Maximize Your Plan

- Enroll today — Complete the enrollment form provided.
- Catch up on your contributions (must be age 50 or older).
- Designate your beneficiary. Complete the Beneficiary Designation form, and follow the instructions on the form for mailing.
- Reduce your clutter. Sign up for e-documents today.
- Rebalance your account automatically by using Auto-Rebalance.
- For retirement counseling, just call 800-755-5801 or visit us online.

As an active participant, you can access your retirement account 24/7 by signing in to my.trsretire.com or calling us toll-free at 800-755-5801.

You may also speak with a customer service representative for enrollment assistance, investment guidance, and retirement planning support.

First-time online users
my.trsretire.com

First-time callers
888-676-5512
Plan Highlights

City of Toledo Savings and Protection Plan is a valuable employee benefit and one of the most powerful ways to build your retirement savings.

Take a few minutes now to read through these plan highlights and learn more about all the features and benefits your plan includes. You'll find out more about when you can join, how much you can contribute, when you can make changes, and how you can access your savings.

Keep in mind this is simply a quick overview of your benefits. For complete details or plan updates, please refer to your Summary Plan Description (SPD).

City of Toledo Savings and Protection Plan

Eligibility

You are eligible to participate in the plan:
- Upon attaining age 16
- Upon completing 2 month(s) of service

You may join the plan upon completing the service requirement.

Your Contributions

You may choose to make contributions from 2% up to 100% of your pay.
- You may increase, decrease, or stop your contributions at any time.

You may designate your contributions as traditional pre-tax contributions or after-tax Roth 401(k) contributions.

An annual IRS dollar limit of $18,000 applies for 2015. This limit is indexed annually by the IRS.

If you are age 50 or older (or you reach age 50 during the current calendar year), you can make additional catch-up contributions up to $6,000 in 2015. This limit is indexed annually by the IRS.

If you have an existing retirement plan account with a prior employer, you may roll over that account into this plan at any time. To initiate a rollover of a retirement account with a prior employer, complete the Incoming Rollover form.
Vesting

Vesting refers to your "ownership" of your account. You are always 100% vested in your contributions to this plan, including any rollover or transfer contributions you have made, plus any earnings on those contributions.

Loans

You may borrow from your plan according to the provisions listed below (conditions and restrictions may apply).

Minimum loan amount
$1,000

Maximum loan amount
50% of your vested account balance, up to $50,000

General loan interest rate
Prime interest rate (as stated in the Wall Street Journal)

Home loan interest rate
Prime interest rate (as stated in the Wall Street Journal)

Maximum general loan term
5 years

Maximum home loan term
10 years

General loan fee
A one-time set-up fee of $75 per loan will be deducted from your account

Home loan fee
A one-time set-up fee of $75 per loan will be deducted from your account

Maximum number of outstanding loans
One loan outstanding at a time.

Withdrawals

You may withdraw vested funds from your plan account in these events (conditions and restrictions may apply as defined in the plan):

- Retirement at plan's normal retirement age of 55
- Termination of employment
- Attainment of age 59.5
- Financial hardship as defined in the plan
- Disability
- Death
**Investment Direction**

You decide how your account will be invested among the available investment options. You may change your investment allocation at any time.

Transfers among investment options may be made at any time and may be subject to certain restrictions.

The available investment options are presented below in groups to illustrate the applicable transfer restrictions.

**Investment Group A:** TFLIC Stable Fund
**Investment Group B:** Thornburg Limited Term Income R5
**Investment Group C:** All other funds

Monies in a Group A investment option cannot be transferred to a Group B investment option. Monies transferred out of a Group A fund to a Group C fund cannot be transferred back to a Group A fund or a Group B fund for a period of 90 days.

Additional transfer conditions and restrictions may apply. Certain investment options may impose trading restrictions and/or redemption fees as a result of frequent trading activity. Please contact us for more information at my.trsretire.com.

**Beneficiary Designation**

It is very important that you designate at least one beneficiary for your retirement account so that your assets can be distributed according to your wishes upon your death. Please complete the Beneficiary Designation form, and follow the instructions on the form for mailing.

**Summary Plan Description**

For more information about any of the plan provisions, including any conditions or restrictions that may apply, please refer to the Summary Plan Description or call 888-676-5512. These plan highlights represent only an overview of plan provisions and do not constitute a legally binding document.
Determine Your Savings Goal

You may need more income than you think.
The income you'll need in retirement depends greatly on your circumstances, including your age, health, income, investments, and savings. Based on today's average life expectancy, you may need your nest egg to last for 20 years or more. And don't forget about rising health care costs. In fact, a leading study estimates that you may need 77% to over 94% of your final preretirement income to maintain your lifestyle after your regular paychecks stop.(1)

Most of your income will come from you.
Social Security covers only about 37%* of the average retiree's income, and fewer employers offer traditional pension plans. In reality, most of your retirement income will likely come from your own savings, part-time employment in retirement, or both. If your goal is to live comfortably and work less in retirement, you need to start saving today.

Choose your tax treatment.
You can save with traditional pre-tax contributions, after-tax Roth contributions, or a combination of both. Pre-tax savings give you tax benefits right away and could make contributing more cost less than you think. Roth savings could pay off down the road, when you might be in a higher income tax bracket. Our online calculators can help you decide which strategy makes sense for you.

Aim for a perfect 10.
Try to save at least 10% of your pay for retirement. If that seems like too much now, start smaller by putting away about 5%, then raise your rate gradually by, say, 1% a year on your birthday. That's a gift that keeps on growing!
You should evaluate your ability to continue saving in the event of a prolonged market decline, unexpected expenses, or an unforeseeable emergency.

(1) Aon Consulting, 2008 Replacement Ratio Study.™
Investment Solutions

Your Retirement Plan makes it easy to choose an investment strategy—and easy to maintain or adjust your strategy over time.

Choose a one-step solution

Make it automatic with PortfolioXpress®
If your financial picture is relatively straightforward, consider PortfolioXpress. This service establishes an investment mix based on the retirement year you select. Then it regularly rebalances your account to a more conservative mix over time. It's a solution for people who are saving for retirement and want automatic diversification. You can subscribe to PortfolioXpress at my.trsretire.com.

PortfolioXpress® is a registered service mark of Transamerica Retirement Solutions Corporation (Transamerica). PortfolioXpress presents a series of asset allocation models up to and through a designated retirement year. You are solely responsible for choosing the retirement year and risk preference. By subscribing to the service, you agree to each of the asset allocation mixes and automated rebalancing transactions that will take place over time within your account as you approach the selected retirement year. If you sign up, you should carefully review the service agreement for additional information regarding fees and other terms and conditions that may apply to this service. Retirement date portfolios are subject to the same risks as the underlying asset classes in which they invest. The higher the portfolio’s allocation is to stocks, the greater the risk. The principal value of the portfolio is not guaranteed at any time, including at and after the target date.

Choose a fund that corresponds to your retirement date or time horizon
Select a target date fund that corresponds to your expected retirement year. Target Date Funds automatically move to a more conservative investment mix as they approach a target year. By investing in a combination of asset classes, these funds are designed to be automatically diversified.

- T. Rowe Price Retirement 2010 Adv
- T. Rowe Price Retirement 2020 Adv
- T. Rowe Price Retirement 2030 Adv
- T. Rowe Price Retirement 2040 Adv
- T. Rowe Price Retirement 2050 Adv
- T. Rowe Price Retirement 2060 Advisor
Target date funds are subject to the same risks as the underlying assets in which they invest. Each fund’s asset allocation becomes more conservative over time. The percentage of assets allocated to stocks will decrease, while the percentage allocated to bonds will increase, as you approach the target date. The higher the fund’s allocation is to stocks, the greater the risk. The target year represents approximately when the fund’s managers assume the typical investor plans to start withdrawing their money. The fund’s principal value is never guaranteed, including at and after the target. You can lose money by investing in a target date fund, including near and following retirement. There is no guarantee that the fund will provide adequate retirement income.

Do it yourself

Create your own investing strategy
You can also create your own investment mix using the funds available in your plan. These funds offer flexibility for both new and experienced investors. With this approach, you can develop an investing strategy that is tailored just for you.
Section A: Employer Information

<table>
<thead>
<tr>
<th>Company/Employer Name</th>
<th>Contract/Account No.</th>
<th>Affiliate No.</th>
<th>Division No.</th>
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</thead>
<tbody>
<tr>
<td>City of Toledo Savings and Protection Plan</td>
<td>JK61748</td>
<td>00001</td>
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</table>

Section B: Participant Information

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Married</td>
<td>Female</td>
</tr>
<tr>
<td>Single/Divorced</td>
<td>Male</td>
</tr>
</tbody>
</table>

Section C: Contributions

- I elect to reduce my eligible compensation by _________% or $___________ (from 2% up to 100% of your pay), each pay period as a pre-tax salary deferral contribution.

- I elect to reduce my eligible compensation by _________% or $___________ (from 2% up to 100% of your pay), each pay period as an Roth salary deferral contribution.

- For employees who have attained age 50 (or will attain age 50 this calendar year)
  - I elect to reduce my eligible compensation, in equal amounts each pay period as indicated below:
    - _________% as a pre-tax salary deferral contribution.
    - _________% as a Roth contribution.
    - $___________ as a pre-tax salary deferral contribution.
    - $___________ as a Roth contribution.

- The above election(s) is effective with the payroll period beginning ____________ (may not be retroactive).

- I elect not to make contributions to this plan.

- Contact me to help me consolidate another retirement plan (401K, 403B, IRA, etc) into my new Transamerica account.
## Section D: Investment Allocation

Create Your Own Portfolio - Please allocate contributions to the following investment options in the percentages noted below (total must equal 100%)

<table>
<thead>
<tr>
<th>Choose a Portfolio</th>
<th>Create a Portfolio</th>
</tr>
</thead>
<tbody>
<tr>
<td>N614 T. Rowe Price Retirement 2010 Adv</td>
<td>GDAF TFLIC Stable Fund</td>
</tr>
<tr>
<td>N615 T. Rowe Price Retirement 2020 Adv</td>
<td>Y26L Thornburg Limited Term Income R5</td>
</tr>
<tr>
<td>N616 T. Rowe Price Retirement 2030 Adv</td>
<td>N714 Loomis Sayles Investment Grade Bond A</td>
</tr>
<tr>
<td>N617 T. Rowe Price Retirement 2040 Adv</td>
<td>Z441 Prudential Total Return Bond A</td>
</tr>
<tr>
<td>N870 T. Rowe Price Retirement 2050 Adv</td>
<td>S479 BlackRock Inflation Protected Bond Instl</td>
</tr>
<tr>
<td>Y297 T. Rowe Price Retirement 2060 Advisor</td>
<td>M26Y Transamerica Partners Institutional High Yield Bond</td>
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<tr>
<td></td>
<td>N730 Columbia Dividend Income A</td>
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<tr>
<td></td>
<td>N479 American Funds Fundamental Invs R3</td>
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<td></td>
<td>M0FY Transamerica Partners Institutional Stock Index</td>
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<td>VTSA Vanguard Total Stock Market Index Adm</td>
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<td></td>
<td>Z186 JPMorgan Large Cap Growth A</td>
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<td>N372 Hotchkis and Wiley Mid-Cap Value A</td>
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<td>N446 Hartford Midcap Y</td>
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<td>S189 Columbia Small Cap Index A</td>
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<td>S240 T. Rowe Price Small-Cap Value Adv</td>
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<td></td>
<td>CRTU Real Estate Fund</td>
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<td></td>
<td>N299 Federated International Leaders A</td>
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<td></td>
<td>VTIA Vanguard Total International Stock Index Adm</td>
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<tr>
<td></td>
<td>S104 American Funds New World R4</td>
</tr>
<tr>
<td></td>
<td>N589 American Funds Capital Inc Bldr R3</td>
</tr>
<tr>
<td></td>
<td>N524 Wells Fargo Advantage Precious Metals A</td>
</tr>
</tbody>
</table>
Section E: Signatures

I understand that any catch-up contributions elected above are not determined to be catch-up contributions until my regular pre-tax salary deferral contributions exceed an applicable limit under the plan, and that the amount of my salary reduction above may not exceed the limits of contributions set forth in my employer's plan.

Transamerica Investors Securities Corporation (TISC), 440 Mamaroneck Avenue, Harrison, NY 10528, distributes securities products. Any registered fund offered under the plan is distributed by that particular fund's associated fund family and its affiliated broker-dealer or other broker-dealers with effective selling agreements such as TISC.

I acknowledge that investment option information, including prospectuses, disclosure documents, and/or fund profile sheets, as applicable have been made available to me and I understand the risks of investing.

The Transamerica funds are distributed by Transamerica Capital, Inc. (TCI) and are advised by Transamerica Asset Management (TAM). Transamerica, TISC, TAM, and TCI are affiliated companies. I understand that the fixed interest option(s) are available under group annuity contract(s) issued by Transamerica Financial Life Insurance Company ("TFLIC") and that the mutual fund options are subject to a Custodial Agreement with State Street Bank and Trust Company ("SSBT"). I understand that the group annuity contracts are legally separate arrangements from the Custodial Agreement. SSBT has no control over or responsibility for the group annuity contracts. I understand that an annual administrative fee, a withdrawal charge, and transfer restrictions may apply. The Transamerica investment options are available under a group variable annuity contract issued by Transamerica Financial Life insurance Company ("TFLIC"), which is offered through Transamerica Investors Securities Corporation, 440 Mamaroneck Avenue, Harrison, NY 10528. I understand that an annual administrative fee, a withdrawal charge, and transfer restrictions may apply. The Stable Pooled Fund is offered through Diversified Investment Advisors Collective Trust and invests directly in the Wells Fargo Stable Return Fund which is a collective trust fund of Wells Fargo.

I further understand that I may change the amount of my salary reduction, or terminate this agreement, by giving notice in accordance with the terms of my employer's plan.

X

Participant Signature Date

I certify that this enrollment application as completed by the participant, is accurate and appropriate under the terms of the plan, and that any necessary consents and waivers have been obtained.

X

Plan Administrator Signature Date
**INSTRUCTIONS**

To designate a beneficiary or to change your existing beneficiary designation on your plan, complete all applicable sections of this form, obtain any required signatures, and return it to your Plan Sponsor. If you have any questions regarding this form, please contact us at 1-800-755-5801.

**PLAN SPONSOR INFORMATION**

<table>
<thead>
<tr>
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**PERSONAL INFORMATION**

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<th>Social Security No.</th>
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<th>E-mail Address</th>
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**PRIMARY BENEFICIARY DESIGNATION - WILL RECEIVE BENEFITS IN THE EVENT OF YOUR DEATH**

This designation will apply to the account number above. You must designate a specific percentage for each beneficiary. Shares must be whole percentages and total 100%. If you do not indicate shares, benefits will be split equally among surviving beneficiaries. If the named beneficiary is a trust, please specify the name and date of the trust, and the name of the trustee.

*Note: Share of benefits must total 100% for primary beneficiaries. If additional space is needed to designate multiple beneficiaries, complete the Supplemental Beneficiary Designation page.*

<table>
<thead>
<tr>
<th>Type of Beneficiary Designation</th>
<th>[ ] Individual</th>
<th>[ ] Trust</th>
<th>[ ] Estate</th>
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</thead>
<tbody>
<tr>
<td>Share of Benefits</td>
<td>% (whole percentages only)</td>
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<td></td>
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<tr>
<td>Name of Trust/Estate</td>
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<td>Trustee/Executor</td>
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<tr>
<td>Trust/Estate Tax ID</td>
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**PRIMARY BENEFICIARY DESIGNATION (CONTINUED)**

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</table>
**CONTINGENT BENEFICIARY - WILL RECEIVE BENEFITS IF NO PRIMARY BENEFICIARY IS LIVING AT THE TIME OF YOUR DEATH**

*Note: Share of benefits must total 100% for contingent beneficiaries. If additional space is needed to designate multiple beneficiaries, complete the Supplemental Beneficiary Designation page.*

<table>
<thead>
<tr>
<th>Type of Beneficiary Designation</th>
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<th>[ ] Estate</th>
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NOTICE AND WAIVER OF PRE-RETIREMENT SURVIVOR BENEFIT (IF SPOUSE IS NOT PRIMARY BENEFICIARY)

As a plan participant, the law requires that you be informed as to the disposition of your account. In the case of your death before retirement, the plan will pay your full vested account balance to your surviving spouse. However, you may elect to waive the requirement that your death benefit be paid to your surviving spouse. Your spouse must consent in writing to any such waiver. You may revoke any waiver at any time before your death, and, if you desire, make a new election, provided your spouse consents to this new election. If you elect that your spouse is not to be your beneficiary for your full vested account balance (and your spouse has consented), then you may designate a beneficiary of your choosing. If you are not married at the time of your death, the death benefit will be paid to your designated beneficiary.

I have been informed that if I should die prior to my retirement, I have the right to have the full vested account balance in the plan paid to my spouse; that I have the right to waive the designation of my spouse as the beneficiary of all or a portion of my death benefit only if my spouse consents to such waiver; and that I have the right to revoke such waiver at any time without my spouse’s consent. I hereby waive the right to have my spouse be the beneficiary of all or a portion of my pre-retirement death benefit. Instead, I designate the above beneficiary(ies) to receive all or a portion of the benefits upon my death.

SPOUSAL CONSENT (IF SPOUSE IS NOT 100% PRIMARY BENEFICIARY)

I consent to my spouse’s designation of the beneficiary. I understand that this means all or a portion of my spouse’s death benefit will be paid to the beneficiary(ies) named in this designation other than me. I further understand that this beneficiary designation is not valid without my consent, and that my consent would be needed again if my spouse wishes to change this beneficiary designation.

X ____________________________  X ____________________________
Spouse Signature  Date

WITNESSED

X ____________________________  X ____________________________
Notary Public Signature and Stamp/Seal  Date

PARTICIPANT SIGNATURE

I hereby warrant that all of the statements and information contained in this request/form are true in all respects. I understand that if I have made any false or misleading statements in this request that such statements could result in significant tax consequences and/or other monetary damages to the Plan, my Plan Sponsor and Transamerica. Moreover, I hereby agree to indemnify and hold (a) the Plan, (b) Transamerica, and (c) my Plan Sponsor harmless from any tax consequences and/or other monetary damages that may result in whole or in part from my false and misleading statements. I certify that the information provided on this form is correct and complete.

X ____________________________  X ____________________________
Participant Signature  Date

X ____________________________  X ____________________________
Print Name  Social Security Number

PLAN SPONSOR SIGNATURE

I certify that the information provided on this form is correct and complete, and that any required consents and waivers have been obtained.

Reminder: You should confirm your participant’s marital status prior to approving this transaction, and obtain spousal consent as needed.

X ____________________________  X ____________________________
Plan Sponsor Signature  Date

Completed forms should be returned to Transamerica at 4333 Edgewood Road NE, Mail Drop 0001, Cedar Rapids, IA 52499 or fax to 866-835-8863.
### Supplemental Beneficiary Designations

Note: Share of benefits must total 100% for primary beneficiaries (will receive benefits in the event of your death) AND 100% for contingent beneficiaries (will receive benefits if no primary beneficiary is living at the time of your death).

<table>
<thead>
<tr>
<th>Primary Beneficiary</th>
<th>Contingent Beneficiary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Beneficiary Designation</td>
<td>[ ] Individual [ ] Trust [ ] Estate</td>
</tr>
<tr>
<td>Share of Benefits</td>
<td>% (whole percentages only)</td>
</tr>
<tr>
<td>Relationship</td>
<td></td>
</tr>
</tbody>
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<tr>
<th>Social Security No.</th>
<th>Date of Birth (mm/dd/yyyy)</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name/Middle Initial</td>
<td>Last Name</td>
</tr>
</tbody>
</table>

Name of Trust/Estate

Trustee/Executor

Trust/Estate Tax ID

Effective Date

Mailing Address

City

State

Zip Code

<table>
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</table>

Name of Trust/Estate

Trustee/Executor

Trust/Estate Tax ID

Effective Date

Mailing Address

City

State

Zip Code
Instructions
Use this form to initiate a direct rollover of your existing retirement account to your plan retirement account being serviced by Transamerica. Complete Sections A, B, C and D, obtain your Plan Administrator’s signature in Section E, then return the completed form to us at the address indicated in Section F. Contact your prior plan provider to request a rollover of the funds in your account to Transamerica (your prior plan provider may require that you complete a distribution form or other documentation). For further information, please refer to your Summary Plan Description, contact your Plan Administrator, or call us at 800-755-5801.

Section A. Employer Information
Company/Employer Name: City of Toledo Savings and Protection Plan
Contract/Account No.: JK61748  Affiliate No.: 00001  Division No.: 

Section B. Personal Information
Social Security No.:  
Date of Birth (mm/dd/yyyy): 
First Name/Middle Initial:  Last Name: 
Mailing Address: 
City:  State:  Zip Code:  
Phone No.:  Ext.:  
E-mail Address:  
Date of Hire (mm/dd/yyyy):  

Section C. Incoming Rollover Information
My incoming rollover for $________________ is an eligible rollover distribution.

My incoming rollover is from a (select only one option)

☐ qualified plan (401(k) or 401(a) plan)  ☐ 403(b) plan  ☐ 457(b) governmental plan  ☐ IRA

Amount to be rolled over from present provider:  ☐ 100% of account  ☐ Partial rollover of $______________
My incoming rollover ☐ does ☐ does not include after-tax amounts from a qualified plan or a 403(b) plan. If after-tax amounts are included, the total after-tax cost basis of this distribution is $_______________. Cost basis is the amount of contributions made, not including earnings.

My incoming rollover ☐ does ☐ does not include Roth contributions via a direct rollover from another Roth plan. If Roth contributions are included, please provide the total Roth contribution amount being rolled over: $_______________. (Include both contributions and earnings.) Transamerica will only accept Roth amounts via a direct rollover from another Roth plan. Please also provide the following additional information (select only one option):

☐ This is a qualified distribution via a direct rollover (please attach a copy of the rollover statement provided by the transferring Roth plan). Transamerica cannot accept the Roth amounts without a copy of the rollover statement.

☐ This is a nonqualified distribution via a direct rollover that includes both taxable and non-taxable amounts. The total after-tax cost basis of the distribution is $_______________. (Cost basis is the amount of Roth after-tax contributions made, but not including earnings.) Please attach a copy of the rollover statement provided by the transferring Roth plan. Transamerica cannot accept the Roth amounts without a copy of the rollover statement. As indicated on the attached rollover statement, the start of the 5-year period of participation applicable to the Roth rollover amounts is _________ (year).

☐ This is a nonqualified distribution via a direct rollover of Roth contribution earnings only. Please attach a copy of the rollover statement provided by the transferring Roth plan. Transamerica cannot accept the Roth earnings without a copy of the rollover statement. As indicated on the attached rollover statement, the start of the 5-year period of participation applicable to the Roth rollover amounts is ______________ (year).

Please note the following important information:

1. Transamerica cannot accept after-tax amounts if the cost basis is not provided. If you are unsure of your after-tax cost basis, contact your previous Plan Administrator to obtain/confirm this information. If this information is not received, it will be assumed that the deposit represents pre-tax amounts only.

2. If you are already enrolled in the plan, your incoming rollover will be invested according to your existing investment allocation for payroll contributions.

3. If you are not enrolled in the plan, your incoming rollover will be invested in the plan level default fund. Please refer to your Summary Plan Description or contact us in order to identify the plan’s default fund. You can subsequently reallocate your investment at any time, subject to plan provisions, by calling us at 800-755-5801 or accessing your account online at my.irsretire.com.

Section D. Prior Plan Information

Contact your prior plan provider to request a rollover of the funds in your account to Transamerica (your prior plan provider may require that you complete a distribution form or other documentation). If your incoming rollover is not received in 30 days, we will contact your prior plan/IRA provider, if you attach a copy of your most recent prior plan/IRA statement to this form.

Prior Plan Name________________________________________________________

Prior Plan Account No.____________________________________________________

Prior Plan Contact Name__________________________________________________

Prior Plan Contact Phone No.______________________________________________

Prior Plan/IRA Provider___________________________________________________

Prior Plan/IRA Provider Mailing Address____________________________________

Prior Plan/IRA Provider Phone No.__________________________________________
Section E. Signatures

I certify that the information provided on this form is correct and complete. I understand that if I am already enrolled in the plan, my incoming rollover will be invested according to my existing investment allocation for payroll contributions. If I am not enrolled in the plan, I understand that my incoming rollover will be invested in the plan’s default fund (please refer to your Summary Plan Description or contact us in order to identify the plan’s default fund). I understand that I can subsequently reallocate my investment at any time, subject to plan provisions, by calling Transamerica at 800-755-5801 or accessing my account online at the above address.

X Participant Signature

X Date

X Print Name

X Social Security Number

X Plan Administrator Signature

X Date

Section F. Mailing and Wiring Instructions

Checks- If sending a check, mail the check and the Incoming Rollover Request form to one of the following addresses, as applicable:

Regular Mail
Transamerica
Remittance Processing Center
PO Box 13029
Newark, NJ 07188

Overnight Mail
JPMorgan Chase - Lockbox Processing
Lockbox No. 13029
4 Chase Metrotech Center
Ground Level Courier on Willoughby Street
Brooklyn, NY 11245
Phone Number: (718) 242-0674 (must be indicated on overnight air bill)

Wire Transfers- If sending a wire transfer, mail the Incoming Rollover Request form to the address below:

Form
Transamerica
4333 Edgewood Road NE
Cedar Rapids, IA 52499

Wire Instructions
State Street Bank and Trust Company
200 Clarendon Street
Boston, MA 02116-5021
Bank ABA # 011000028
Receiving Account # 00457374
Receiving Account name: Transamerica
Contract-Affiliate #
Contract Name
You may roll over your distribution if all of the following apply:

1. The distribution is an “eligible rollover distribution”. Generally, any portion of a distribution from an eligible retirement plan or traditional IRA is considered an eligible rollover distribution. The following types of payments generally cannot be rolled over to a retirement plan:

   - “Permissible Withdrawals” of initial elective deferrals and earnings from certain special automatic enrollment 401(k) or 403(b) Plans that are withdrawn within 90 days of enrollment
   - Annuity payments for life or joint life expectancy; installments to be paid over a period of 10 years or more
   - Required minimum distributions
   - Corrective distributions of contributions that exceed tax law limitations
   - Excess contributions, excess deferrals, and excess aggregate contributions that apply to 401(k) ADP or 401(m) ACP nondiscrimination tests
   - Distributions to a non-spouse beneficiary unless directly rolled over to an inherited IRA
   - Hardship distributions
   - Loans treated as deemed distributions (for example, loans in default due to missed payment before your employment ends)

Note: After-tax contributions from a qualified plan or 403(b) plan (but not from an IRA) can be rolled over (via a direct rollover) only to another qualified plan or to a 403(b) plan that separately accounts for them or to an IRA.

2. The distribution is from an eligible retirement plan or a traditional IRA.

   - An eligible retirement plan is an employer pension or profit-sharing plan qualified for favorable tax treatment under Section 401(a) or Section 403(a) of the Internal Revenue Code, or a Section 403(b) Tax Deferred Annuity (TDA) plan or a Section 457(b) governmental plan. (Note: The Transforce retirement plan may not accept all of these types of rollovers. Please check with the sponsor of your new plan.)
   - Any rollover from a section 457(b) governmental plan to a 401(a) or 403(b) plan may be subject to the 10% additional tax on early distributions when later distributed.
   - A rollover to a governmental 457(b) plan must be separately accounted for by such plan. Please check with your employer.

3. One of the statements below describes your distribution.

   - The distribution is paid to you and the rollover is made within 60 days of receipt of distribution. (Note: After-tax contributions cannot be rolled over as part of a distribution payable by check to you.)
   - The eligible “direct” rollover distribution is paid directly from an eligible retirement plan or traditional IRA to your new eligible retirement plan. Sample wording for direct rollover: Trustees of (name of plan at Transamerica and account number), FBO (name of participant and Social Security number). Your employer will advise you on the exact wording of the plan name and account number, and the types of distributions that can be rolled over into this plan.

For complete information regarding plan payments, penalties, and the associated tax implications if a direct rollover is not elected, please review the Notice: Special Tax Notice Regarding Plan Payments that was provided by your former employer or payor and/or consult your tax advisor. You may be asked by the transferee plan or IRA to provide additional documentation. Check with them in advance.
Imagine Your Future, Plan Today

Enroll today and brighten your financial future.

City of Toledo Savings and Protection Plan

Brighten your outlook.
Welcome to Your Plan

Whether your retirement is five or fifty years away, City of Toledo Savings and Protection Plan offers a powerful way to enhance your long-term financial well-being. We encourage you to invest in yourself and your future by participating in this plan through Transamerica.

Transamerica is a full-service retirement plan provider who has focused on one thing for more than 75 years: helping millions of people like you save and invest wisely for and throughout their retirement. Whether you’re joining a retirement plan for the first time, already participating in the plan, soon approaching retirement, or already in retirement, Transamerica will be with you every step of the way.

Please read through this kit so you can better understand this valuable program. And be sure to enroll as soon as possible so you can begin maximizing this benefit!

Sincerely,

Pete Kunkel
President and CEO
Transamerica Retirement Solutions