

Participant Enrollment Governmental 457(b) Plan

ALAMEDA COUNTY 457(B) DEFERRED COMPENSATION PLAN

525127-01

Participant Information			1			
Last Name First	Name	MI	Social Secur	rity Number		
(The name provided MUST mai Provider.)	tch the name on fi	le with Service	Social Seed	nty itamicei		
Mailing	g Address		E-Mail	Address		
City	State	e ZIP Code	☐ Married ☐ Unmarrie	d □ Female □ Male		
Home Phone	Work Phone		Date of Birth (mm/dd/yyyy)	Date of Hire (mm/dd/yyyy)		
 Check box if you prefer to re statements in Spanish. 	ceive quarterly ac	ecount				
Payroll Information						
☐ Pretax contributions \$	OR		Minimum election - \$20.00 or 1.5%			
☐ Roth contributions \$	OR		Minimum election - \$20.00 or 1.5%			
in the 2024 tax year, whichever of my eligible compensation in	is less. The total c the 2024 tax year	combination of pr r (when added to	t exceed 61% of my gross pay OR \$23 etax and Roth Age 50 §457 Catch-Uthe basic contribution amount, the as a dollar amount or as a percentage	p amount cannot exceed \$7,500 aggregate maximum available is		
Payroll Effective Date:	(mm/dd/yyyy)		Payroll Center Name: THE COUNTY OF Bi-Weekly payrol Payroll Center Number: 2			
Employe	ee ID		Division Name: Subplan 001881 Division Number: 2			

Investment Option Information (applies to all contributions) - Please refer to your communication materials for information regarding each investment option and Asset Allocation Models.

I understand that funds may impose redemption fees on certain transfers, redemptions or exchanges if assets are held less than the period stated in the fund's prospectus or other disclosure documents. I will refer to the fund's prospectus and/or disclosure documents for more information.

Select either an Asset Allocation Model (A) or your own investment options (B).

(A) Asset Allocation Model Selection - only one model can be selected

Asset Allocation Model Name	Model Selection	Asset Allocation Model Name	Model Selection
Advisor GoalMaker AGGRESSIVE 2005		Advisor GoalMaker CONS 2023	
Advisor GoalMaker AGGRESSIVE 2006		Advisor GoalMaker CONS 2024	
Advisor GoalMaker AGGRESSIVE 2007		Advisor GoalMaker CONS 2025	
Advisor GoalMaker AGGRESSIVE 2008		Advisor GoalMaker CONS 2026	
Advisor GoalMaker AGGRESSIVE 2009		Advisor GoalMaker CONS 2027	
Advisor GoalMaker AGGRESSIVE 2010		Advisor GoalMaker CONS 2028	
Advisor GoalMaker AGGRESSIVE 2011		Advisor GoalMaker CONS 2029	

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Last Name	First Name		M.I. Social Security Number	Number
Asset Allocation Model Name	Model Selection		Asset Allocation Model Name	Model Selection
Advisor GoalMaker AGGRESSIVE 2012			Advisor GoalMaker CONS 2030	
Advisor GoalMaker AGGRESSIVE 2013			Advisor GoalMaker CONS 2031	
Advisor GoalMaker AGGRESSIVE 2014			Advisor GoalMaker CONS 2032	
Advisor GoalMaker AGGRESSIVE 2015			Advisor GoalMaker CONS 2033	
Advisor GoalMaker AGGRESSIVE 2016			Advisor GoalMaker CONS 2034	
Advisor GoalMaker AGGRESSIVE 2017			Advisor GoalMaker CONS 2035	
Advisor GoalMaker AGGRESSIVE 2018			Advisor GoalMaker CONS 2036	
Advisor GoalMaker AGGRESSIVE 2019			Advisor GoalMaker CONS 2037	
Advisor GoalMaker AGGRESSIVE 2020			Advisor GoalMaker CONS 2038	
Advisor GoalMaker AGGRESSIVE 2021			Advisor GoalMaker CONS 2039	
Advisor GoalMaker AGGRESSIVE 2022			Advisor GoalMaker CONS 2040	
Advisor GoalMaker AGGRESSIVE 2023			Advisor GoalMaker MODERATE 2005	
Advisor GoalMaker AGGRESSIVE 2024			Advisor GoalMaker MODERATE 2006	
Advisor GoalMaker AGGRESSIVE 2025			Advisor GoalMaker MODERATE 2007	
Advisor GoalMaker AGGRESSIVE 2026			Advisor GoalMaker MODERATE 2008	
Advisor GoalMaker AGGRESSIVE 2027			Advisor GoalMaker MODERATE 2009	
Advisor GoalMaker AGGRESSIVE 2028			Advisor GoalMaker MODERATE 2010	
Advisor GoalMaker AGGRESSIVE 2029			Advisor GoalMaker MODERATE 2011	
Advisor GoalMaker AGGRESSIVE 2030			Advisor GoalMaker MODERATE 2012	
Advisor GoalMaker AGGRESSIVE 2031			Advisor GoalMaker MODERATE 2013	
Advisor GoalMaker AGGRESSIVE 2032			Advisor GoalMaker MODERATE 2014	
Advisor GoalMaker AGGRESSIVE 2033			Advisor GoalMaker MODERATE 2015	
Advisor GoalMaker AGGRESSIVE 2034			Advisor GoalMaker MODERATE 2016	
Advisor GoalMaker AGGRESSIVE 2035			Advisor GoalMaker MODERATE 2017	
Advisor GoalMaker AGGRESSIVE 2036			Advisor GoalMaker MODERATE 2018	
Advisor GoalMaker AGGRESSIVE 2037			Advisor GoalMaker MODERATE 2019	
Advisor GoalMaker AGGRESSIVE 2038			Advisor GoalMaker MODERATE 2020	
Advisor GoalMaker AGGRESSIVE 2039			Advisor GoalMaker MODERATE 2021	
Advisor GoalMaker AGGRESSIVE 2040			Advisor GoalMaker MODERATE 2022	
Advisor GoalMaker CONS 2005			Advisor GoalMaker MODERATE 2023	
Advisor GoalMaker CONS 2006			Advisor GoalMaker MODERATE 2024	
Advisor GoalMaker CONS 2007			Advisor GoalMaker MODERATE 2025	
Advisor GoalMaker CONS 2008			Advisor GoalMaker MODERATE 2026	
Advisor GoalMaker CONS 2009			Advisor GoalMaker MODERATE 2027	
Advisor GoalMaker CONS 2010			Advisor GoalMaker MODERATE 2028	
Advisor GoalMaker CONS 2011			Advisor GoalMaker MODERATE 2029	
Advisor GoalMaker CONS 2012			Advisor GoalMaker MODERATE 2030	
Advisor GoalMaker CONS 2013			Advisor GoalMaker MODERATE 2031	
Advisor GoalMaker CONS 2014			Advisor GoalMaker MODERATE 2032	
Advisor GoalMaker CONS 2015			Advisor GoalMaker MODERATE 2033	
Advisor GoalMaker CONS 2016			Advisor GoalMaker MODERATE 2034	
Advisor GoalMaker CONS 2017			Advisor GoalMaker MODERATE 2035	
Advisor GoalMaker CONS 2018	_		Advisor GoalMaker MODERATE 2036	_
Advisor GoalMaker CONS 2019			Advisor GoalMaker MODERATE 2037	
Advisor GoalMaker CONS 2020			Advisor GoalMaker MODERATE 2038	_
Advisor GoalMaker CONS 2021			Advisor GoalMaker MODERATE 2039	
Advisor GoalMaker CONS 2022	_		Advisor GoalMaker MODERATE 2040	_
(B) Select Your Own Investment	Options			
INVESTMENT O	PTION		INVESTMENT C	OPTION
NAME	TICKER CODE 9	<u>/o</u>	NAME	TICKER CODE %
State St Gbl AllCp Eq ex-US Idx SL Cl II			Hartford Core Equity R6	
MFS Intnl Growth Equity (IS Platform)			JPMorgan Equity Income R6	
Fidelity Small Cap Index			Large Cap Growth / Jennison Fund	
JPMorgan Small Cap Equity R5			Pax Sustainable Allocation Inst	
Carillon Scout Mid Cap R-6			PIMCO Income Instl	

Fidelity Mid Cap Index......FSMDX

Fidelity 500 Index..... FXAIX

FSMDX

FXAIX

MUST INDICATE WHOLE PERCENTAGES

D0859A

D2101A

= 100%

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Last Name	First Name	M.I.	Social Security Number	Number

Participation Agreement

Withdrawal Restrictions - I understand that the Internal Revenue Code (the "Code") and/or my employer's Plan Document may impose restrictions on transfers and/or distributions. I understand that I must contact the Plan Administrator to determine when and/or under what circumstances I am eligible to receive distributions or make transfers.

Investment Options - I understand that by signing and submitting this Participant Enrollment form for processing, I am requesting to have investment options established under the Plan as specified in the Investment Option Information section. I understand and agree that this account is subject to the terms of the Plan Document. I understand and acknowledge that all payments and account values, when based on the experience of the investment options, may not be guaranteed and may fluctuate, and, upon redemption, shares may be worth more or less than their original cost. I acknowledge that investment option information, including prospectuses, disclosure documents and Fund Profile sheets, have been made available to me and I understand the risks of investing.

Asset Allocation Models - If you select an Asset Allocation Model, your funds will be invested among the investment options as indicated below. In applying models to your particular situation, you should consider all of your assets and all of your spouse's assets, including IRAs, mutual funds and other qualified plans. I understand that the Asset Allocation Models listed below are subject to change, and that my contributions will be invested upon receipt into the most current model that the Plan offers. If an Asset Allocation Model is selected and I have also designated my own investment options, the Asset Allocation Model will supersede my own investment options.

Advisor GoalMaker AGGRESSIVE 2005 - SSGAII 8% D1320A 8% FXAIX 11% HAITX 4% OIEJX 5% CSMUX 4% FSMDX 3% PIMIX 5% D0859A 31% FSSNX 2% JSERX 2% D2101A 17%

Advisor GoalMaker AGGRESSIVE 2006 - SSGAII 8% D1320A 8% FXAIX 11% HAITX 4% OIEJX 5% CSMUX 4% FSMDX 3% PIMIX 5% D0859A 31% FSSNX 2% JSERX 2% D2101A 17%

Advisor GoalMaker AGGRESSIVE 2007 - SSGAII 8% D1320A 8% FXAIX 11% HAITX 4% OIEJX 5% CSMUX 4% FSMDX 3% PIMIX 5% D0859A 31% FSSNX 2% JSERX 2% D2101A 17%

Advisor GoalMaker AGGRESSIVE 2008 - SSGAII 8% D1320A 8% FXAIX 11% HAITX 4% OIEJX 5% CSMUX 4% FSMDX 3% PIMIX 5% D0859A 31% FSSNX 2% JSERX 2% D2101A 17%

Advisor GoalMaker AGGRESSIVE 2009 - SSGAII 8% D1320A 8% FXAIX 12% HAITX 4% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 5% D0859A 31% FSSNX 2% JSERX 2% D2101A 15%

Advisor GoalMaker AGGRESSIVE 2010 - SSGAII 8% D1320A 8% FXAIX 13% HAITX 5% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 5% D0859A 30% FSSNX 2% JSERX 2% D2101A 14%

Advisor GoalMaker AGGRESSIVE 2011 - SSGAII 8% D1320A 9% FXAIX 13% HAITX 5% OIEJX 5% CSMUX 6% FSMDX 4% PIMIX 5% D0859A 28% FSSNX 2% JSERX 2% D2101A 13%

Advisor GoalMaker AGGRESSIVE 2012 - SSGAII 10% D1320A 10% FXAIX 14% HAITX 5% OIEJX 6% CSMUX 6% FSMDX 4% PIMIX 5% D0859A 24% FSSNX 2% JSERX 2% D2101A 12%

Advisor GoalMaker AGGRESSIVE 2013 - SSGAII 10% D1320A 10% FXAIX 15% HAITX 5% OIEJX 6% CSMUX 6% FSMDX 4% PIMIX 5% D0859A 24% FSSNX 2% JSERX 2% D2101A 11%

Advisor GoalMaker AGGRESSIVE 2014 - SSGAII 10% D1320A 10% FXAIX 15% HAITX 6% OIEJX 6% CSMUX 6% FSMDX 5% PIMIX 5% D0859A 23% FSSNX 2% JSERX 2% D2101A 10%

Advisor GoalMaker AGGRESSIVE 2015 - SSGAII 10% D1320A 10% FXAIX 16% HAITX 6% OIEJX 7% CSMUX 7% FSMDX 5% PIMIX 5% D0859A 21% FSSNX 2% JSERX 2% D2101A 9%

Advisor GoalMaker AGGRESSIVE 2016 - SSGAII 10% D1320A 11% FXAIX 17% HAITX 6% OIEJX 7% CSMUX 7% FSMDX 5% PIMIX 5% D0859A 20% FSSNX 2% JSERX 2% D2101A 8%

Advisor GoalMaker AGGRESSIVE 2017 - SSGAII 12% D1320A 11% FXAIX 18% HAITX 6% OIEJX 7% CSMUX 7% FSMDX 5% PIMIX 5% D0859A 17% FSSNX 3% JSERX 2% D2101A 7%

Advisor GoalMaker AGGRESSIVE 2018 - SSGAII 12% D1320A 12% FXAIX 18% HAITX 7% OIEJX 7% CSMUX 7% FSMDX 5% PIMIX 5% D0859A 16% FSSNX 3% JSERX 2% D2101A 6%

Advisor GoalMaker AGGRESSIVE 2019 - SSGAII 12% D1320A 12% FXAIX 18% HAITX 7% OIEJX 7% CSMUX 7% FSMDX 5% PIMIX 5% D0859A 16% FSSNX 3% JSERX 2% D2101A 6%

Advisor GoalMaker AGGRESSIVE 2020 - SSGAII 12% D1320A 12% FXAIX 19% HAITX 7% OIEJX 8% CSMUX 7% FSMDX 5% PIMIX 4% D0859A 15% FSSNX 3% JSERX 2% D2101A 6%

Advisor GoalMaker AGGRESSIVE 2021 - SSGAII 12% D1320A 13% FXAIX 19% HAITX 7% OIEJX 8% CSMUX 8% FSMDX 5% PIMIX 3% D0859A 13% FSSNX 3% JSERX 3% D2101A 6%

Advisor GoalMaker AGGRESSIVE 2022 - SSGAII 12% D1320A 14% FXAIX 20% HAITX 7% OIEJX 8% CSMUX 8% FSMDX 5% PIMIX 3% D0859A 11% FSSNX 3% JSERX 3% D2101A 6%

Advisor GoalMaker AGGRESSIVE 2023 - SSGAII 12% D1320A 14% FXAIX 20% HAITX 7% OIEJX 8% CSMUX 8% FSMDX 5% PIMIX 3% D0859A 11% FSSNX 3% JSERX 3% D2101A 6%

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 Last Name
 First Name
 M.I.
 Social Security Number
 Number

Advisor GoalMaker AGGRESSIVE 2024 - SSGAII 14% D1320A 14% FXAIX 20% HAITX 16% CSMUX 8% FSMDX 6% PIMIX 4% D0859A 12% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2025 - SSGAII 14% D1320A 14% FXAIX 21% HAITX 16% CSMUX 9% FSMDX 6% PIMIX 4% D0859A 10% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2026 - SSGAII 14% D1320A 14% FXAIX 21% HAITX 16% CSMUX 9% FSMDX 6% PIMIX 4% D0859A 10% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2027 - SSGAII 14% D1320A 15% FXAIX 21% HAITX 17% CSMUX 9% FSMDX 6% PIMIX 3% D0859A 9% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2028 - SSGAII 14% D1320A 15% FXAIX 21% HAITX 17% CSMUX 9% FSMDX 6% PIMIX 3% D0859A 9% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2029 - SSGAII 15% D1320A 15% FXAIX 22% HAITX 17% CSMUX 9% FSMDX 7% PIMIX 3% D0859A 6% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2030 - SSGAII 15% D1320A 15% FXAIX 22% HAITX 17% CSMUX 9% FSMDX 7% PIMIX 3% D0859A 6% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2031 - SSGAII 15% D1320A 15% FXAIX 22% HAITX 17% CSMUX 9% FSMDX 7% PIMIX 3% D0859A 6% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2032 - SSGAII 15% D1320A 16% FXAIX 23% HAITX 18% CSMUX 9% FSMDX 7% PIMIX 2% D0859A 4% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2033 - SSGAII 15% D1320A 16% FXAIX 23% HAITX 18% CSMUX 9% FSMDX 7% PIMIX 2% D0859A 4% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2034 - SSGAII 16% D1320A 16% FXAIX 23% HAITX 18% CSMUX 9% FSMDX 7% PIMIX 2% D0859A 3% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2035 - SSGAII 16% D1320A 16% FXAIX 24% HAITX 18% CSMUX 10% FSMDX 7% D0859A 3% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2036 - SSGAII 16% D1320A 16% FXAIX 24% HAITX 18% CSMUX 10% FSMDX 7% D0859A 3% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2037 - SSGAII 16% D1320A 16% FXAIX 24% HAITX 18% CSMUX 10% FSMDX 7% D0859A 3% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2038 - SSGAII 16% D1320A 16% FXAIX 24% HAITX 18% CSMUX 10% FSMDX 7% D0859A 3% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2039 - SSGAII 16% D1320A 16% FXAIX 24% HAITX 19% CSMUX 9% FSMDX 7% D0859A 3% FSSNX 3% JSERX 3%

Advisor GoalMaker AGGRESSIVE 2040 - SSGAII 16% D1320A 16% FXAIX 25% HAITX 19% CSMUX 10% FSMDX 7% FSSNX 4% JSERX 3%

Advisor GoalMaker CONS 2005 - SSGAII 6% D1320A 6% FXAIX 10% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 3% PIMIX 7% D0859A 35% FSSNX 2% JSERX 1% D2101A 18%

Advisor GoalMaker CONS 2006 - SSGAII 6% D1320A 6% FXAIX 10% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 3% PIMIX 7% D0859A 35% FSSNX 2% JSERX 1% D2101A 18%

Advisor GoalMaker CONS 2007 - SSGAII 6% D1320A 6% FXAIX 10% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 3% PIMIX 7% D0859A 35% FSSNX 2% JSERX 1% D2101A 18%

Advisor GoalMaker CONS 2008 - SSGAII 6% D1320A 6% FXAIX 10% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 3% PIMIX 7% D0859A 35% FSSNX 2% JSERX 1% D2101A 18%

Advisor GoalMaker CONS 2009 - SSGAII 6% D1320A 6% FXAIX 10% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 3% PIMIX 7% D0859A 35% FSSNX 2% JSERX 1% D2101A 18%

Advisor GoalMaker CONS 2010 - SSGAII 6% D1320A 7% FXAIX 10% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 3% PIMIX 7% D0859A 34% FSSNX 2% JSERX 1% D2101A 18%

Advisor GoalMaker CONS 2011 - SSGAII 6% D1320A 7% FXAIX 11% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 3% PIMIX 7% D0859A 34% FSSNX 2% JSERX 1% D2101A 17%

Advisor GoalMaker CONS 2012 - SSGAII 7% D1320A 8% FXAIX 11% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 3% PIMIX 7% D0859A 33% FSSNX 2% JSERX 1% D2101A 16%

Advisor GoalMaker CONS 2013 - SSGAII 7% D1320A 8% FXAIX 11% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 3% PIMIX 7% D0859A 33% FSSNX 2% JSERX 1% D2101A 16%

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Advisor GoalMaker CONS 2014 - SSGAII 7% D1320A 8% FXAIX 11% HAITX 4% OIEJX 5% CSMUX 4% FSMDX 3% PIMIX 7% D0859A 33% FSSNX 2% JSERX 1% D2101A 15%

Advisor GoalMaker CONS 2015 - SSGAII 8% D1320A 8% FXAIX 11% HAITX 4% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 7% D0859A 31% FSSNX 2% JSERX 1% D2101A 15%

Advisor GoalMaker CONS 2016 - SSGAII 8% D1320A 8% FXAIX 11% HAITX 4% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 7% D0859A 31% FSSNX 2% JSERX 1% D2101A 15%

Advisor GoalMaker CONS 2017 - SSGAII 8% D1320A 8% FXAIX 12% HAITX 4% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 7% D0859A 29% FSSNX 2% JSERX 2% D2101A 15%

Advisor GoalMaker CONS 2018 - SSGAII 8% D1320A 8% FXAIX 12% HAITX 4% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 7% D0859A 29% FSSNX 2% JSERX 2% D2101A 15%

Advisor GoalMaker CONS 2019 - SSGAII 8% D1320A 8% FXAIX 12% HAITX 4% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 7% D0859A 29% FSSNX 2% JSERX 2% D2101A 15%

Advisor GoalMaker CONS 2020 - SSGAII 8% D1320A 8% FXAIX 12% HAITX 4% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 7% D0859A 29% FSSNX 2% JSERX 2% D2101A 15%

Advisor GoalMaker CONS 2021 - SSGAII 8% D1320A 8% FXAIX 13% HAITX 5% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 7% D0859A 28% FSSNX 2% JSERX 2% D2101A 14%

Advisor GoalMaker CONS 2022 - SSGAII 8% D1320A 8% FXAIX 13% HAITX 5% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 7% D0859A 28% FSSNX 2% JSERX 2% D2101A 14%

Advisor GoalMaker CONS 2023 - SSGAII 8% D1320A 9% FXAIX 13% HAITX 5% OIEJX 5% CSMUX 5% FSMDX 4% PIMIX 7% D0859A 26% FSSNX 2% JSERX 2% D2101A 14%

Advisor GoalMaker CONS 2024 - SSGAII 10% D1320A 10% FXAIX 14% HAITX 11% CSMUX 5% FSMDX 4% PIMIX 9% D0859A 33% FSSNX 2% JSERX 2%

Advisor GoalMaker CONS 2025 - SSGAII 10% D1320A 10% FXAIX 15% HAITX 11% CSMUX 6% FSMDX 4% PIMIX 8% D0859A 32% FSSNX 2% JSERX 2%

Advisor GoalMaker CONS 2026 - SSGAII 10% D1320A 10% FXAIX 15% HAITX 12% CSMUX 6% FSMDX 4% PIMIX 8% D0859A 31% FSSNX 2% JSERX 2%

Advisor GoalMaker CONS 2027 - SSGAII 10% D1320A 11% FXAIX 15% HAITX 12% CSMUX 6% FSMDX 4% PIMIX 8% D0859A 30% FSSNX 2% JSERX 2%

Advisor GoalMaker CONS 2028 - SSGAII 10% D1320A 11% FXAIX 16% HAITX 12% CSMUX 6% FSMDX 5% PIMIX 6% D0859A 30% FSSNX 2% JSERX 2%

Advisor GoalMaker CONS 2029 - SSGAII 10% D1320A 11% FXAIX 16% HAITX 13% CSMUX 7% FSMDX 5% PIMIX 5% D0859A 29% FSSNX 2% JSERX 2%

Advisor GoalMaker CONS 2030 - SSGAII 10% D1320A 11% FXAIX 17% HAITX 13% CSMUX 7% FSMDX 5% PIMIX 5% D0859A 28% FSSNX 2% JSERX 2%

Advisor GoalMaker CONS 2031 - SSGAII 12% D1320A 12% FXAIX 18% HAITX 13% CSMUX 6% FSMDX 5% PIMIX 5% D0859A 25% FSSNX 2% JSERX 2%

Advisor GoalMaker CONS 2032 - SSGAII 12% D1320A 12% FXAIX 18% HAITX 13% CSMUX 6% FSMDX 5% PIMIX 5% D0859A 25% FSSNX 2% JSERX 2%

Advisor GoalMaker CONS 2033 - SSGAII 12% D1320A 12% FXAIX 18% HAITX 14% CSMUX 7% FSMDX 5% PIMIX 5% D0859A 22% FSSNX 3% JSERX 2%

Advisor GoalMaker CONS 2034 - SSGAII 12% D1320A 13% FXAIX 18% HAITX 14% CSMUX 8% FSMDX 5% PIMIX 5% D0859A 20% FSSNX 3% JSERX 2%

Advisor GoalMaker CONS 2035 - SSGAII 12% D1320A 13% FXAIX 19% HAITX 15% CSMUX 7% FSMDX 5% PIMIX 4% D0859A 20% FSSNX 3% JSERX 2%

Advisor GoalMaker CONS 2036 - SSGAII 12% D1320A 13% FXAIX 20% HAITX 15% CSMUX 8% FSMDX 6% PIMIX 4% D0859A 17% FSSNX 3% JSERX 2%

Advisor GoalMaker CONS 2037 - SSGAII 12% D1320A 13% FXAIX 20% HAITX 15% CSMUX 8% FSMDX 6% PIMIX 4% D0859A 17% FSSNX 3% JSERX 2%

Advisor GoalMaker CONS 2038 - SSGAII 14% D1320A 14% FXAIX 20% HAITX 16% CSMUX 8% FSMDX 6% PIMIX 3% D0859A 14% FSSNX 3% JSERX 2%

Advisor GoalMaker CONS 2039 - SSGAII 14% D1320A 14% FXAIX 20% HAITX 16% CSMUX 8% FSMDX 6% PIMIX 3% D0859A 14% FSSNX 3% JSERX 2%

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Advisor GoalMaker CONS 2040 - SSGAII 14% D1320A 14% FXAIX 21% HAITX 16% CSMUX 9% FSMDX 6% PIMIX 3% D0859A 12% FSSNX 3% JSERX 2%

Advisor GoalMaker MODERATE 2005 - D1320A 8% FXAIX 11% SSGAII 6% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 2% PIMIX 6% D0859A 34% FSSNX 2% JSERX 1% D2101A 18%

Advisor GoalMaker MODERATE 2006 - SSGAII 6% D1320A 8% FXAIX 11% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 2% PIMIX 6% D0859A 34% FSSNX 2% JSERX 1% D2101A 18%

Advisor GoalMaker MODERATE 2007 - SSGAII 6% D1320A 8% FXAIX 11% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 2% PIMIX 6% D0859A 34% FSSNX 2% JSERX 1% D2101A 18%

Advisor GoalMaker MODERATE 2008 - SSGAII 6% D1320A 8% FXAIX 11% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 2% PIMIX 6% D0859A 34% FSSNX 2% JSERX 1% D2101A 18%

Advisor GoalMaker MODERATE 2009 - SSGAII 8% D1320A 8% FXAIX 11% HAITX 4% OIEJX 4% CSMUX 4% FSMDX 2% PIMIX 6% D0859A 33% FSSNX 2% JSERX 1% D2101A 17%

Advisor GoalMaker MODERATE 2010 - SSGAII 8% D1320A 8% FXAIX 11% HAITX 4% OIEJX 5% CSMUX 4% FSMDX 3% PIMIX 6% D0859A 32% FSSNX 2% JSERX 1% D2101A 16%

Advisor GoalMaker MODERATE 2011 - SSGAII 8% D1320A 8% FXAIX 11% HAITX 4% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 6% D0859A 31% FSSNX 2% JSERX 1% D2101A 16%

Advisor GoalMaker MODERATE 2012 - SSGAII 8% D1320A 8% FXAIX 12% HAITX 4% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 6% D0859A 30% FSSNX 2% JSERX 2% D2101A 15%

Advisor GoalMaker MODERATE 2013 - SSGAII 8% D1320A 8% FXAIX 12% HAITX 4% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 6% D0859A 30% FSSNX 2% JSERX 2% D2101A 15%

Advisor GoalMaker MODERATE 2014 - SSGAII 8% D1320A 8% FXAIX 13% HAITX 5% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 6% D0859A 29% FSSNX 2% JSERX 2% D2101A 14%

Advisor GoalMaker MODERATE 2015 - SSGAII 8% D1320A 8% FXAIX 13% HAITX 5% OIEJX 5% CSMUX 5% FSMDX 3% PIMIX 6% D0859A 29% FSSNX 2% JSERX 2% D2101A 14%

Advisor GoalMaker MODERATE 2016 - SSGAII 8% D1320A 8% FXAIX 13% HAITX 5% OIEJX 5% CSMUX 5% FSMDX 4% PIMIX 6% D0859A 28% FSSNX 2% JSERX 2% D2101A 14%

Advisor GoalMaker MODERATE 2017 - SSGAII 8% D1320A 9% FXAIX 13% HAITX 5% OIEJX 5% CSMUX 5% FSMDX 4% PIMIX 6% D0859A 28% FSSNX 2% JSERX 2% D2101A 13%

Advisor GoalMaker MODERATE 2018 - SSGAII 8% D1320A 9% FXAIX 13% HAITX 5% OIEJX 6% CSMUX 6% FSMDX 4% PIMIX 6% D0859A 27% FSSNX 2% JSERX 2% D2101A 12%

Advisor GoalMaker MODERATE 2019 - SSGAII 10% D1320A 10% FXAIX 13% HAITX 5% OIEJX 6% CSMUX 6% FSMDX 4% PIMIX 6% D0859A 24% FSSNX 2% JSERX 2% D2101A 12%

Advisor GoalMaker MODERATE 2020 - SSGAII 10% D1320A 10% FXAIX 14% HAITX 5% OIEJX 6% CSMUX 6% FSMDX 4% PIMIX 6% D0859A 24% FSSNX 2% JSERX 2% D2101A 11%

Advisor GoalMaker MODERATE 2021 - SSGAII 10% D1320A 10% FXAIX 15% HAITX 5% OIEJX 6% CSMUX 6% FSMDX 4% PIMIX 6% D0859A 24% FSSNX 2% JSERX 2% D2101A 10%

Advisor GoalMaker MODERATE 2022 - SSGAII 10% D1320A 10% FXAIX 15% HAITX 5% OIEJX 6% CSMUX 6% FSMDX 4% PIMIX 6% D0859A 24% FSSNX 2% JSERX 2% D2101A 10%

Advisor GoalMaker MODERATE 2023 - SSGAII 10% D1320A 10% FXAIX 15% HAITX 6% OIEJX 6% CSMUX 6% FSMDX 5% PIMIX 6% D0859A 22% FSSNX 2% JSERX 2% D2101A 10%

Advisor GoalMaker MODERATE 2024 - SSGAII 10% D1320A 11% FXAIX 16% HAITX 13% CSMUX 7% FSMDX 5% PIMIX 6% D0859A 28% FSSNX 2% JSERX 2%

Advisor GoalMaker MODERATE 2025 - SSGAII 10% D1320A 11% FXAIX 17% HAITX 13% CSMUX 7% FSMDX 5% PIMIX 6% D0859A 27% FSSNX 2% JSERX 2%

Advisor GoalMaker MODERATE 2026 - SSGAII 12% D1320A 11% FXAIX 18% HAITX 13% CSMUX 7% FSMDX 5% PIMIX 6% D0859A 23% FSSNX 3% JSERX 2%

Advisor GoalMaker MODERATE 2027 - SSGAII 12% D1320A 11% FXAIX 18% HAITX 13% CSMUX 7% FSMDX 5% PIMIX 6% D0859A 23% FSSNX 3% JSERX 2%

Advisor GoalMaker MODERATE 2028 - SSGAII 12% D1320A 11% FXAIX 18% HAITX 14% CSMUX 7% FSMDX 5% PIMIX 6% D0859A 22% FSSNX 3% JSERX 2%

Advisor GoalMaker MODERATE 2029 - SSGAII 12% D1320A 12% FXAIX 18% HAITX 14% CSMUX 7% FSMDX 5% PIMIX 5% D0859A 22% FSSNX 3% JSERX 2%

						525127-01
Last Name	First Name	M.I.	Social Se	ecurity Number		Number
Advisor GoalMaker MODI PIMIX 5% D0859A 18% F	ERATE 2030 - SSGAII 12% SSNX 3% JSERX 3%	D1320A 13%	FXAIX 19%	HAITX 14%	CSMUX 8%	FSMDX 5%
Advisor GoalMaker MODI PIMIX 5% D0859A 16% F	ERATE 2031 - SSGAII 12% SSNX 3% JSERX 3%	D1320A 12%	FXAIX 20%	HAITX 15%	CSMUX 8%	FSMDX 6%
Advisor GoalMaker MODI PIMIX 5% D0859A 16% F	ERATE 2032 - SSGAII 12% SSNX 3% JSERX 3%	D1320A 12%	FXAIX 20%	HAITX 15%	CSMUX 8%	FSMDX 6%
Advisor GoalMaker MODI PIMIX 5% D0859A 13% F	ERATE 2033 - SSGAII 14% SSNX 3% JSERX 3%	D1320A 13%	FXAIX 20%	HAITX 15%	CSMUX 8%	FSMDX 6%
Advisor GoalMaker MODI PIMIX 5% D0859A 13% F	ERATE 2034 - SSGAII 14% SSNX 3% JSERX 2%	D1320A 14%	FXAIX 20%	HAITX 16%	CSMUX 7%	FSMDX 6%
Advisor GoalMaker MODI PIMIX 4% D0859A 10% F	ERATE 2035 - SSGAII 14% SSNX 3% JSERX 3%	D1320A 14%	FXAIX 21%	HAITX 16%	CSMUX 9%	FSMDX 6%
Advisor GoalMaker MODI PIMIX 4% D0859A 8% FS	ERATE 2036 - SSGAII 14% SNX 3% JSERX 3%	D1320A 15%	FXAIX 21%	HAITX 17%	CSMUX 9%	FSMDX 6%
Advisor GoalMaker MODI PIMIX 4% D0859A 8% FS	ERATE 2037 - SSGAII 14% SNX 3% JSERX 3%	D1320A 15%	FXAIX 22%	HAITX 17%	CSMUX 8%	FSMDX 6%
Advisor GoalMaker MODI PIMIX 4% D0859A 8% FS	ERATE 2038 - SSGAII 14% SNX 3% JSERX 3%	D1320A 15%	FXAIX 22%	HAITX 17%	CSMUX 8%	FSMDX 6%
Advisor GoalMaker MODI PIMIX 3% D0859A 6% FS	ERATE 2039 - SSGAII 15% SNX 3% JSERX 3%	D1320A 15%	FXAIX 22%	HAITX 17%	CSMUX 9%	FSMDX 7%
Advisor GoalMaker MODI PIMIX 3% D0859A 6% FS	ERATE 2040 - SSGAII 15% SNX 3% JSERX 3%	D1320A 15%	FXAIX 22%	HAITX 17%	CSMUX 9%	FSMDX 7%
	ced quarterly so that your accordect against loss in declining		your selected	Asset Allocat	ion Model. Re	balancing does
necessary to ensure that my p Code. I understand that the m that it is my responsibility to	ument and/or the Code - I ago participation in the Plan is in c aximum annual limit on contri monitor my total annual contri sole liability for any tax, penal	ompliance with butions is deter ributions to ens	any applicable and any applicable and any applicable and any are that I do n	e requirement ne Plan Docum ot exceed the a	of the Plan Delent and/or the	ocument and/or Code. I underst
at the address below prior to allocating them to the defaul- to the payor as required by la System or access the Web site	stand that in the event my Part to the receipt of any deposits, I investment option selected by aw. Once an account has been a in order to transfer monies fro d on my behalf will be applied	I specifically compared the Plan. If not	onsent to Serve default investing my behalf, I investment opti	ice Provider r tment option i understand tha on. Also, I und	etaining all m s selected, fun t I must call the erstand all cor	onies received and swill be returned to the voice Respo
errors. Corrections will be m days, account information sh	derstand that it is my obligation ade only for errors which I contail be deemed accurate and accessed from the date of notificat	mmunicate with ceptable to me	nin 90 calenda . If I notify Se	r days of the la	ıst calendar qı	ıarter. After this
Signature(s) and Consen	t					
Participant Consent						
I have completed, understand	l and agree to all pages of this	Participant En	rollment form.			
Deferral agreements must be	entered into prior to the first of	day of the mon	th that the defe	erral will be ma	ade.	
Participant Signature			Date			
A handwritten signature is r			Dute			

Last Name		First Name	M.I.	Social S	Security Number	525127-01 Number
Authorized Plan Administrato	r Approval					
Authorized Plan Administra	itor Signati	ure		Date		
A handwritten signature is re	equired on t	his form. An electronic si	gnature w	vill not be	accepted and will re	sult in a significant delay.
Print Full Name						
Return form to Alameda Co	unty.					
By regular/express mail: The County of Alameda Treasurer's Office, Attn: DC A 1221 Oak Street, 1st Floor, Ro		By interoffice mail: QIC 20114 Attn: DC Admin		OR	By fax to: 1-510-272-6826	

After all signatures have been obtained, this form can be:

Oakland, CA 94612

Uploaded electronically to: OR Sent regular mail to: OR Sent express mail to:

Login to account at Empower Empower

alamedacountydcp.com PO Box 56025 8515 E. Orchard Road

Click on *Upload Documents* to submit Boston, MA 02205-6025 Greenwood Village, CO 80111

We will not accept hand delivered forms at express mail addresses.

The group variable annuity insurance products are issued through Empower Annuity Insurance Company, Hartford, CT and distributed through Prudential Investment Management Services, LLC (PIMS). Each organization is solely responsible for its financial condition and contractual obligations. PIMS is not affiliated with Empower Retirement, LLC. Annuity contracts contain exclusions, limitations, reductions of benefits and terms for keeping them in force. The annuity or certain of its investment options or features may not be available in all states. Policy forms currently available include DC- 08-TGWB-2011, ALC-408-TGWB-2011-ROTH, IND-IFX-TGWB-2013-NR, IND-IFX-TGWB-2013-ROTH or state variation thereof.

You could lose money by investing in money market investments. Although they seek to preserve the value of your investment at \$1 or \$10.00 per share (see the prospectus), there is no guarantee they will. An investment in a money market investment is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. The money market investment's sponsor has no legal obligation to provide financial support to the portfolio, and you should not expect that the sponsor will provide financial support to the portfolio at any time. The yield quotation more closely reflects the current earnings of the portfolio than the total return quotation.



Beneficiary Designation Governmental 457(b) Plan

525127-01 ALAMEDA COUNTY 457(B) DEFERRED COMPENSATION PLAN For My Information • For questions regarding this form, visit the website at alamedacountydcp.com or contact Service Provider at 1-855-WOW-457B. · Use black or blue ink when completing this form. A | Participant Information Account extension, if applicable, identifies funds transferred to a beneficiary due to participant's death, alternate payee due to divorce or a participant with multiple accounts. Account Extension Social Security Number (Must provide all 9 digits) First Name МΙ Date of Birth Last Name (The name provided MUST match the name on file with Service Provider.) Married Unmarried Beneficiary Designation (Attach an additional sheet to name additional beneficiaries.) Primary Beneficiary Designation (Primary beneficiary designations must total 100% - percentage can be made out to two decimal places.) If I am married, my Plan requires my spouse to be named as primary beneficiary for 100% of my account balance, or my spouse must consent to my beneficiary designation. See the attached examples on how to complete the below beneficiary designations if the beneficiary is a non-individual, such as a trust, charity or estate. % of Account Balance Primary Beneficiary Name Date of Birth Social Security or Taxpayer (Name of Individual, Trust, Charity, etc.) Identification Number or Trust Date Street Address State Relationship (Required - If Relationship is not provided, request will be rejected and sent back for clarification.) Phone Number (Optional) □ Spouse □ Child □ Parent □ Grandchild □ Sibling □ My Estate □ A Trust □ Other Domestic Partner % of Account Balance Primary Beneficiary Name Social Security or Taxpayer Date of Birth (Name of Individual, Trust, Charity, etc.) Identification Number or Trust Date Street Address City State Zip Code Relationship (Required - If Relationship is not provided, request will be rejected and sent back for clarification.) Phone Number (Optional) □ Spouse □ Child □ Parent □ Grandchild □ Sibling □ My Estate □ A Trust □ Other Domestic Partner % Primary Beneficiary Name Date of Birth % of Account Balance Social Security or Taxpayer (Name of Individual, Trust, Charity, etc.) Identification Number or Trust Date Street Address State Zip Code City Relationship (Required - If Relationship is not provided, request will be rejected and sent back for clarification.) Phone Number (Optional) □ Spouse □ Child □ Parent □ Grandchild □ Sibling □ My Estate □ A Trust □ Other Domestic Partner Contingent Beneficiary Designation (Contingent beneficiary designations must total 100% - percentage can be made out to two decimal places.) % of Account Balance Contingent Beneficiary Name Social Security or Taxpayer Date of Birth (Name of Individual, Trust, Charity, etc.) Identification Number or Trust Date Street Address State Zip Code City Relationship (Required - If Relationship is not provided, request will be rejected and sent back for clarification.) Phone Number (Optional) □ Spouse □ Child □ Parent □ Grandchild □ Sibling □ My Estate □ A Trust □ Other Domestic Partner

Last Name	First Name		Social Security Number	525127-01 Number					
Beneficiary Designati	ON (Attach an additional sheet to name add	itional benefici	iaries.)						
Contingent Beneficia	Contingent Beneficiary Designation (Contingent beneficiary designations must total 100% - percentage can be made out to two decimal places.)								
%									
% of Account Balance	Contingent Beneficiary Name (Name of Individual, Trust, Charity, etc.)		Social Security or Taxpayer Identification Number	Date of Birth or Trust Date					
Street Address	City		State	Zip Code					
Phone Number (Optional)		-	anot provided, request will be rejected an Grandchild □ Sibling □ My Est						
% of Account Balance	Contingent Beneficiary Name (Name of Individual, Trust, Charity, etc.)		Social Security or Taxpayer Identification Number	Date of Birth or Trust Date					
Street Address	City		State	Zip Code					
Phone Number (Optional)		•	not provided, request will be rejected an Grandchild □ Sibling □ My Est	,					
Signatures and Cons	ent (Signatures must be on the lines provided.,)							
Participant Consent f	or Beneficiary Designation (Please si	ign on the 'Partic	cipant Signature' line below.)						
above beneficiary designations i	stand and agree to all pages of this Ben ations for my vested account in the event n my account and to update the beneficia change that may impact my beneficiary of	of my death. I ry designation	acknowledge and agree that it is m	y responsibility to monitor the					
If I have more than one primary beneficiary, the account will be divided as specified. If a primary beneficiary predeceases me, his or her benefit will be allocated to the surviving primary beneficiaries. Contingent beneficiaries will receive a benefit only if there is no surviving primary beneficiary, as specified. If a contingent beneficiary predeceases me, his or her benefit will be allocated to the surviving contingent beneficiaries. If I fail to designate beneficiaries, amounts will be paid pursuant to the terms of the Plan or applicable law. This designation is effective upon execution and delivery to Service Provider. If any information is missing, additional information may be required prior to recording my designation.									
	des all prior designations. Beneficiaries wi ally. Primary and contingent beneficiario e: 33.33%).								
Important Notice: If I am r signing the Spousal Cons	narried and I elect a primary beneficiary c ent for Beneficiary Designation section of	other than my this form.	spouse or in addition to my spouse	, my spouse must consent by					
Any person who pre-	sents a false or fraudulent claim is	s subject to	criminal and civil penalties.						
Participant Signatu	ıre		Date (Reg	uired)					
	e is required on this form. An electronic	signature w	` · ·	,					

	Last Name	First Name	M.I.	 - 5	Social Security N	lumber	525127-01 Number
С	Signatures and Consent (Signatures must be on the lines provided.)						
	Spousal Consent for Benefic	ciary Designation	1 (If applicable, please hav	e the Spo	use sign on the 'Sp	ouse's Signature	' line below.)
	Spouse to complete: I, (name of to the participant's primary benefit that I will not receive 100% of his it. I understand that my consent is or her vested account balance.	ciary designation ab s or her vested acco	ove and understand its ount balance under the	effect. I u	understand that r	my spouse's be e's election is r	not valid unless I consent to
	Spouse's Signature					Date (Requ	ired)
	A handwritten signature is requ	iired on this form.	An electronic signatui	e will no	t be accepted a	and will result	in a significant delay.
	The spouse's signature must be no must match the date of the Notary no more than 180 days prior to to or notarial certificate, your spot	Public signature on the effective date of	the separate jurat or no of the original request	otarial cei in order	rtificate or in this to be effective.	section below. If your notary	Consent must be obtained completes a separate jurat
	ATTENTION Notary Public: Mak jurat or notarial certificate, plea	te sure that you ha	ive reviewed the nota ttach to this request.	ry requir	ements for you	r state. If your	state requires a separate
	We require that the following in notarized; (2) the plan name; (3) the do not include this information will and you complete the section below.	the plan number; an be rejected and will	d (4) participant's and s delay the withdrawal re	spouse's quest. If y	names. Separate your state does r	e jurat or notari equire a separa	al certificates submitted that
If your state does not require a separate jurat or notarial certificate, you may complete the notary section below.							
	Statement of Notary	al must be visible. s request was subscrib	ed and s	vorn (or affirmed	()		
	State of)		is day of		,	,	0541
)ss.		-				SEAL
	County/Parish/Borough of)		ne basis of satisfactory fore me, who affirmed the bluntary act.				
	Notary Public's signature					Av commission	expires / /
	A handwritten signature is requ	uired on this form.	An electronic signatui	e will no		,	•
	Notary Public's full name					elephone numb	per
D	Delivery Instructions						
	Return form to Alameda County	<i>ı</i> .					
	By regular/express mail: The County of Alameda Treasurer's Office, Attn: DC Admir 1221 Oak Street, 1st Floor, Room Oakland, CA 94612	QI n Att	interoffice mail: C 20114 n: DC Admin	OR	By fax to: 1-510-272		
	After all signatures have been of	obtained, this form	can be			-	
	Uploaded Electronically: Login to account at alamedacountydcp.com Click on Upload Documents to sul		Sent Regular Mail to Empower PO Box 56025 Boston, MA 02205-60		OR	Sent Express Empower 8515 E. Orcha Greenwood V	

The group variable annuity insurance products are issued through Empower Annuity Insurance Company, Hartford, CT and distributed through Prudential Investment Management Services, LLC (PIMS). Each organization is solely responsible for its financial condition and contractual obligations. PIMS is not affiliated with Empower Retirement, LLC. Annuity contracts contain exclusions, limitations, reductions of benefits and terms for keeping them in force. The annuity or certain of its investment options or features may not be available in all states. Policy forms currently available include DC- 08-TGWB-2011, ALC-408-TGWB-2011-ROTH, IND-IFX-TGWB-2013-NR, IND-IFX-TGWB-2013-ROTH or state variation thereof.

You could lose money by investing in money market investments. Although they seek to preserve the value of your investment at \$1 or \$10.00 per share (see the prospectus), there is no guarantee they will. An investment in a money market investment is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. The money market investment's sponsor has no legal obligation to provide financial support to the portfolio, and you should not expect that the sponsor will provide financial support to the portfolio at any time. The yield quotation more closely reflects the current earnings of the portfolio than the total return quotation.

This page is for informational purposes only - Do not return with the Beneficiary Designation form EXAMPLE BENEFICIARY DESIGNATIONS Example 1: Multiple Individuals as Beneficiaries

=Xa	kample 1. Multiple mulviduals as beneficiaries						
В	Beneficiary Designation	On (Attach an additional sheet to name additi	onal beneficiaries.)				
	Primary Beneficiary D	esignation (Primary beneficiary designation	ons must total 100% - percentage can be made o	ut to two decimal places.)			
	 If I am married, my Plan requires my spouse to be named as primary beneficiary for 100% of my account balance, or my spouse must consent to my beneficiary designation. See the attached examples on how to complete the below beneficiary designations if the beneficiary is a non-individual, such as a trust, charity 						
	or estate. 33.33 %	John M. Doe	XXX-XX-XXXX	01/06/1954			
	% of Account Balance	Primary Beneficiary	Social Security or Taxpayer	Date of Birth			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Name of Individual, Trust, Charity, etc.)	Identification Number	or Trust Date			
	111 Elm Street	Anytown	MO	60000			
	Street Address	City	State	Zip Code			
	(XXX) XXX-XXXX	Relationship (Required - If F	Relationship is not provided, request will be rejected	and sent back for clarification.)			
	Phone Number (Optional)	□ Spouse □ Child □ □ Domestic Partner	Parent ☐ Grandchild ■ Sibling ☐ My E	state A Trust Other			
	33.33 %	Don M. Doe	XXX-XX-XXXX	01/06/1954			
	% of Account Balance	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)	Social Security or Taxpayer Identification Number	Date of Birth or Trust Date			
	222 North Avenue	Anytown	CA	90000			
	Street Address	City	State	Zip Code			
	(XXX) XXX-XXXX	Relationship (Required - If F	Relationship is not provided, request will be rejected	and sent back for clarification.)			
	Phone Number (Optional)	□ Spouse □ Child □ □ Domestic Partner	Parent ☐ Grandchild ■ Sibling ☐ My E	state A Trust Other			
	33.34 %	Michelle L. Doe	XXX-XX-XXXX	01/06/1957			
	% of Account Balance	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)	Social Security or Taxpayer Identification Number	Date of Birth or Trust Date			
	333 West Blvd	Anytown	CO	80000			
	Street Address	City	State	Zip Code			
	(XXX) XXX-XXXX	Relationship (Required - If F	Relationship is not provided, request will be rejected	ejected and sent back for clarification.)			
	Phone Number (Optional)	□ Spouse □ Child □	Parent ☐ Grandchild ■ Sibling ☐ My E	state A Trust Other			
		Domestic Partner					
Exa	mple 2: Trust as Ben	eficiary					
В	· ·	On (Attach an additional sheet to name additi	onal beneficiaries.)				
	Primary Beneficiary D	esignation (Primary beneficiary designation	ons must total 100% - percentage can be made o	ut to two decimal places.)			
	to my beneficiary desig	f I am married, my Plan requires my spouse to be named as primary beneficiary for 100% of my account balance, or my spouse must consent o my beneficiary designation. See the attached examples on how to complete the below beneficiary designations if the beneficiary is a non-individual, such as a trust, charity					
	100 % Trust of Jane Doe XX-XXXXXX 06/30/2015						
	% of Account Balance	Primary Beneficiary	Social Security or Taxpayer	Date of Birth			
		(Name of Individual, Trust, Charity, etc.)	Identification Number	or Trust Date			
	150 Main Street	Anytown	MO	60000			
	Street Address	City	State	Zip Code			
	(XXX) XXX-XXXX	Relationship (Required - If F	Relationship is not provided, request will be rejected	and sent back for clarification.)			
	Phone Number (Optional)	☐ Spouse ☐ Child ☐ ☐ Domestic Partner	Parent Grandchild Sibling My E	state A Trust Other			

This page is for informational purposes only - Do not return with the Beneficiary Designation form EXAMPLE BENEFICIARY DESIGNATIONS

Example 3: Estate as Beneficiary

В	Beneficiary Designation	on (Attach an additional sheet to name additional	al beneficiaries.)					
	Primary Beneficiary D	Primary Beneficiary Designation (Primary beneficiary designations must total 100% - percentage can be made out to two decimal places.)						
	to my beneficiary designation. See the attached example of the control of the con	n requires my spouse to be named as primary gnation. pples on how to complete the below beneficiary	•	• •				
	or estate.	Estate of Anne Doe		1 1				
	% of Account Balance	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)	Social Security or Taxpayer Identification Number	Date of Birth or Trust Date				
	45 East Road	Anytown	MO	60000				
	Street Address	City	State	Zip Code				
	(XXX) XXX-XXXX Relationship (Required - If Relationship is not provided, request will be rejected and sent back for clarification							
	Phone Number (Optional)							
		☐ Domestic Partner						
Exa	ample 4: Charity as Bo	eneficiary						
В	Beneficiary Designation (Attach an additional sheet to name additional beneficiaries.)							
	Primary Beneficiary Designation (Primary beneficiary designations must total 100% - percentage can be made out to two decimal places.)							
	to my beneficiary design	n requires my spouse to be named as primary gnation. pples on how to complete the below beneficiary	,	, , ,				
	100 %	ABC Charity	XX-XXXXXXX	1 1				
	% of Account Balance	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)	Social Security or Taxpayer Identification Number	Date of Birth or Trust Date				
	75 South Place	Anytown	CO	80000				
	Street Address	City	State	Zip Code				
	(XXX) XXX-XXXX	Relationship (Required - If Rela	ationship is not provided, request will be rejected	and sent back for clarification.)				
	Phone Number (Optional)	☐ Spouse ☐ Child ☐ Pa	rent 🛘 Grandchild 🖵 Sibling 🖵 My E	state A Trust Other				
		Domestic Partner						