<b>(1)</b> Employers .....	<b>8a(1)</b> <u>5187</u>		<b>(2)</b> Participants .....	<b>8a(2)</b> <u>0</u>		<b>(3)</b> Others (including rollovers) .....	<b>8a(3)</b> <u>0</u>		<b>b</b> Other income (loss) .....	<b>8b</b> <u>3932</u>		<b>c</b> Total income (add lines 8a(1), 8a(2), 8a(3), and 8b) .....	<b>8c</b> <u>9119</u>		<b>d</b> Benefits paid (including direct rollovers and insurance premiums to provide benefits) .....	<b>8d</b> <u>38822</u>		<b>e</b> Certain deemed and/or corrective distributions (see instructions) .....	<b>8e</b> <u>0</u>		<b>f</b> Administrative service providers (salaries, fees, commissions) .....	<b>8f</b> <u>0</u>		<b>g</b> Other expenses .....	<b>8g</b> <u>0</u>		<b>h</b> Total expenses (add lines 8d, 8e, 8f, and 8g) .....	<b>8h</b> <u>38822</u>		<b>i</b> Net income (loss) (subtract line 8h from line 8c) .....	<b>8i</b> <u>-29703</u>		<b>j</b> Transfers to (from) the plan (see instructions) .....	<b>8j</b> <u>0</u>	
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**Part IV Plan Characteristics****9a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2L

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:**Part V Compliance Questions**

		Yes	No	Amount
<b>10</b> During the plan year:				
<b>a</b> Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary Correction Program) .....	<b>10a</b>		X	
<b>b</b> Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 10a.) .....	<b>10b</b>		X	
<b>c</b> Was the plan covered by a fidelity bond? .....	<b>10c</b>		X	
<b>d</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? .....	<b>10d</b>		X	
<b>e</b> Were any fees or commissions paid to any brokers, agents, or other persons by an insurance carrier, insurance service or other organization that provides some or all of the benefits under the plan? (See instructions.) .....	<b>10e</b>		X	
<b>f</b> Has the plan failed to provide any benefit when due under the plan? .....	<b>10f</b>		X	
<b>g</b> Did the plan have any participant loans? (If "Yes," enter amount as of year end.) .....	<b>10g</b>		X	
<b>h</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) .....	<b>10h</b>		X	
<b>i</b> If 10h was answered "Yes," check the box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3 .....	<b>10i</b>			

**Part VI Pension Funding Compliance**

**11** Is this a defined benefit plan subject to minimum funding requirements? (If "Yes," see instructions and complete Schedule SB (Form 5500)) ..... ☐ Yes ☒ No

**12** Is this a defined contribution plan subject to the minimum funding requirements of section 412 of the Code or section 302 of ERISA? .. ☐ Yes ☒ No  
(If "Yes," complete 12a or 12b, 12c, 12d, and 12e below, as applicable.)

**a** If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions, and enter the date of the letter ruling granting the waiver. .... Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**If you completed line 12a, complete lines 3, 9, and 10 of Schedule MB (Form 5500), and skip to line 13.**

<b>b</b> Enter the minimum required contribution for this plan year .....	<b>12b</b>	
<b>c</b> Enter the amount contributed by the employer to the plan for this plan year .....	<b>12c</b>	
<b>d</b> Subtract the amount in line 12c from the amount in line 12b. Enter the result (enter a minus sign to the left of a negative amount) .....	<b>12d</b>	

**e** Will the minimum funding amount reported on line 12d be met by the funding deadline? ..... ☐ Yes ☐ No ☐ N/A

**Part VII Plan Terminations and Transfers of Assets**

**13a** Has a resolution to terminate the plan been adopted during the plan year or any prior year? ..... ☒ Yes ☐ No  
If "Yes," enter the amount of any plan assets that reverted to the employer this year ..... **13a** 0

**b** Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? ..... ☒ Yes ☐ No

**c** If during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

13c(1) Name of plan(s):	13c(2) EIN(s)	13c(3) PN(s)

**Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.**

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including, if applicable, a Schedule SB or Schedule MB completed and signed by an enrolled actuary, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

<b>SIGN HERE</b>	Filed with authorized/valid electronic signature.	08/09/2011	PAULA MCMANNON
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
<b>SIGN HERE</b>			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor

**U. S. Department of Labor**

<sup>1</sup>  
Employee Benefits Security Administration  
Room 860, 1111 Third Avenue Building  
1111 Third Avenue  
Seattle, Washington 98101-3212



Reply to the Attention of: 201171-00486

October 8, 2010

Paula McMannon  
Institute for Educational Inquiry  
117 East Louisa Street, #371  
Seattle, WA 98102

Re: Plan Termination, Institute for Education Defined Contribution Plan and Annuity

Dear Ms. McMannon:

I am contacting you to follow-up on a recent telephone conversation I had with you regarding the above-referenced pension plan (the Plan). The U.S. Department of Labor, Employee Benefits Security Administration (the Department) retains responsibility for the administration and enforcement of Title I of the Employee Retirement Income Security Act of 1974 (ERISA). Title I establishes standards governing the operations of employee benefit plans such as the Institute for Education Defined Contribution Plan and Annuity.

There are ERISA related duties owed to the Plan and its participants and beneficiaries upon the event of a Plan termination. Please coordinate with any other existing Plan or administrative officials to address loose ends that may exist. It is my understanding that you intend to terminate the Plan and will coordinate this termination with appropriate parties associated by a relationship with the Plan. In order to commence the termination of the Plan, the following tasks should be undertaken:

Certification of a Board resolution terminating the Plan, establishing the effective date of termination, and authorizing the Trustee to make final distribution of benefit payments and to pay fees associated with the wind-up of the Plan from Plan assets;

Execution of a Service Agreement with TIAA-CREF Administrators (or any other third-party administrator of the company's choosing) with respect to termination expenses;

Payment of such expenses; and

A listing of Plan participants and the amount of each payout provided to EBSA (the Department).

Please provide me copies of the documents listed above, including proof of payment of service fees no later than ~~December~~<sup>January</sup> 15, 2010. Please check the provisions in the Plan Document for further instruction on fees payment in the case of a Plan termination.

Please contact me regarding any of these matters at (206) 553-4247, x 32 if you have any questions or instruction requires clarification. Thank you for your assistance.

Sincerely,



Fara Goodwin  
Lead Benefits Advisor

# *INSTITUTE FOR EDUCATIONAL INQUIRY*

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January 7, 2011

Ms. Fara Goodwin  
Lead Benefits Advisor  
U.S. Department of Labor  
Employee Benefits Security Administration  
Room 860, 1111 Third Avenue Building  
1111 Third Avenue  
Seattle, WA 98101-3212

To the Attention of : 201171-00486  
Institute for Educational Inquiry EIN 94-3129409

Dear Ms. Goodwin:

In follow-up to your letter of October 8, 2010, and our several subsequent telephone conversations, I am sending you the requested information regarding the termination of the Institute for Educational Inquiry's two 403(b) retirement plans:

- Institute for Educational Inquiry Defined Contribution Retirement Plan #331250, and
- Institute for Educational Inquiry Tax-Deferred Annuity (TDA) Plan #331251

The following information is enclosed:

- a copy of the signed Board resolution terminating the retirement plans;
- a copy of the letter sent to TIAA-CREF on December 2, 2010, with instructions to terminate the two 403(b) retirement plans effective December 31, 2010; and
- a list of employees as of 12/31/2010 with year-to-date contributions.

As you may recall from one of our telephone conversations, the IEI was able to choose to report active/eligible participants when determining the number of participants to report on last year's 5500 forms (2009). Therefore, the enclosed report on employee contributions was created on this same basis and reports on the only active/eligible employee.

*117 East Louisa Street #371  
Seattle, Washington 98102*

*(206) 325-3010*

January 7, 2011

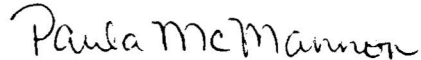
In looking ahead at completing the 5500 forms for 2010, am I correct in identifying the major differences (other than dollar amounts) from the 2009 reports to be the following?:

- Part I, item B—indicate “final return/report”; and
- Part VII, items 13a and b—indicate “yes” regarding adoption of a resolution to terminate the plan and “yes” regarding all plan assets being distributed, transferred, or brought under control of PBGC.

I am assuming that after I complete the 5500 forms for 2010, the IEI is no longer required to report on these two terminated 403(b) retirement plans or anyone who ever participated in them. I would appreciate your confirming this as well as the 5500 reporting differences for 2010 listed above.

I have very much appreciated your help over these several months. You have checked in regularly and answered my many questions along the way. It has been a pleasure working with you. Thank you.

Sincerely yours,

A handwritten signature in cursive script that reads "Paula McMannon".

Paula McMannon  
Secretary/ Treasurer

cc: John I. Goodlad, President  
Eugene B. Edgar, Chair of the Board of Directors

**INSTITUTE FOR EDUCATIONAL INQUIRY**  
Seattle, Washington

**BOARD RESOLUTION TERMINATING RETIREMENT PLANS**

At the annual meeting of the Board of Directors of the Institute for Educational Inquiry on November 11, 2010, the following resolution was proposed and approved by the Board:

**WHEREAS**, the Institute for Educational Inquiry currently has two 403(b) retirement plans through TIAA-CREF:

- 1) one to which the Institute makes contributions on behalf of employees—the Institute for Educational Inquiry Defined Contribution Retirement Plan (#331250)
- 2) and one to which employees may make voluntary contributions—the Institute for Educational Inquiry Tax-Deferred Annuity (TDA) Plan (#331251), and


**WHEREAS**, the Institute for Educational Inquiry has only one employee participating in its plans,

**THEREFORE, BE IT RESOLVED**, that the Institute for Educational Inquiry will terminate its two retirement plans effective December 31, 2010. Beginning January 1, 2011, instead of making contributions to the Defined Contribution Plan on behalf of employees, the Institute will directly compensate employees through payroll using the same eligibility criteria at the same rates as set forth in the Defined Contribution Plan, and


**BE IT FURTHER RESOLVED**, that the President or the Secretary/Treasurer of the Institute for Educational Inquiry is hereby authorized, directed, and empowered to execute, for and on behalf of this nonprofit corporation and in its name, any and all documents required in connection with the termination of these retirement plans.

**CERTIFICATE**

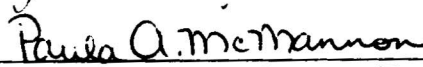
We do hereby certify that the above and foregoing is a true copy of a resolution adopted at its annual Board meeting of November 11, 2010, at which time a quorum was present and voted.

  
\_\_\_\_\_  
Eugene B. Edgar, Chair

11/11/10  
\_\_\_\_\_  
date

  
\_\_\_\_\_  
John I. Goodlad, President

11/11/10  
\_\_\_\_\_  
date

  
\_\_\_\_\_  
Paula A. McMannon, Secretary/Treasurer

11/11/10  
\_\_\_\_\_  
date

117 East Louisa Street #371  
Seattle, Washington 98102

(206) 325-3010

# ***INSTITUTE FOR EDUCATIONAL INQUIRY***

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December 2, 2010

TIAA-CREF

Attn: Plan Modification Department  
8500 Andrew Carnegie Blvd.  
Charlotte, NC 28262

To Whom It May Concern:

The Board of Directors of the Institute for Educational Inquiry requests that its two 403(b) retirement plans through TIAA-CREF be terminated effective December 31, 2010 (see attached copy of signed Board Resolution):

- Institute for Educational Inquiry Defined Contribution Retirement Plan #331250, and
- Institute for Educational Inquiry Tax-Deferred Annuity (TDA) Plan #331251.

No additional contributions will be made after December 31, 2010. As of January 1, 2011, all employees will be considered terminated from these two retirement plans.

The Institute is dissolving the two retirement plans and is in communication with the U.S. Department of Labor to file our final 5500 forms.

I would very much appreciate confirmation that this request has been received. Please do not hesitate to contact me if you have any questions or need additional information.

Sincerely yours,

*Paula A. McMannon*

Paula A. McMannon  
Secretary/Treasurer

cc: John I. Goodlad, President  
Fara Goodwin, U.S. Department of Labor

*117 East Louisa Street #371  
Seattle, Washington 98102*

*(206) 325-3010*



# Source Plan Balances Report As of 12/31/2010\*

Contract Number	Contribution Paying Status	Age	Gender	Product	Source	Investment	Asset Class	Year to Date Contributions (\$)	Balance Amount (\$)
<b>Plan: 331250 INSTITUTE FOR EDUCATIONAL INQUIRY 403(B) DC PLAN</b>									
<b>Employee: MCMANNON, PAULA A</b>									
34872200	PAYING	48.06	Female	GRA CONTRACTS	EMPLOYER	CREF Global Equities	Equities	1,037.40	7,878.38
34872200	PAYING	48.06	Female	GRA CONTRACTS	EMPLOYER	CREF Growth	Equities	777.96	6,051.48
34872200	PAYING	48.06	Female	GRA CONTRACTS	EMPLOYER	CREF Stock	Equities	1,556.04	12,110.23
34872200	PAYING	48.06	Female	GRA CONTRACTS	EMPLOYER	TIAA Real Estate	Real Estate	518.64	3,115.11
34872200	PAYING	48.06	Female	GRA CONTRACTS	EMPLOYER	TIAA Traditional	Guaranteed	1,296.72	9,666.00
								<b>5,186.76</b>	<b>38,821.20</b>
<b>Total Employee: MCMANNON, PAULA A</b>								<b>5,186.76</b>	<b>38,821.20</b>
<b>Total Plan: 331250 INSTITUTE FOR EDUCATIONAL INQUIRY 403(B) DC PLAN</b>									
<b>Plan: 331251 INSTITUTE FOR EDUCATIONAL INQUIRY 403(B) TDA PLAN</b>									
<b>Employee: MCMANNON, PAULA A</b>									
L5681766	PAYING	48.06	Female	GSRA CONTRACTS	EMPLOYEE PRE-TAX	CREF Global Equities	Equities	2,880.00	13,031.72
L5681766	PAYING	48.06	Female	GSRA CONTRACTS	EMPLOYEE PRE-TAX	CREF Growth	Equities	2,160.00	10,182.52
L5681766	PAYING	48.06	Female	GSRA CONTRACTS	EMPLOYEE PRE-TAX	CREF Stock	Equities	4,320.00	20,104.71
L5681766	PAYING	48.06	Female	GSRA CONTRACTS	EMPLOYEE PRE-TAX	TIAA Real Estate	Real Estate	1,440.00	5,214.38
L5681766	PAYING	48.06	Female	GSRA CONTRACTS	EMPLOYEE PRE-TAX	TIAA Traditional	Guaranteed	3,600.00	15,513.87
								<b>14,400.00</b>	<b>64,047.20</b>
<b>Total Employee: MCMANNON, PAULA A</b>								<b>14,400.00</b>	<b>64,047.20</b>
<b>Total Plan: 331251 INSTITUTE FOR EDUCATIONAL INQUIRY 403(B) TDA PLAN</b>									
								<b>19,586.76</b>	<b>102,868.40</b>
<b>REPORT TOTAL</b>									

\* This report contains plan level data for selected plans. Data requested is current as of 01/04/2011, except for Balances information which is point in time data for the date selected. This report should not be used for regulatory filings or for benefit statements.

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01/05/2011 4:25:22 PM

**Paula McMannon**

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**From:** Setherley, Nicole M. [NSetherley@tiaa-cref.org]  
**Sent:** Monday, January 31, 2011 11:10 AM  
**To:** paulam@ieiseattle.org  
**Subject:** TIAA-CREF Confirmation of Plan Termination for Institute for Educational Inquiry- Plan# 331250 and 331251

Dear Ms. McMannon,

Thank you for your letter dated December 2, 2010. This confirms that the 403(b) DC and TDA plans are terminated effective December 31, 2010 per your request. As such, future contributions will no longer be accepted by TIAA-CREF and all assets are deemed distributable at this time. Please note, that each employee is able to decide whether to leave their funds with TIAA-CREF, rollover funds, or take cash receipt of funds. In addition, the TIAA Traditional fund is a restricted fund and has additional restrictions beyond plan termination. Please encourage your employees to contact the National Contact Center at: 1-(800) 842-2776 Monday through Friday from 8:00am-10:00pm EST or Saturday from 9:00am to 6:00pm EST to discuss any questions they may have at this time regarding their options.

If you have additional questions, please contact the Administrator Telephone Center at: 1-(888) 842-7782 Monday through Friday from 8:00am to 8:00pm EST. Institutional consultants are available to assist you with your day-to-day administrative needs.

Sincerely,

**Nicole Setherley**  
Sr. Institutional Consultant | Institutional Relationships  
Administrator Telephone Center  
**TIAA-CREF | Financial Services for the Greater Good**

1670 Broadway | Suite 2200  
Denver, CO 80202  
Tel: 303.318.5584  
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[nsetherley@tiaa-cref.org](mailto:nsetherley@tiaa-cref.org)  
TIAA-CREF Individual & Institutional Services, LLC, Member FINRA/SIPC

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This e-mail may contain confidential or privileged information.  
If you are not the intended recipient, please notify the sender  
immediately and then delete it.

TIAA-CREF  
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