

457

**DEFERRED COMPENSATION PLAN
Benefit Withdrawal Packet**



ICMA RETIREMENT CORPORATION
The Public Sector Expert

This booklet contains the following forms:

- 457 Withdrawal Form
- 457 Direct Deposit Authorization Form
- 457 Beneficiary Designation Form
- 457 Deferred Compensation Plan Request for Benefit Illustrations
- IRS Form W-4P

Additional Enclosures:

- "Transferring Your ICMA-RC Retirement Plan Account to a Vantagepoint IRA" kit

This packet allows you to:

- Take benefit withdrawals from your ICMA-RC 457 deferred compensation plan account.
- Transfer your ICMA-RC 457 deferred compensation plan account to a Vantagepoint Traditional IRA with ICMA-RC (Please see the enclosed "Transferring Your ICMA-RC Retirement Plan Account to a Vantagepoint IRA" kit

Dear Participant:

The ICMA Retirement Corporation (ICMA-RC) would like to thank you for saving your retirement assets in a Section 457 Deferred Compensation Plan (457 plan) with us. Generally, you are only eligible to begin benefit payments from your 457 plan at retirement or when you separate from service with your employer. This packet details many of the available choices for you to receive your benefit payments such as:

Periodic Payment Schedules – Allows you to retain your 457 account, including your current investment options, and receive periodic payments based on a schedule of your choosing. You may change this schedule at any time. For this option, please refer to “Choosing a Payment Schedule” on page 4.

Transfer to a Vantagepoint Traditional IRA – You may transfer all or a portion of your 457 account into ICMA-RC's Vantagepoint Traditional IRA. The Vantagepoint IRA* offers competitive fees and a broad array of investment options, including our self-directed brokerage program, VantageBroker**. For this option, please see the “Transferring Your ICMA-RC Retirement Plan Account to a Vantagepoint IRA” kit enclosed in this envelope.

Immediate Retirement Annuity – You may use all or a portion of your 457 account to purchase a retirement distribution annuity. If you decide to use this option, you may take advantage of ICMA-RC's Income for Life Annuity Program***. For this option, please refer to “Retirement Annuities” on page 5.

Lump Sum Payment – You may receive all or a portion of your 457 account as a lump sum distribution. Note: If you elect this option, your payment will be subject to 20% mandatory federal income tax withholding and state withholding may also apply. For this option, please refer to “One-Time Withdrawals” on page 5.

For other options, please contact Investor Services at 1-800-669-7400 to obtain the proper forms.

An important benefit of a 457 plan is that 457 assets are NOT subject to the 10% early distribution penalty tax for payments under age 59 1/2. This benefit only applies to payments of 457 assets from 457 plans. When 457 assets are rolled to another type of retirement plan such as a 401(a), 401(k) or IRA, this benefit is lost and the former 457 assets become subject to the 10% early distribution penalty tax for payments under age 59 1/2.

Another important benefit of your 457 plan is that you do not have to choose a date for beginning your payment(s) until you are ready for your payment(s) to start. However, due to Internal Revenue Service rules, you must start receiving payments the later of the year you turn 70 1/2 or the year you separate from service from your employer.

If you are changing jobs or retiring, you are likely to face many difficult financial decisions. Our Investor Services Representatives are prepared to assist you with questions about withdrawals from or transfers to your ICMA-RC 457 plan, transfers to other retirement plans, or investments available under your 457 plan or under an ICMA-RC's Vantagepoint IRA. Please contact us toll-free at 1-800-669-7400 or via our VantageLink website at www.icmarc.org.

Sincerely,

Investor Services

* Please consult the current Vantagepoint Funds prospectus carefully prior to investing any money. Vantagepoint securities are distributed by ICMA-RC Services, LLC, a broker-dealer affiliate of the ICMA Retirement Corporation, member NASD/SIPC. ** ICMA Retirement Corporation provides plan administration and access to UVEST Financial Services. UVEST provides brokerage services. These two entities are not affiliated. Securities are offered by UVEST Financial Services, member NASD/SIPC. *** Annuities are insurance products available through companies not affiliated with the ICMA Retirement Corporation. Please consult *Income for Life Annuity Program: Immediate Annuities for Retirement Income* prior to purchasing an annuity.



Forms Included

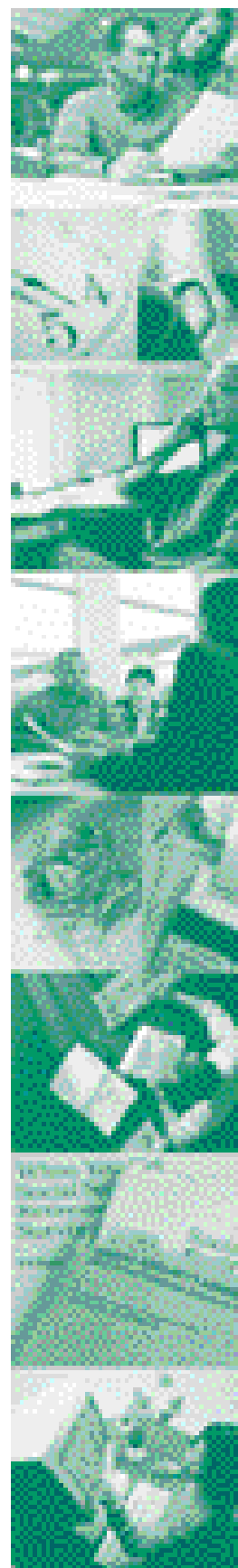
Forms	Purpose
<i>457 Deferred Compensation Plan EZ Benefit Withdrawal Form</i>	To request a monthly payment schedule or a partial or a full lump-sum ONLY.
<i>457 Deferred Compensation Plan LONG Benefit Withdrawal Form</i>	To request many different payment options.
<i>457 Direct Deposit Authorization Form</i>	To initiate direct deposit of disbursements electronically into your bank account. For periodic payment schedules ONLY.
<i>457 Designation of Beneficiary Form</i>	To designate your beneficiary(ies) for your retirement account.
<i>457 Request for Benefit Illustrations Form</i>	To request illustrations of possible benefit payouts.

Additional Enclosures

<i>Transferring Your ICMA-RC Retirement Plan Account to a Vantagepoint IRA kit</i>	To transfer your ICMA-RC 457 plan assets to a Vantagepoint Traditional IRA with ICMA-RC.
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457 Deferred Compensation Plan Withdrawal Packet Instructions

Type of Withdrawal	Please Submit
Retirement or Separation from Service – Payment to you the participant	<input type="checkbox"/> <i>457 EZ Benefit Withdrawal Form</i> <input type="checkbox"/> IRS Form <i>W-4P</i> (if applicable) <input type="checkbox"/> State Withholding Form (if applicable) <input type="checkbox"/> <i>457 Direct Deposit Authorization Form</i> (if applicable) OR <input type="checkbox"/> <i>457 LONG Benefit Withdrawal Form</i> <input type="checkbox"/> IRS Form <i>W-4P</i> (if applicable) <input type="checkbox"/> State Withholding Form (if applicable) <input type="checkbox"/> <i>457 Direct Deposit Authorization Form</i> (if applicable)
Transfer Funds to a Vantagepoint Traditional IRA	Please see the enclosed kit "Transferring Your ICMA-RC Retirement Plan Account to a Vantagepoint IRA"
Small Balance Withdrawal (<i>\$5,000 or less in account value and still employed</i>)	Please call toll-free 1-800-669-7400 to see if you are eligible for a small balance withdrawal.
Domestic Relations Order (DRO)	Please call toll-free 1-800-669-7400 and request to speak to ICMA-RC's Legal Department about a DRO.
Beneficiary Payments	Please call toll-free 1-800-669-7400 and request a <i>457 Deferred Compensation Plan Beneficiary Withdrawal Packet</i> .
Transfer funds to another retirement plan with ICMA-RC	Please call toll free 1-800-669-7400 and request a <i>Trustee-to-Trustee Transfer To the ICMA Retirement Corporation Packet</i> .
Transfer funds to another 401 or 457 plan with another provider	Please call toll free 1-800-669-7400 and request a <i>Trustee-to-Trustee Transfer Out of the ICMA Retirement Corporation Packet</i> .
Purchase Service Credits from a Defined Benefit Plan	Please call toll free 1-800-669-7400 and request a <i>Purchase of Prior Service Credit Packet</i> .
Emergency Withdrawal	Please call toll free 1-800-669-7400 and request a <i>457 Emergency Withdrawal Packet</i> .
Change current payment schedule	Please call toll free 1-800-669-7400 and request a <i>Payment Schedule Change Form</i> .



Your Benefit Payments

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GENERAL INFORMATION

Considering Your Withdrawal Benefits

You are eligible to begin benefit payments from your account at retirement or when you leave employment, either by resignation or release by employer.

Once eligible, you have many flexible benefit payment options. How and when you choose to take payments from your 457 Plan are important decisions you must make. There are many considerations—the form of payment, the tax consequences, and your other retirement income.

Whether you are planning a benefit payment schedule for retirement or considering withdrawals upon termination, you should review several facts before you take any action with your account:

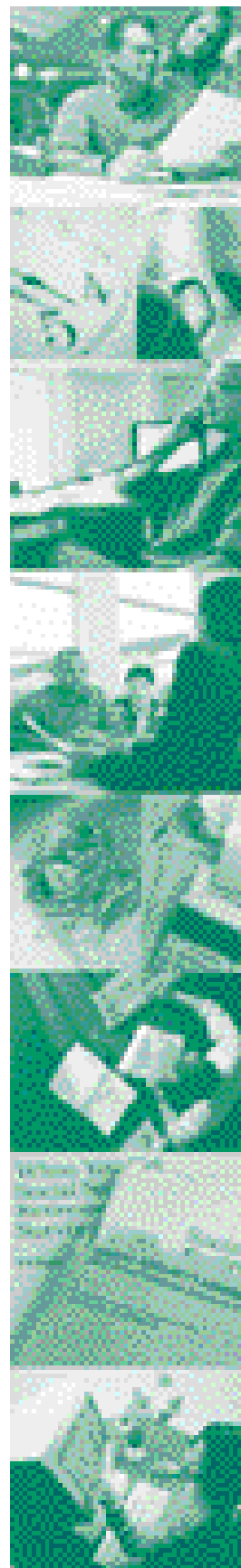
- You only pay taxes on money you receive.
- Funds remaining in your account have the potential for earnings until they are withdrawn, and your contributions plus all of your earnings are not taxed until you receive them.
- You may continue to select investments for assets remaining in your account as allowed by your employer's plan and you will receive statements as you did while actively contributing to your account.
- Any remaining account balance will be available for distribution to your beneficiary(ies) after your death.
- You will be subject to 20% mandatory federal tax withholding if you elect to directly receive funds eligible for rollover to another employer plan or an IRA. Please consult the *Special Tax Notice Regarding Plan Payments* included in this packet.
- You are currently invested in an employer-sponsored retirement plan that may allow you to benefit from lower fees than you would commonly find through other types of retirement accounts.
- Regardless of age, you are not subjected to the 10% early withdrawal penalty tax for withdrawals of 457 funds you contributed through payroll deduction with your employer or rollovers from another 457 plan.
- You may be subject to the 10% early withdrawal penalty tax for withdrawals of non-457 plan rollovers.

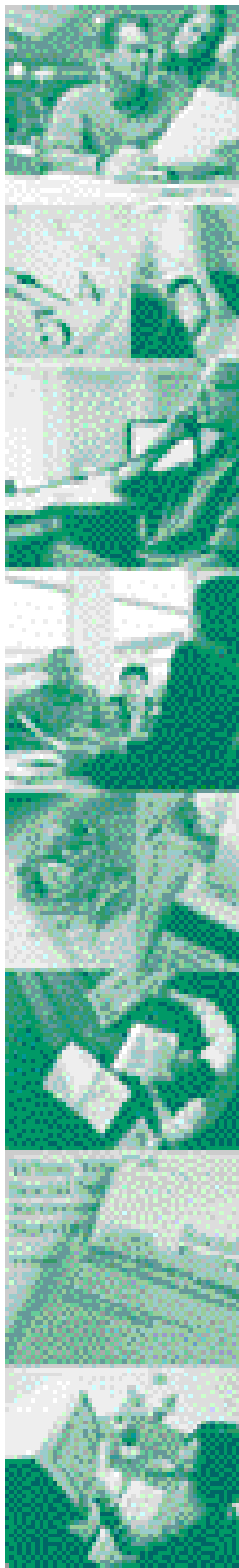
Applications for withdrawals, the *Special Tax Notice Regarding Plan Payments*, tax withholding forms, direct deposit authorization and benefit illustration request forms are included in this packet. Please call ICMA-RC Investor Services at 1-800-669-7400 for additional forms or further information.

Leaving Employment

If you terminate employment—whether by resignation, release by employer, disability, or retirement—you are eligible to receive benefit payments from your account.

To request benefit payments upon leaving employment, complete the *457 Deferred Compensation Plan EZ or LONG Benefit Withdrawal Form* and submit it to your employer for approval. Submitting the withdrawal request to ICMA-RC prior to employer approval may result in a payment delay. Subsequent requests may be submitted directly to ICMA-RC without employer approval using another *457 EZ or LONG Withdrawal Form* or the *Payment Schedule Change Form*.





CHOOSING A PAYMENT DATE

You have the flexibility to choose a beginning payment date at any time after leaving employment. Your beginning payment date must be no later than April 1 of the calendar year following the year (1) in which you reach age 70 1/2 or (2) you leave employment, whichever is later. Please notify ICMA-RC of your beginning payment date selection at least two weeks prior to that beginning payment date.

If your account balance is \$1,000 or more and you are not required to take a minimum distributions, you do not have to make an election at this time and ICMA-RC will not commence distributions without your consent and your employer's approval (for the initial payment only). If you would like ICMA-RC to have your termination information on file, please complete the *457 EZ Withdrawal Form*, select the Defer Payment option, and have your Employer sign section 5.

If your account balance is less than \$1,000, you should make an election at this time. If not, ICMA-RC will commence distribution under our Automatic Distribution provision and your consent is not required. Written notification will be mailed to you 30 days prior to the Automatic Distribution date to allow you time to make an election. Please refer to "Special Circumstances" on Page 8 for more information.

CHOOSING A PAYMENT SCHEDULE

We recommend selecting your payment schedule at least two weeks prior to your beginning payment date. You may change your payment schedule at any time. The payment schedule you choose should take into account all other income you will have during retirement: Social Security, spouse's income, investment income, and your pension plan.

As an added service to participants, we offer benefit illustrations free of charge. Benefit illustrations summarize the potential future value of your account and available payment schedules, based upon the amount you contribute, estimated earnings, and other factors. Benefit illustrations may be requested from ICMA-RC by completing the *457 Request for Benefit Illustrations Form* included in this packet.

20% Withholding: ICMA-RC is required by law to apply mandatory 20% federal income tax withholding on most payment schedules lasting under 10 years. You should give this consideration as you determine your payment schedule. Of course, if your payments are subject to 20% mandatory withholding, depending upon your overall tax situation, you may receive the withheld tax back as a refund when you file your tax return for that year. State tax withholding may also apply. Please see "Important Internal Revenue Service Information" later in this brochure and the *Special Tax Notice Regarding Plan Payments* included in this packet.

Periodic Installment Payments

You may choose a payment method including a series of periodic installment payments or a partial payment with periodic installment payments to follow. Please keep in mind that the minimum scheduled payment amount is \$100 per period.

You may take your scheduled periodic installment payments in the following manner:

Scheduled Installment Payments – ICMA-RC can make monthly, quarterly, semi-annual (at 6-month intervals only), or annual payments to you until your assets are fully distributed. Periodic installment payments include:

- Equal dollar payments chosen by you to continue until the account is exhausted
 - Only Monthly Scheduled Payments are available as the first option in Section 2 of the *457 EZ Withdrawal Form*
 - Many different schedules are available as Option A in Section 3 of the *457 LONG Withdrawal Form*

- Equal dollar payments estimated to exhaust the account over a specified period of years
 - You may choose to have ICMA-RC estimate a dollar amount projected to last a specified number of years, or
 - You may choose the number of years according to your life expectancy at the time your withdrawal is to begin. (ICMA-RC will use the applicable IRS tables at the time your withdrawal form is processed. You may use either single or joint life tables. If you choose joint life, you must provide your beneficiary's date of birth and relationship to you.)
 - Available as Option A in Section 3 of the 457 LONG Withdrawal Form

Fractional Payments – You choose the number of payments you want to receive. This schedule will last for exactly the time period you choose. Payment amounts will fluctuate up and down with market conditions depending upon the fund(s) in which you are invested.

- Available as Option B in Section 3 of the 457 LONG Withdrawal Form

Partial Payment with Periodic Installment Payments to Follow – You may receive a payment for a portion of your account, then request periodic installment payments to start at a later date.

- Available as Option D in Section 3 of the 457 LONG Withdrawal Form

Automatic Cost-of-Living Adjustment (COLA) – An automatic cost-of-living adjustment (COLA) is available for scheduled installment payments (not Fractional Payments). The COLA option appeals to participants who want their payments to keep pace with inflation. The COLA will be based on the 12-month percentage increase in the Consumer Price Index for All Urban Consumers (CPI-U) through the end of the third quarter of the previous year. Increases in periodic payments will be made beginning the following January.*

- Available in Part 5 of Section 3a of the 457 LONG Withdrawal Form

One-Time Withdrawals

You may elect to take a part or all of your account balance as a one-time payment.

Partial Payment – You may receive a single payment for a portion of your account. This payment is immediately taxable (see exception below) and is subject to mandatory 20% federal income tax withholding. State income tax withholding may also apply.

- Available as the second option in Section 2 of the 457 EZ Withdrawal Form
- Available as Option C in Section 3 of the 457 LONG Withdrawal Form

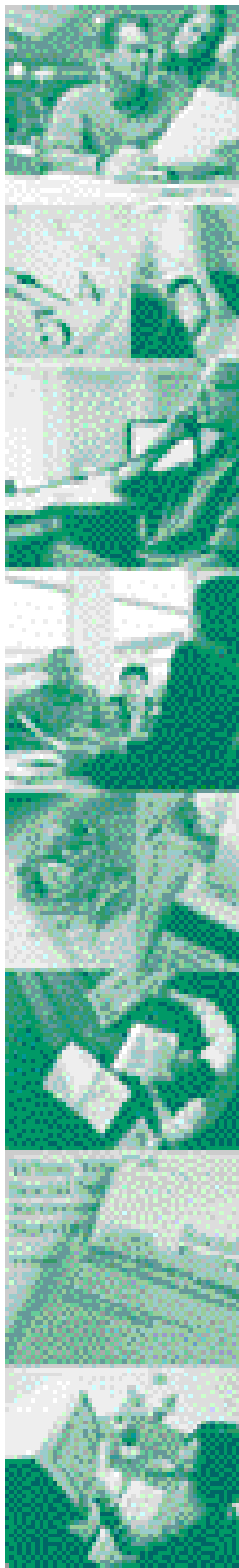
Lump Sum Withdrawal of Entire Account – If you receive a lump sum withdrawal of your entire account, the entire amount will be immediately taxable (see exception below). In addition, ICMA-RC is required to apply mandatory 20% federal income tax withholding on the payment. State income tax withholding may also apply.

- Available as the third option in Section 2 of the 457 EZ Withdrawal Form
- Available as Option E in Section 3 of the 457 LONG Withdrawal Form

Exception – If you roll over a part or all of your lump-sum withdrawal to a 457 plan, 401 plan, 403(b) plan, or Traditional Individual Retirement Account (IRA) within 60 days of distribution, those assets will continue to retain their tax-deferred status, and as a result, will not be considered a taxable distribution.

* Be aware that by choosing payments of a specified amount, increased by COLA, your account will deplete faster than if the COLA option is not elected. For determining beginning payment amounts, cost-of-living increases are estimated assuming a constant cost-of-living increase of 3%. Actual changes in the CPI-U of more than 3% will result in fewer payments than estimated for payment schedules with the COLA option; actual CPI-U changes of less than 3% will result in more payments for these schedules. The COLA option may not be a feature available under your employer's plan, so please check with your employer before considering this option.





Retirement Annuities

ICMA-RC can also help you arrange the purchase of an annuity through an insurance company at group rates. Annuities are available for your life with a guaranteed number of years of payout, or the joint lives of you and a survivor. Please call Investor Services at 1-800-669-7400 to speak with an Annuity Specialist for additional information and forms.

Withdrawals Before Age 59 1/2

457 plan assets that remain in a 457 plan until paid to you are never subject to a 10% early withdrawal penalty under IRC Section 72(t). However, if you roll assets into your 457 plan from another type of plan (401, 403(b), or Traditional IRA), these rolled in assets may be subject to the penalty tax if you subsequently withdraw them from your 457 plan before you have reached age 59 1/2 (Please refer to section called "Non-457 Plan Assets In A 457 Plan").

IRS Required Minimum Distributions

Any payments you receive in or after the year you turn 70 1/2 must meet the required minimum distribution requirements of the Internal Revenue Code (explained in IRS Publication 590). After you reach age 70 1/2, ICMA-RC will test your schedule of payments annually. If your payment schedule fails to pass the test, we will change your schedule to meet the required minimum amount. Required minimum distributions are not eligible rollover distributions and are not subject to mandatory 20% withholding.

To select IRS Required Minimum Distribution Payments:

1. Use the *457 LONG Withdrawal Form*
2. Check "Option A" in Section 3
3. Circle your selections in Part 1 and Part 2 of Section 3a
4. Check "Payments calculated each year to comply with the IRS Required Minimum Distribution Rules" in Part 3 of Section 3a
5. Check "As soon as possible" or enter a starting month in the current year in Part 4 of Section 3a
6. Skip Part 5 of Section 3a

Direct Transfer to a Vantagepoint Traditional IRA with ICMA-RC

You have the option of transferring your ICMA-RC 457 plan assets to a Vantagepoint Traditional IRA*. Please see the enclosed "Transferring Your ICMA-RC Retirement Plan Account to a Vantagepoint IRA" kit for details.

Assets may also be transferred to (1) an ICMA-RC 457 plan with another employer, (2) an ICMA-RC 401 plan with another employer, or (3) another plan provider with whom you maintain a Traditional IRA, 401 plan, 403(b) plan, or 457 plan account. If you want to transfer assets to a plan other than a Vantagepoint IRA, please contact Investor Services at 1-800-669-7400 to obtain the proper forms.

A direct transfer to a Vantagepoint Traditional IRA or any of the other plans referenced immediately above is not subject to the 20% withholding tax.

Please note if you transfer your 457 assets to a Traditional IRA, 401 plan, or 403(b) plan, the assets transferred will be subject to a 10% early withdrawal penalty if withdrawn from the plan prior to age 59 1/2, unless another exception to the penalty applies.

* Please consult the current Vantagepoint Funds prospectus carefully prior to investing any money. Vantagepoint securities are distributed by ICMA-RC Services, LLC, a broker-dealer affiliate of the ICMA Retirement Corporation, member NASD/SIPC. ICMA-RC Services, LLC, 777 North Capitol Street NE, Washington, DC 20002-4240.

NON-457 PLAN ASSETS IN A 457 PLAN

If your account has been funded entirely by 457 assets, please skip the instructions on this page.

457 plan assets that remain in a 457 plan until paid to you are never subject to the 10% early withdrawal penalty tax. However, you can roll assets into your 457 plan from another type of retirement plan (401, 403(b), or Traditional IRA) and these assets may be subject to the 10% early withdrawal penalty tax.

Common retirement plan exceptions to the 10% early withdrawal penalty tax:

1. Withdrawal after or on the day you turn 59 1/2
2. Withdrawal after or in the year you turn 55 but only if your separation from service occurred in the year you reached age 55 or older. This exception does not apply to assets in IRAs and may not apply to IRA assets rolled into 457 plans.
3. Withdrawal payments on a 72(t) "Qualified" payment schedule:
 - a. Receiving equal (or almost equal) payments at least annually over your life expectancy, the life expectancy of you and your beneficiary, or by using another IRS approved method under IRC 72(t)
 - b. These payments must continue for the greater of 5 years or until age 59 1/2, or all the money withdrawn will become subject to the 10% early distribution penalty tax
4. Additional exceptions are listed in IRS Publication 590 which is available on the IRS website (www.irs.gov).

Examples of 10% early withdrawal penalty tax exceptions:

Example 1: You are age 58 now and you terminated employment at age 55. You can take any payment and not be subject to the 10% early distribution penalty tax. This may not apply to IRA assets rolled into 457 plans.

Example 2: You are age 58 now and you terminated employment at age 52. In order to receive payments not subject to the additional 10% early distribution penalty tax, you would need to take payments over a 72(t) "Qualified" payment schedule until at least age 63. Another option would be to wait to receive payments until age 59 1/2.

Example 3: You are age 52 now and you terminated employment at age 52. In order to receive payments not subject to the additional 10% early distribution penalty tax, you would need to take payments over a 72(t) "Qualified" payment schedule until at least age 59 1/2.

The IRS has very specific rules to determine a 72(t) "Qualified" payment schedule and we recommend you consult with your local Retirement Plan Specialist who may be able to help you. Ultimately, you are responsible for selecting a 72(t) "Qualified" payment schedule. If the IRS determines that your schedule is not 72(t) "Qualified", you may owe additional taxes as well as penalties to the IRS.

Possible scenarios:

Scenario #1: 457 plan assets only

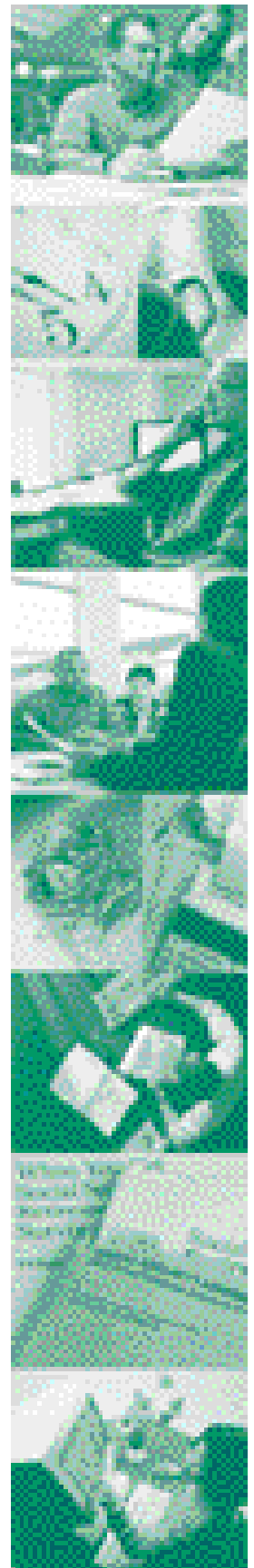
Action: These instructions do not apply to you. If using the 457 LONG Withdrawal Form, please skip section 4b.

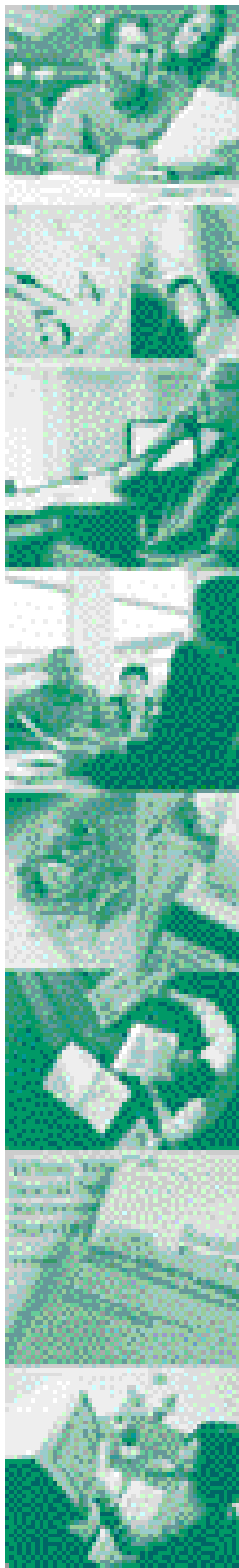
Scenario #2: 457 money and non-457 rollover money on the same payment schedule

Action: Complete either the 457 EZ or LONG Withdrawal Form. If using the 457 LONG Withdrawal Form, please skip section 4b.

Scenario #3: 457 money and non-457 rollover money on different payment schedules

- Action:
1. You can not use the 457 EZ Withdrawal Form
 2. You need two copies of the 457 LONG Withdrawal Form (only one copy is included in this packet)
 3. Complete one copy with your selected payment schedule for your 457 money
 - a. Select "Withdrawal from 457 assets in 457 plan ONLY" in Section 4b
 4. Complete the other copy with your selected payment schedule for your non-457 rollover money
 - a. If you have determined that your selection is a 72(t) "Qualified" payment schedule, check "This schedule is 72(t) compliant" in Part 5 of Section 3a
 - b. Select "Withdrawal from non-457 assets in 457 plan ONLY" in Section 4b





PAYMENT DELIVERY OPTIONS

Depletion Order

457 LONG Withdrawal Form Section 4a

You have the option of specifying the order of investments from which to liquidate your funds. You may select a maximum of three (3) funds. Once the account balance of your third fund is depleted, your withdrawals will be prorated across all of your remaining funds. If you leave this part blank, your withdrawals will be prorated across all funds.

457 LONG Withdrawal Form Section 4b

If your 457 plan only contains 457 plan assets, this part does not apply to your account.

You have the option of specifying the type of assets from which to liquidate. Your options are (1) 457 assets Only, (2) non-457 assets Only, or (3) prorate among all assets. If you would like to establish different scheduled installment payments for your different types of assets within the same 457 plan, you must complete separate 457 LONG Withdrawal Forms. Please refer to the section called "Non-457 Plan Assets In A 457 Plan" on page 7. If you leave this part blank, ICMA-RC will distribute your 457 assets first in order to postpone possible application of the 10% early withdrawal penalty tax on any non-457 assets in your 457 plan.

Direct Deposit

457 EZ Withdrawal Form Section 4 or 457 LONG Withdrawal Form Section 7

For Scheduled Installment Payments ONLY, ICMA-RC provides for direct electronic deposit of payments to your bank account—a more secure, more timely, and easier method provided at no cost to you. By electing this option through the 457 Direct Deposit Authorization Form, you instruct ICMA-RC to electronically deposit your periodic payments directly into your checking or savings account on the same day we mail checks to other participants. Your payment will be available to you three to five days earlier than if you waited for a mailed check that could be damaged or delayed, could arrive while you are away from home, and could result in the inconvenience of standing in line at your bank.

Incorrect or incomplete information will delay processing of your request. Please note direct deposits must go through a test transmission with your bank before you receive your payments. We strive for a successful test transmission prior to your first payment date, but this may not always be possible. If problems are encountered and are not resolved prior to your first payment, you will receive a check rather than an electronic deposit. Please contact Investor Services for additional information.

Currently, ICMA-RC cannot directly deposit lump-sum or one-time payments.

SPECIAL CIRCUMSTANCES

Multiple Accounts

If you have more than one ICMA-RC account with different employers, you can either choose the same payout schedule for all accounts or establish different payout schedules for each account. You will receive a separate check/direct deposit for each account. Separate 457 EZ or LONG Withdrawal Forms, each approved by the respective employer for the initial request, must be submitted to initiate disbursement from each account.

Balances of less than \$5,000 - Small Balance Account Distributions

Balances of less than \$1,000 - Automatic Distribution - If your account balance is less than \$1,000 and your account has not received contributions for at least 2 years, your account will be distributed to you as soon as administratively possible in a lump sum. You will not have the option of keeping your assets in the account. The automatic distribution

policy also applies if your account balance is less than \$1,000 and your employer notifies us of your separation of service. However, you may be able to transfer the funds directly to another employer retirement plan or Traditional IRA. See the *Special Tax Notice Regarding Plan Payments* included with this packet for more details.

Balances more than \$1,000 up to \$5,000 - Voluntary Distribution - You may be eligible, if permitted under the terms of your employer's plan, to take a distribution of your account while you are still employed if your balance is \$5,000 or less and your account has not received contributions for at least two years. The small account distribution option feature may not be available under the terms of your employer's plan, so please check with your employer before considering this option. If you confirm that this option is available under your employer's plan, please request a *457 Small Balance Account Distribution Form* from Investor Services at 1-800-669-7400.

Death Benefits

In the event of your death, your beneficiary is eligible to withdraw your deferred compensation account balance. Beneficiaries generally can select among the payment options available through your employer's plan. However, required minimum distributions rules are more restrictive for beneficiaries.

To initiate a payment request, a beneficiary should submit an employer-approved *457 Beneficiary Withdrawal Form* with a certified or original copy of the death certificate. The *457 Beneficiary Withdrawal Form* and complete details on beneficiary distributions are included in the *457 Beneficiary Withdrawal Packet* that is available by contacting Investor Services at 1-800-669-7400.

Loans

Special provisions exist regarding applicability of tax withholding to loans either deemed distributed or offset. Contact Investor Services at 1-800-669-7400 for more information.

Domestic Relations Orders

A Domestic Relations Order (DRO) is an order issued by a court, usually in connection with a divorce or legal separation. In the event of a DRO, the spouse or former spouse is usually considered the "alternate payee." Payments made to a spouse or former spouse are eligible to be rolled to another retirement plan or IRA. Therefore if not rolled, payments are subject to 20% mandatory federal withholding. Payments made to a non-spouse or non-former spouse are not eligible to be rolled to another retirement plan or IRA. Therefore, payments are not subject to the 20% mandatory federal withholding. Please consult the *Special Tax Notice Regarding Plan Payments* for more details.

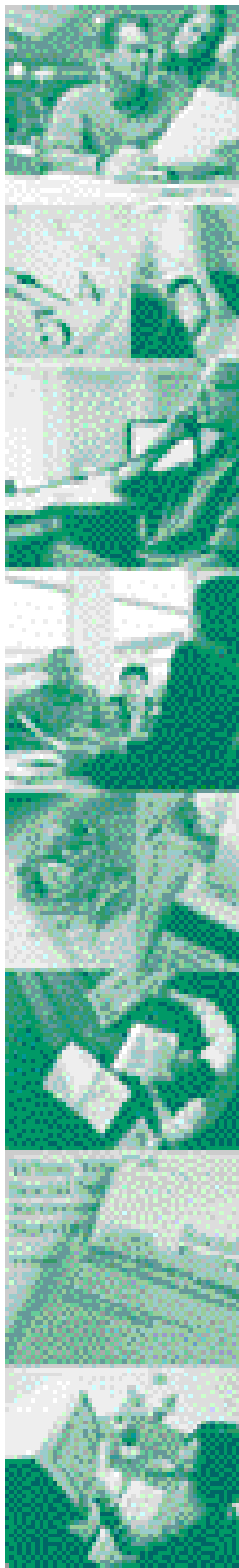
Please send ICMA-RC's Legal Department a copy of the domestic relations order awarding the alternate payee all or a portion of your account. Please note that the enclosed *457 Deferred Compensation Plan EZ* or *LONG Benefit Withdrawal Form* cannot be used for purposes of distributing an account due to a domestic relations order. Please contact Investor Services at 1-800-669-7400 to obtain the *457/401 Deferred Compensation Plan Withdrawal for Domestic Relations Orders* form.

VantageBroker*

Your payments will be withdrawn on a prorated basis from all selected funds with the exception of assets in a VantageBroker account. If you wish to withdraw funds from a VantageBroker account, you must first transfer these assets back to your core account with ICMA-RC. You may not withdraw assets directly from your VantageBroker account. To initiate the liquidation of your VantageBroker account and transfer the assets back to your core account, please call a VantageBroker associate at 1-800-669-7400. Settlement of the sale of assets held in VantageBroker accounts may take up to three days.

* Securities offered by UVEST Financial Services, member NASD/SIPC. Not affiliated with ICMA-RC





IMPORTANT INTERNAL REVENUE SERVICE INFORMATION

Tax Withholding

Federal Withholding

The Internal Revenue Code provides that if your distribution is considered an “eligible rollover distribution”, the distribution will be subject to 20% mandatory federal income tax withholding unless you have the payment transferred directly to another employer’s plan [i.e. 401, 403(b), 457] or an IRA. Please consult the *Special Tax Notice Regarding Plan Payments* to determine whether your withdrawal is subject to the rollover distribution provision and 20% mandatory withholding requirement.

Non-Eligible vs. Eligible Rollover Distributions

The following types of payments are not eligible for direct rollover and thus are not subject to mandatory 20% federal income tax withholding:

- Payments made over long periods of time - you cannot roll over a payment if it is part of a series of equal or almost equal payments that are made over:
 - Your life expectancy (or joint life expectancy with beneficiary),
 - A period of ten years or more.
- Required Minimum Distributions beginning when you reach age 70 1/2 or retire, whichever is later.
- Emergency Withdrawals - distributions from your account based upon an immediate and heavy financial need. Please call toll free 1-800-669-7400 and request a *457 Emergency Withdrawal Packet*.
- Non-spousal beneficiary payments

If your payment is **not** considered an eligible rollover distribution and thus not subject to 20% federal income tax withholding, ICMA-RC will withhold taxes on your withdrawals according to your Form W-4P. ICMA-RC will honor a Form W-4P requesting no withholding unless you are a nonresident alien. If you request no withholding, you may need to meet IRS requirements for payment of estimated taxes by year-end. If you do not submit a Form W-4P on a non-eligible rollover distribution, ICMA-RC will withhold taxes according to IRS requirements, using a filing status of married claiming three exemptions for periodic payments or 10% for non-periodic payments. **Please add your employer’s plan number and name to the bottom of IRS Form W-4P in the Claim or identification number field.** If you want a fixed amount withheld from your withdrawal, complete line 3 and write “Fixed Amount” on IRS Form W-4P.

All other payments except those noted above from your account are considered to be eligible rollover distributions (subject to 20% mandatory federal income tax withholding). If any portion of an eligible rollover distribution is paid to you directly instead of paid in a direct rollover, ICMA-RC is required by law to withhold 20% of that amount.

State Withholding

ICMA-RC automatically withholds taxes for states which require withholding from qualified plan withdrawals and will honor requests for withholding in other states when a participant submits the proper withholding forms.

Participants are cautioned that income taxation of payments from qualified pension plans varies from state to state. You should seek state tax advice from the appropriate state department of revenue.

IRS Penalty Taxes

10% early distribution penalty tax on premature withdrawals under IRC Section 72(t)*

457 plan assets that remain in a 457 plan until paid are never subject to the 10% early withdrawal penalty tax. However, you can roll assets into your 457 plan from another type of plan (401, 403(b), or Traditional IRA) and these assets may be subject to the 10% early withdrawal penalty tax (Please refer to section called “Non-457 Plan Assets In A 457 Plan” on page 7).

50% excise tax on failure to take required minimum distribution*

Beginning the later of the year you turn 70 ½ or separate from service from the employer sponsoring your plan, you are required to withdraw a minimum amount from your account annually. The minimum is based on your account value and the joint life expectancies of you and an assumed beneficiary 10 years younger. Your actual beneficiary has no bearing on the calculation unless your primary beneficiary is your spouse and is more than 10 years younger than you. If you fail to comply with the minimum requirement, you will be subject to a 50% excise tax on the difference between the minimum required distribution and the amount actually paid to you. As a service to our 457 participants, ICMA-RC annually tests accounts meeting these conditions. Please refer to the section called "IRS Required Minimum Distribution" on page 6.

* ICMA-RC does **not** withhold any portion of your payment to cover the 10% or 50% IRS penalties. The calculation and payment of any penalty is your responsibility and will be carried out in the process of filing your IRS Forms 1040 and 5329. A useful source of information for all participants who make withdrawals from qualified plans is the current year's version of IRS Publication 575, *Pension and Annuity Income*.

Working Beyond Age 70 ½

If you work beyond age 70½ for the employer sponsoring your plan, your benefits do not need to begin at age 70½. When you stop working for that employer, your benefits from that plan must begin no later than April 1 of the calendar year following your retirement. When you do leave your job, please ensure ICMA-RC receives your last date of employment as soon as possible.

YOUR WITHDRAWAL REQUEST

Processing Procedures

Properly completed payment requests will be paid according to the payment schedule and method you select. The law currently requires you to wait a "reasonable period" (currently 30 days) after receiving the information in this packet before beginning to receive distributions from your 457 Deferred Compensation Plan. You may waive this requirement by signing the withdrawal form.

Installment payments will be sent on the Wednesday following the first, second, third or fourth Tuesday of each month following the 30-day minimum waiting period (unless waived). One-time payments will be distributed within one to two days after a complete form is received, provided the 30-day minimum waiting period is waived.

Requests for withdrawals should be made on the *457 Deferred Compensation Plan EZ* or *LONG Benefit Withdrawal Form*. All parts of the form must be completed as directed. Your employer must approve and sign the form prior to sending it to ICMA-RC if this is your initial request for withdrawal from this account. Failure to do so could delay processing.

Beneficiary Designation

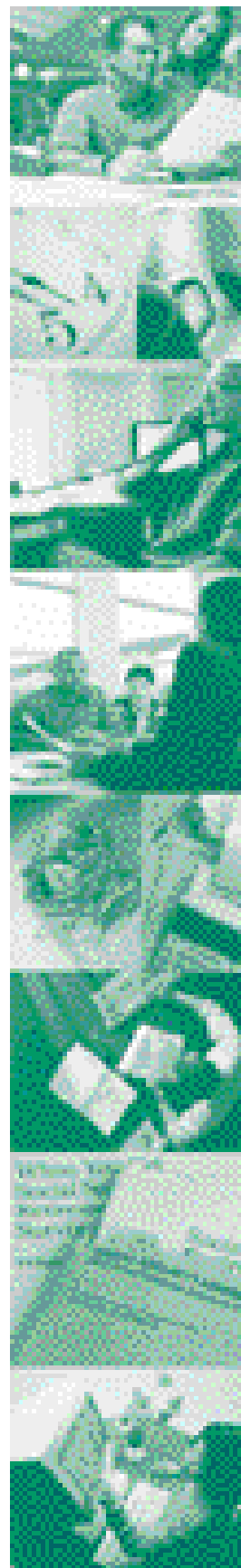
It is extremely important that you have designated the appropriate beneficiary(ies) for your 457 account. We encourage you to update your beneficiary(ies). Please fill out the *457 Designation of Beneficiary Form* found in this packet and submit with your withdrawal request to ICMA-RC.

Mailing Instructions

Completed forms should be sent to the following address, unless you are transferring money to a Vantagepoint IRA:

ICMA Retirement Corporation
P.O. Box 96220
Washington, DC 20090-6220

If you are transferring assets to a Vantagepoint IRA, please see the enclosed "Transferring Your ICMA-RC Retirement Plan Account to a Vantagepoint IRA" kit for details. If you are faxing forms to ICMA-RC, faxes must be received by 12:00p.m. "noon" Eastern Standard Time to be processed that business day.



457 Deferred Compensation Plan EZ Benefit Withdrawal Form

REMINDERS FOR EZ FORM

1. Did you complete Section 1?
2. Did you select an option in Section 2?
3. Did you sign Section 3?
4. Did your Employer or former Employer sign in Section 5?
 - Employer signature is not need if your Employer has already notified ICMA-RC of your separation from service.
 - Otherwise, you need to have your Employer or former Employer sign this form.

457 DEFERRED COMPENSATION PLAN EZ BENEFIT WITHDRAWAL FORM



ICMA RETIREMENT CORPORATION

- Use this form to request a monthly installment payment schedule or a partial or full lump-sum distribution of your account balance.
- Be aware many other distribution options are available, especially installment options on the *457 LONG Benefit Withdrawal Form* in this packet.
- If any notes or special instructions are added to this form, it will be returned to you unprocessed. Please use the *457 LONG Benefit Withdrawal Form* for options not listed here, or call Investor Services at 1-800-669-7400 for the proper form.
- This form can not be used for beneficiary or DRO accounts.

1 Participant Information	<div style="display: flex; justify-content: space-between;"> <div> Employer Plan Number <div style="border-bottom: 1px solid black; width: 100px;"></div> </div> <div> Employer Plan Name <div style="border-bottom: 1px solid black; width: 300px;"></div> </div> <div> Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Social Security Number <div style="border-bottom: 1px solid black; width: 100px;"></div> </div> <div> Date of Birth <div style="display: flex; justify-content: space-between; width: 100px;"> <div style="border-bottom: 1px solid black; width: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px;"></div> </div> <div style="display: flex; justify-content: space-between; font-size: 8px;"> Month Day Year </div> </div> <div> Daytime Phone Number <div style="border-bottom: 1px solid black; width: 100px;"></div> <div style="display: flex; justify-content: space-between; font-size: 8px;"> Area Code </div> </div> </div> <div style="margin-top: 10px;"> Full Name of Participant <div style="border-bottom: 1px solid black; width: 300px;"></div> <div style="display: flex; justify-content: space-between; font-size: 8px;"> Last First M.I. </div> </div> <div style="margin-top: 10px;"> Mailing Address/Street: <div style="border-bottom: 1px solid black; width: 300px;"></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> City: <div style="border-bottom: 1px solid black; width: 100px;"></div> </div> <div> State: <div style="border-bottom: 1px solid black; width: 20px;"></div> </div> <div> Zip Code: <div style="border-bottom: 1px solid black; width: 50px;"></div> </div> </div> </div> <div style="margin-top: 10px;"> Date of Hire: <div style="display: flex; justify-content: space-between; width: 100px;"> <div style="border-bottom: 1px solid black; width: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px;"></div> </div> <div style="display: flex; justify-content: space-between; font-size: 8px;"> Month Day Year </div> </div>
2 Choose a Payment Option	<p>Only check ONE box</p> <p><input type="checkbox"/> Defer payment to a later date (You must sign in Section 3 and your Employer must sign in Section 5)</p> <p><input type="checkbox"/> Monthly Installment Payment in the amount of \$ _____ (payments must be a minimum of \$100).</p> <ul style="list-style-type: none"> • Payment will be issued each Wednesday following the third Tuesday of the month "Cycle 3" • In the first month, we attempt to pay you as soon as possible. <ul style="list-style-type: none"> - Forms received before "Cycle 3" will start in "Cycle 3" of the current month. - Forms received after "Cycle 3" will start sooner than "Cycle 3" in the next month. Future months will be in "Cycle 3". <p><input type="checkbox"/> Partial Lump-Sum distribution pro-rata from all investments of \$ _____</p> <p><input type="checkbox"/> Lump-Sum distribution of your entire account balance</p>
3 Participant Signature	<p>By signing this form, I acknowledge that I have received and reviewed the <i>Special Tax Notice Regarding Plan Payments</i>. I hereby waive the "applicable waiting period" required under IRS rules regarding payments from my 457 plan account, and I direct ICMA-RC to process the payment option selected on this form.</p> <p>I acknowledge that any outstanding loan(s) will default as outlined in my employer's plan and the outstanding loan balance plus any accrued interest will be reported to the IRS as taxable income. To determine the impact of any outstanding loan, please speak to your tax advisor before withdrawing any funds.</p> <p>As required by law, and under the penalty of perjury, I certify that the Social Security Number (Taxpayer Identification Number) I have provided is correct.</p> <p>Participant Signature: _____ Date: ____ / ____ / ____</p> <div style="display: flex; justify-content: space-between; font-size: 8px;"> Month Day Year </div>
4 Send Payment To	<p>Send payment to (select only one of the following):</p> <p><input type="checkbox"/> Permanent Address</p> <p>THE OPTION BELOW CAN ONLY BE SELECTED WITH INSTALLMENT PAYMENTS*</p> <p><input type="checkbox"/> Electronic Direct Deposit (complete the accompanying <i>457 Direct Deposit Authorization Form</i>)*</p> <p>* If selected with any lump-sum option, a check will be mailed to your permanent address.</p>
5 Employer Authorization For Employer Use Only	<p>By signing, the employer confirms the participant is eligible to receive payments out of the retirement plan designated in Section 1. This section does not need to be completed by the employer if ICMA-RC has already been notified of the participant's termination by the employer.</p> <p>Participant's Termination Date ____ / ____ / ____</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p>Authorized Signature of Previous Employer</p> <div style="border-bottom: 1px solid black; width: 100px;"></div> <p>Authorizing Official's Title</p> <div style="border-bottom: 1px solid black; width: 100px;"></div> </div> <div style="width: 45%;"> <p>Name of Authorizing Official (Please Print)</p> <div style="border-bottom: 1px solid black; width: 100px;"></div> <p>____ / ____ / ____</p> <div style="display: flex; justify-content: space-between; font-size: 8px;"> Month Day Year </div> </div> </div>

457 Deferred Compensation Plan LONG Benefit Withdrawal Form

REMINDERS FOR LONG FORM

PAGE 1

1. Did you complete Section 1?
2. Did you select a reason in Section 2?
3. Was your last day of employment noted in Section 2?
4. Did you select an option in Section 3?
5. Did you complete the appropriate sub-Section 3?

PAGE 2

1. Did you complete the appropriate sub-Section 3?

PAGE 3

1. Did you sign in Section 6?
2. Did your Employer or former Employer sign in Section 8?
 - Employer signature is not need if your Employer has already notified ICMA-RC of your separation from service.
 - Otherwise, you need to have your Employer or former Employer sign this form.

- Use this form to schedule and/or request a withdrawal from your retirement account.
- This is a three-page form. Please complete each page. Please print legibly in blue or black ink.
- Please complete parts 1 and 2 and then proceed as directed.
- This form cannot be used for beneficiary or DRQ accounts.

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**457 DEFERRED COMPENSATION PLAN LONG
BENEFIT WITHDRAWAL FORM - PAGE 2 OF 3**

**ICMA RETIREMENT CORPORATION**

Employer Plan Number

Social Security Number

[illegible]

3b Scheduled Installment Payments of a specific number of payments	<p>COMPLETE ONLY IF YOU CHECKED SECTION 3 - OPTION B OR OPTION D</p> <p>1. Circle One: Monthly (a = 12) Note: This schedule will last the time period you choose. Quarterly (a = 4) Payment amounts are determined by your account Semi-Annual (a = 2) balance and will fluctuate up or down depending on Annual (a = 1) market conditions and the funds you are invested in.</p> <p>2. Payments to exhaust over exactly _____ (b) years.</p> <p>3. Fractional payments: a _____ x b _____ = _____ (exact number of payments) (Example – monthly payments over 3 years. a = 12 and b = 3 = 36 payments)</p> <p>4. Circle one cycle: Cycle 1 (Wednesday following the first Tuesday of the month) Cycle 2 (Wednesday following the second Tuesday of the month) Cycle 3 (Wednesday following the third Tuesday of the month) Cycle 4 (Wednesday following the fourth Tuesday of the month)</p> <p>5. Select One Starting Payment Date: <input type="checkbox"/> As soon as possible <input type="checkbox"/> ____ / ____ / ____ (month / year)</p>
3c Partial Lump- Sum Payment	<p>COMPLETE ONLY IF YOU CHECKED SECTION 3 - OPTION C</p> <p>1. Partial Lump-Sum Payment of \$ _____ , _____ . _____</p> <p>2. Select one Payment Date: <input type="checkbox"/> As soon as possible <input type="checkbox"/> ____ / ____ / ____ (month / day / year)</p>
3d Partial Lump- Sum Payment with Scheduled Installment Payments	<p>COMPLETE ONLY IF YOU CHECKED SECTION 3 - OPTION D</p> <p>1. Partial Lump-Sum Payment of \$ _____ , _____ . _____</p> <p>2. Select one Payment Date: <input type="checkbox"/> As soon as possible <input type="checkbox"/> ____ / ____ / ____ (month / day / year)</p> <p>3. Complete Section 3a or 3b to select your Scheduled Installment Payments</p>
3e Lump-Sum Payment	<p>COMPLETE ONLY IF YOU CHECKED SECTION 3 - OPTION E</p> <p>1. Lump-Sum Payment of entire account balance</p> <p>2. Select one Payment Date: <input type="checkbox"/> As soon as possible <input type="checkbox"/> ____ / ____ / ____ (month / day / year)</p>
4a Fund Depletion Order	<p>OPTIONAL - Select Fund Withdrawal Order *</p> <p>I wish to select the fund order to redeem my payment(s). Please note you can only select a maximum of three (3) funds. The full account balance of the first selected fund will be depleted first, the full account balance of the second selected fund will be depleted second, the full account balance of the third selected fund will be depleted third, and then your withdrawals will be prorated among all of your remaining funds.</p> <p>First Fund _____ Second Fund _____ Third Fund _____</p> <p>* If none are selected then withdrawal(s) will be prorated among all funds in the 457 plan</p>
4b Source Depletion Order (skip if account holds 457 money ONLY)	<p>OPTIONAL - Select ONLY One Type</p> <p><input type="checkbox"/> Withdrawal from 457 assets in 457 plan ONLY</p> <p><input type="checkbox"/> Withdrawal from non-457 assets in 457 plan ONLY</p> <p><input type="checkbox"/> Withdrawal from 457 assets first then non-457 assets second. This option is the default if nothing is selected in this section.</p>

457 DEFERRED COMPENSATION PLAN LONG BENEFIT WITHDRAWAL FORM - PAGE 3 OF 3



ICMA RETIREMENT CORPORATION

Employer Plan Number

Social Security Number

[] [] [] [] [] [] [] []

[] [] [] - [] [] - [] [] [] []

5 Withholding Election	<p>Federal: Complete IRS Form W-4P if your distribution is not an eligible rollover distribution (see <i>Special Tax Notice Regarding Plan Payments</i>). If your distribution is not an eligible rollover distribution and you DO NOT complete the Form W-4P, income tax will automatically be withheld at the rate specified by current Internal Revenue Service requirements WHICH IS THE RATE FOR A MARRIED PERSON WITH 3 EXEMPTIONS. STATE INCOME TAX WITHHOLDING WILL DEPEND UPON STATE RULES.</p> <p>State: Please declare your intended residency state IF DIFFERENT from the state noted under the permanent address section: _____. State _____</p> <p><i>If applicable, for state withholding obtain and submit a state withholding form, or clearly indicate your preference on a second federal Form W-4P.</i></p> <p>State tax withholding forms equivalent to the federal W-4P are available in most cases via the Internet. Your employer's Benefits and/or Payroll Department should also have forms available to you.</p>
6 Participant Signature	<p>By signing this form, I acknowledge that I have received and reviewed the <i>Special Tax Notice Regarding Plan Payments</i>. I hereby waive the "applicable waiting period" required under IRS rules regarding payments from my 457 plan account, and I direct ICMA-RC to process the payment option selected on this form.</p> <p>I acknowledge that any outstanding loan(s) will default as outlined in my employer's plan and the outstanding loan balance plus any accrued interest will be reported to the IRS as taxable income. To determine the impact of any outstanding loan, please speak to your tax advisor before withdrawing any funds.</p> <p>As required by law, and under the penalty of perjury, I certify that the Social Security Number (Taxpayer Identification Number) I have provided is correct.</p> <p>Participant Signature: _____ Date: ____ / ____ / ____ Month Day Year</p>
7 Send Payment To	<p>Send payment to (select only one of the following):</p> <p><input type="checkbox"/> Permanent Address</p> <p><input type="checkbox"/> Alternate address (mailing address different from permanent address): _____ City _____ State ____ Zip Code _____ - _____</p> <p><input type="checkbox"/> Check mailed to Financial Institution (Not considered a Rollover) Bank/Institution Name: _____ Address: _____ City _____ State ____ Zip Code _____ - _____</p> <p>THE OPTION BELOW CAN ONLY BE SELECTED WITH SCHEDULED INSTALLMENT PAYMENTS (OPTIONS 3a OR 3b) *</p> <p><input type="checkbox"/> Electronic Direct Deposit (complete the accompanying Direct Deposit Authorization Form)*</p> <p>* If you select this option and did not chose 3a or 3b, a check will be mailed to your permanent address.</p>
8 Employer Authorization For Employer Use Only	<p>By signing, the employer confirms the participant is eligible to receive payments out of the retirement plan designated in Section 1 and confirms the termination date designated in Section 2. This section does not need to be completed by the employer if ICMA-RC has already been notified of the participant's termination by the employer.</p> <p>_____ Authorized Signature of Previous Employer</p> <p>_____ Authorizing Official's Title</p> <p>_____ Name of Authorizing Official (Please Print)</p> <p>____ / ____ / ____ Month Day Year</p>
9 ICMA-RC Complete Only	<p>_____ ICMA-RC Retirement Plan Specialist (RPS)</p> <p>_____ RPS Phone Number</p>

Optional Forms

- **457 Direct Deposit Authorization Form**
- **457 Designation of Beneficiary Form**
- **457 Request for Benefit Illustration Form**

457 Direct Deposit Authorization Form

- Use this form to have your benefit payments directly deposited into your bank account.
- Please complete a separate form for each employer plan account.

1 Payee Information	<div>Employer Plan Number Employer Plan Name State</div> <div>Social Security Number Daytime Phone Number</div> <div>Full Name of Participant</div> <div>Mailing Address/Street:</div> <div>City: State: Zip Code:</div>
2 Type of Authorization	<div>Select only one box</div> <div><input type="checkbox"/> Initial Authorization <input type="checkbox"/> Other _____</div> <div><input type="checkbox"/> Change</div> <div><input type="checkbox"/> Cancellation of Authorization (All future payments will be mailed to the permanent address listed above.)</div>
<div>Please attach a voided check or deposit slip here.</div> 3 Account Information	<div>Note that electronic direct deposit is currently not available for lump or one-time payments. If selected with any lump-sum option, a check will be mailed to your permanent address.</div> <div>Please contact your bank to confirm this information. Incorrect information will delay electronic deposit processing. Also, please note that the first payment may be issued as a check rather than an electronic deposit. All subsequent deposits will be completed electronically. Please attach a voided check or deposit slip.</div> <div>Financial Institution's Routing Number Financial Institution's Telephone Number</div> <div>Type of Depositor Account <input type="checkbox"/> Checking <input type="checkbox"/> Savings</div> <div>Depositor Account Number</div> <div>(See reverse side for a sample to help you locate your account number on your check or deposit slip.)</div> <div>Name of Financial Institution _____</div> <div>Address: _____</div> <div>City _____ State _____ Zip Code _____</div>
4 Participant/ Beneficiary Authorization	<div>I hereby authorize the VantageTrust Company (hereinafter called the "Trust") to credit the above referenced account for any amount owed to me for retirement benefit payments. This authorization agreement is to remain in full force and effect until the Trust has received written notification from me of its termination in such time and in such manner as to afford the Trust and depository a reasonable opportunity to act on it. This authorization agreement may also be terminated by the Trust.</div> <div>In the event that the Trust notifies the bank that funds to which I am not entitled have been deposited to my account inadvertently, I hereby authorize and direct the bank to return said funds to the Trust as soon as possible.</div> <div>Participant/Beneficiary Signature Date</div>

IMPORTANT-REMEMBER TO PRINT LEGIBLY IN BLACK OR BLUE INK

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FRM570-010-200306-29

457 Direct Deposit Authorization Form

Instructions

Most of the information needed to complete the account information boxes can be found as follows:

- A. Be sure current address is shown
- B. Financial institution's routing number for direct deposit. Please call your bank to verify this number is correct for direct deposit. **If the number is not correct, it will result in delays.**
- C. Your account number

JOHN AND JANE DOE
1234 Main Street
Anytown, WA 11111

345

12-345/678

19

Pay to the
order of

\$

Dollars

First National Bank
of Anytown, WA
Anytown, WA 11111

Memo

I:123456789 I: 123 456 7" 345

B

C

A

DEPOSIT TICKET

JOHN AND JANE DOE
1234 Main Street
Anytown, WA 11111

Date 19

First National Bank
of Anytown, WA
Anytown, WA 11111

Account Deposit

Cash	Dollars	Cents
List Checks Singly		
Total From Other Side		
Total		
Less Cash Received		

12-345/678

I:123456789 I: 123 456 7" 345

B

C

457 DESIGNATION OF BENEFICIARY FORM

- Use this form to designate your beneficiary(ies) for your retirement account.
- Please complete a separate form for each employer plan account.



1 Participant Information	<div style="display: flex; justify-content: space-between;"> <div> Employer Plan Number <div style="border-bottom: 1px solid black; width: 100px;"></div> </div> <div> Employer Plan Name <div style="border-bottom: 1px solid black; width: 500px;"></div> </div> <div> State <div style="border-bottom: 1px solid black; width: 50px;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Social Security Number <div style="border-bottom: 1px solid black; width: 150px;"></div> </div> <div> Daytime Phone Number <div style="border-bottom: 1px solid black; width: 150px;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Full Name of Participant <div style="border-bottom: 1px solid black; width: 500px;"></div> </div> <div> Area Code <div style="border-bottom: 1px solid black; width: 50px;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Last <div style="border-bottom: 1px solid black; width: 350px;"></div> </div> <div> First <div style="border-bottom: 1px solid black; width: 350px;"></div> </div> <div> M.I. <div style="border-bottom: 1px solid black; width: 50px;"></div> </div> </div>
2 Beneficiary Designation	<p>Your designation of beneficiary(ies) tells us who should receive the accumulated value of your account if your death should occur before completing distribution of your account. If no primary beneficiary(ies) lives longer than you, benefits will be paid to your contingent beneficiary(ies). If none of your primary or contingent beneficiaries are living at the time of your death, the proceeds will be paid to your estate. If this form is not signed, the beneficiary(ies) designation you select will not be valid. If a valid form is not filed, benefits will be paid to your estate at the time of your death.</p> <p>PLEASE NOTE: If a Social Security number is not provided and RC cannot locate the named beneficiary, the account balance will be paid to your estate.</p> <p>Primary Beneficiary(ies):</p> <div style="margin-bottom: 10px;"> Name: _____ Relationship: _____ Social Security Number: _____ - _____ - _____ Birthdate: ____/____/____ % of Benefit: _____% </div> <div style="margin-bottom: 10px;"> Name: _____ Relationship: _____ Social Security Number: _____ - _____ - _____ Birthdate: ____/____/____ % of Benefit: _____% </div> <div style="margin-bottom: 10px;"> Name: _____ Relationship: _____ Social Security Number: _____ - _____ - _____ Birthdate: ____/____/____ % of Benefit: _____% </div> <div style="margin-bottom: 10px;"> Name: _____ Relationship: _____ Social Security Number: _____ - _____ - _____ Birthdate: ____/____/____ % of Benefit: _____% </div> <p>Contingent Beneficiary(ies)</p> <div style="margin-bottom: 10px;"> Name: _____ Relationship: _____ Social Security Number: _____ - _____ - _____ Birthdate: ____/____/____ % of Benefit: _____% </div> <div style="margin-bottom: 10px;"> Name: _____ Relationship: _____ Social Security Number: _____ - _____ - _____ Birthdate: ____/____/____ % of Benefit: _____% </div> <div style="margin-bottom: 10px;"> Name: _____ Relationship: _____ Social Security Number: _____ - _____ - _____ Birthdate: ____/____/____ % of Benefit: _____% </div> <div style="margin-bottom: 10px;"> Name: _____ Relationship: _____ Social Security Number: _____ - _____ - _____ Birthdate: ____/____/____ % of Benefit: _____% </div> <div style="margin-bottom: 10px;"> Name: _____ Relationship: _____ Social Security Number: _____ - _____ - _____ Birthdate: ____/____/____ % of Benefit: _____% </div> <p>If needed, please write additional beneficiaries on a separate piece of paper and attach it to this form.</p>
3 Participant Authorization	<div style="display: flex; justify-content: space-between;"> <div> Participant's Signature: _____ </div> <div> Date: _____ </div> </div>

IMPORTANT-REMEMBER TO PRINT LEGIBLY IN BLACK OR BLUE INK

457 REQUEST FOR BENEFIT ILLUSTRATIONS

NOTE: The illustrations you will receive in return from ICMA-RC are estimates provided for illustrative purposes only and are not a guarantee of future account value or benefits. They do not take into consideration any tax withholding on your payments.



1 Participant Information	<div style="display: flex; justify-content: space-between;"> <div>Employer Plan Number _____</div> <div>Employer Plan Name _____</div> <div>State ____</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Social Security Number ____ - ____ - _____</div> <div>Daytime Phone Number ____ - ____ - _____ <small>Area Code</small></div> </div> <div style="margin-top: 10px;">Full Name of Participant _____ <small>Last First M.I.</small></div> <div style="margin-top: 10px;">Mailing Address/Street: _____ City: _____ State: _____ Zip Code: _____</div> <div style="margin-top: 10px;">I am the: <input type="checkbox"/> Participant (Complete Section 2(a)) <input type="checkbox"/> Beneficiary (Complete Section 2(b)) </div>
2(a) Only complete if you are participant	<div style="display: flex; justify-content: space-between;"> <div>Beneficiary Date of Birth ____/____/____ <small>Month Day Year</small></div> <div>Relationship to Participant: _____</div> </div>
2(b) Beneficiary Information	If illustrations are being requested by the beneficiary, please provide name and address: _____ _____ City _____ State _____ Zip Code _____
3 Additional Information for Illustrations	When do you plan to start receiving benefits? ____/____/____ <div style="text-align: center;"><small>Month Year</small></div> <div style="margin-top: 10px;">Are you now contributing to the account? <input type="checkbox"/> Yes <input type="checkbox"/> No</div> <div style="margin-top: 10px;">If yes, please give the contribution amount and frequency \$ ____ , ____ . ____ <div style="text-align: center;"><small>Amount Frequency (e.g., weekly, biweekly)</small></div> </div> <div style="margin-top: 10px;">When do you plan to stop contributing to your account? ____/____/____ <div style="text-align: center;"><small>Month Year</small></div> </div>
4 Illustrations Desired	<div style="margin-bottom: 10px;"><input type="checkbox"/> Purchase of a Qualified Joint and Survivor Annuity. NOTE: Complete above beneficiary information in Part 2(a). RC will use a current rate to illustrate benefit.</div> <div style="margin-bottom: 10px;"><input type="checkbox"/> One time lump-sum</div> <div style="margin-bottom: 10px;"><input type="checkbox"/> Regular basis until account is exhausted (Choose one) <div style="margin-left: 20px;"> 1. Specify frequency (monthly, annual, etc.): _____ 2. Specify dollar amount of each payment: _____ </div> </div> <div style="margin-bottom: 10px;"><input type="checkbox"/> Specific number of years <div style="margin-left: 20px;"> 1. Specify frequency (monthly, annual, etc.): _____ 2. Specify number of years: _____ </div> </div> <div style="margin-bottom: 10px;"><input type="checkbox"/> Payments over your determined life expectancy <div style="margin-left: 20px;">Specify frequency (monthly, annual, etc.): _____</div> <div style="text-align: right; margin-right: 20px;">Date of Birth: ____/____/____ <small>Month Day Year</small></div> </div> <div style="margin-bottom: 10px;"><input type="checkbox"/> Equal payments over joint life expectancy. NOTE: Complete above beneficiary information in Part 2(a). Specify frequency (monthly, annual, etc.): _____</div> <div style="margin-bottom: 10px;"><input type="checkbox"/> Purchase of an annuity other than a Qualified Joint and Survivor Annuity. Specify type: _____</div>

Important: Remember to print legibly in black or blue ink.

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ICMA RETIREMENT CORPORATION

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