



SECURITY BENEFIT

Advisor Mutual Fund 457 Program

ENROLLMENT BOOKLET



To view this program's performance, scan the QR code
or visit SecurityBenefit.com/Performance.

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Choosing a Purchase Option

Options	Features	Additional Information
Option 3	<ul style="list-style-type: none"> No sales charges when you buy or sell shares Deferred sales charge of 1.00% applies when you sell shares you bought within the last year 	<ul style="list-style-type: none"> Account Distribution Fee 1.00% The deferred sales charge is applicable for each purchase only when shares are sold. The deferred sales charge does not apply to investment exchanges and declines to zero after one year.
Option 4	<ul style="list-style-type: none"> Sales charge of 5.50% charged when you buy shares No sales charges when you sell shares 	<ul style="list-style-type: none"> Account Distribution Fee 0.35% 0% Contingent deferred sales charge
Fee Based Option	<ul style="list-style-type: none"> No sales charges when you buy or sell shares 	<ul style="list-style-type: none"> Recordkeeping Fee 0.25% (Annual fee, charged monthly) 0% Contingent deferred sales charge
Annual Account Fee – for all options	<ul style="list-style-type: none"> \$35 per year for accounts less than \$50,000 No fee for accounts over \$50,000 	In addition to the fees and charges otherwise described, a \$25 withdrawal fee may apply to any withdrawal not requested through the participant account online at SecurityBenefit.com.

Minimums and Maximums

Initial Investment	Subsequent Investments
\$1,000 or \$25 per salary reduction	\$25 per salary reduction

Exchanges	Availability	How to Request
\$25 per fund	See fund prospectus for availability and restrictions.	Transaction can be requested on SecurityBenefit.com

Automatic Asset Reallocation	Availability	How to Request
\$25 per fund	Monthly, quarterly, semi-annually or annually on the first business day of the month.	Transaction can be requested on SecurityBenefit.com

Automatic Dollar Cost Averaging	Availability	How to Request
\$25 per fund	Monthly, quarterly, semi-annually or annually on the first business day of the month.	Must be initiated in writing. Can be changed in writing or over the phone.

Loan	
Minimum	\$1,000
Maximum*	The lesser of (a) \$50,000 (subject to reduction if the employee has any other outstanding loans), or (b) the greater of 50% of the Employee's nonforfeitable account balance or the entire nonforfeitable account balance up to \$10,000.

An additional asset based fee of 0.45% applies to assets held in the Vanguard Funds.

An additional asset based fee of 0.10% applies to assets held in American Funds.

* The maximum loan amount outstanding from all "qualified employer plans" as defined by section 72(p) of the Internal Revenue Code.

If your plan is subject to ERISA, the maximum loan is 50% of your vested account value.

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Questions? Call our National Service Center at 1-800-747-3942.

Complete the entire form to establish your 457 account. Be sure your contribution amounts do not exceed IRS contribution limits. Your financial professional can assist you in completing this form.

Step 1 – Select Purchase Option

This section of the enrollment form should be completed with the assistance of your Financial Professional. Select **ONLY ONE** of the three options below. Refer to the Custodial Agreement for a complete explanation of the options.

Option 3

Option 4

Rights of Accumulation, Letter of Intent and Exclusive Transfer Offer can be used in combination. The NAV option cannot be used with any other option.

- Rights of Accumulation**
This account qualifies for rights of accumulation or reduced purchase load as described in the Custodial Agreement. Qualifying relationships to the account holder include self, spouse, and children under the age of 21. Please link accounts with the following Social Security Numbers:

- Letter of Intent**
This account qualifies for a purchase load discount by committing to purchase the specified amount below into this account. It is the client intent to purchase within a 13-month period an amount at least equal to:
 \$50,000 \$100,000 \$250,000 \$500,000 \$1,000,000 (if you intend to invest \$1,000,000 or more, the period is 36 months.)

- Exclusive Transfer Offer**
All transfers to the account will be applied with no front end sales charge. Please see **Advisor Mutual Fund Program- Exclusive Transfer Offer** flier for additional details. This offer is only available for external transfers or rollovers to Security Benefit. The transaction must meet or exceed \$50,000.00.

Fee Based Option – When this option is selected, complete additional Investment **Advisor Authorization Form 32-79400-02**.

Step 2 – Provide Employer Information

Name of Employer _____

Employer (EIN) # _____
Optional

Mailing Address _____
Line 1
_____ Line 2
_____ City _____ State _____ Zip Code

Employer's Primary Phone Number _____

Continued on Next Page ►

Step 3 – Provide Personal Information

Participant Name _____ Male Female
First MI Last

Social Security Number _____ **Date of Birth** _____ **Marital Status** Married Single
(mm/dd/yyyy)

Mailing Address _____
Line 1 Line 2
City State Zip Code

Residential Address _____
Line 1 Line 2
City State Zip Code

(A Residential Address is required if the Mailing Address is different than the Mailing Address or is a PO Box.)

Cell Phone Number _____ **Home Phone Number** _____

Personal Email Address _____

Date of Hire _____
(mm/dd/yyyy)

Step 4 – Contribution Instructions for Salary Reduction

Complete this section ONLY if you are contributing through salary reduction. Provide your employer a copy of this form to serve as your salary reduction agreement. The availability of the Roth and Catch-up Contributions needs to be verified with your employer.

Indicate all that apply:

Salary Reduction per pay period

Pre-Tax Qualified Contribution of \$ _____ or _____% per pay period.

After-tax Roth Contribution of \$ _____ or _____% per pay period.

Catch-Up* Amount per pay period

Pre-Tax Qualified Contribution of \$ _____ or _____% per pay period.

After-tax Roth Contribution of \$ _____ or _____% per pay period.

Total \$ _____ or _____% per pay period.

If you indicated a **Catch-Up Amount, please select one of the following:*

Age 50+

3 years before retirement age. Expected retirement date _____
(mm/dd/yyyy)

Step 5 – Investment Instructions

Select **ONLY ONE** of the following three Allocation Elections.

1. Allocation Election 1: Asset Allocation Portfolios With Core Index Funds
2. Allocation Election 2: Target Portfolio by Mesirow Financial
3. Allocation Election 3: Personalized fund list

If no direction is provided, your existing account balance and future contributions will be invested in the JPMorgan U.S. Government Money Market Fund.

Allocation Election 1: Asset Allocation Portfolios With Core Index Funds (Required to select **ONLY ONE** model from the list below)

Only one of the models below may be selected. This is not a managed account. Work with your Financial Professional to update your account. An additional asset based fee of 0.45% applies to assets held in the Vanguard Funds.

<input type="radio"/>	Conservative						
	<table border="0"> <tr> <td>60% Vanguard® Total Bond Market Index</td> <td>5% Vanguard® Developed Markets Index</td> </tr> <tr> <td>20% JPMorgan U.S. Government Money Market</td> <td>2% Vanguard® Mid Cap Index</td> </tr> <tr> <td>13% Vanguard® 500 Index</td> <td></td> </tr> </table>	60% Vanguard® Total Bond Market Index	5% Vanguard® Developed Markets Index	20% JPMorgan U.S. Government Money Market	2% Vanguard® Mid Cap Index	13% Vanguard® 500 Index	
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20% JPMorgan U.S. Government Money Market	2% Vanguard® Mid Cap Index						
13% Vanguard® 500 Index							

<input type="radio"/>	Moderate Conservative						
	<table border="0"> <tr> <td>48% Vanguard® Total Bond Market Index</td> <td>10% Vanguard® Developed Markets Index</td> </tr> <tr> <td>24% Vanguard® 500 Index</td> <td>4% Vanguard® Mid Cap Index</td> </tr> <tr> <td>12% JPMorgan U.S. Government Money Market</td> <td>2% Vanguard® Small Cap Index</td> </tr> </table>	48% Vanguard® Total Bond Market Index	10% Vanguard® Developed Markets Index	24% Vanguard® 500 Index	4% Vanguard® Mid Cap Index	12% JPMorgan U.S. Government Money Market	2% Vanguard® Small Cap Index
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24% Vanguard® 500 Index	4% Vanguard® Mid Cap Index						
12% JPMorgan U.S. Government Money Market	2% Vanguard® Small Cap Index						

<input type="radio"/>	Moderate						
	<table border="0"> <tr> <td>34% Vanguard® Total Bond Market Index</td> <td>6% JPMorgan U.S. Government Money Market</td> </tr> <tr> <td>33% Vanguard® 500 Index</td> <td>6% Vanguard® Mid Cap Index</td> </tr> <tr> <td>16% Vanguard® Developed Markets Index</td> <td>5% Vanguard® Small Cap Index</td> </tr> </table>	34% Vanguard® Total Bond Market Index	6% JPMorgan U.S. Government Money Market	33% Vanguard® 500 Index	6% Vanguard® Mid Cap Index	16% Vanguard® Developed Markets Index	5% Vanguard® Small Cap Index
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33% Vanguard® 500 Index	6% Vanguard® Mid Cap Index						
16% Vanguard® Developed Markets Index	5% Vanguard® Small Cap Index						

<input type="radio"/>	Moderate Aggressive						
	<table border="0"> <tr> <td>36% Vanguard® 500 Index</td> <td>9% Vanguard® Mid Cap Index</td> </tr> <tr> <td>25% Vanguard® Total Bond Market Index</td> <td>8% Vanguard® Small Cap Index</td> </tr> <tr> <td>22% Vanguard® Developed Markets Index</td> <td></td> </tr> </table>	36% Vanguard® 500 Index	9% Vanguard® Mid Cap Index	25% Vanguard® Total Bond Market Index	8% Vanguard® Small Cap Index	22% Vanguard® Developed Markets Index	
36% Vanguard® 500 Index	9% Vanguard® Mid Cap Index						
25% Vanguard® Total Bond Market Index	8% Vanguard® Small Cap Index						
22% Vanguard® Developed Markets Index							

<input type="radio"/>	Aggressive						
	<table border="0"> <tr> <td>42% Vanguard® 500 Index</td> <td>10% Vanguard® Small Cap Index</td> </tr> <tr> <td>26% Vanguard® Developed Markets Index</td> <td>10% Vanguard® Total Bond Market Index</td> </tr> <tr> <td>12% Vanguard® Mid Cap Index</td> <td></td> </tr> </table>	42% Vanguard® 500 Index	10% Vanguard® Small Cap Index	26% Vanguard® Developed Markets Index	10% Vanguard® Total Bond Market Index	12% Vanguard® Mid Cap Index	
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12% Vanguard® Mid Cap Index							

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Step 5 – Investment Instructions (continued)

Allocation Election 2: Target Portfolio by Mesirow Financial (Required to **select ONLY ONE model** from the list below)

This is not a managed account. Work with your Financial Professional to update your account. Target Portfolios are updated annually but your account will not automatically update. An additional asset based fee of 0.45% applies to assets held in the Vanguard Funds. An additional asset based fee of 0.10% applies to assets held in American Funds.

<input type="radio"/> Conservative										
<table border="0"> <tr> <td>20% Guggenheim Core Bond</td> <td>4% BlackRock Equity Dividend</td> </tr> <tr> <td>20% JPMorgan U.S. Government Money Market</td> <td>4% T. Rowe Price Growth Stock</td> </tr> <tr> <td>20% Vanguard® Total Bond Market Index</td> <td>3% Janus Henderson Overseas</td> </tr> <tr> <td>20% Western Asset Core Bond</td> <td>3% Vanguard® Developed Markets Index</td> </tr> <tr> <td>4% American Funds® Washington Mutual InvestorsSM</td> <td>2% Vanguard® Mid Cap Index</td> </tr> </table>	20% Guggenheim Core Bond	4% BlackRock Equity Dividend	20% JPMorgan U.S. Government Money Market	4% T. Rowe Price Growth Stock	20% Vanguard® Total Bond Market Index	3% Janus Henderson Overseas	20% Western Asset Core Bond	3% Vanguard® Developed Markets Index	4% American Funds® Washington Mutual Investors SM	2% Vanguard® Mid Cap Index
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10% T. Rowe Price Growth Stock	2% Western Asset Core Bond													
10% Vanguard® 500 Index														

Continued on Next Page ►

Step 5 – Investment Instructions (continued)

Allocation Election 3: Personalized fund list

Select the funds from the list below by indicating the allocation percentage. An additional asset based fee of 0.45% applies to assets held in the Vanguard Funds. An additional asset based fee of 0.10% applies to assets held in American Funds. An additional asset based fee of 0.25% applies to assets held in the Needham fund.

(Please use whole percentages totaling 100%)

Percentage	Fund Name	Percentage	Fund Name	Percentage	Fund Name
_____	% Allspring Growth	_____	% Fidelity® Advisor Stock Selector Mid Cap	_____	% PIMCO International Bond (U.S. Dollar-Hedged)
_____	% Allspring Large Cap Core	_____	% Fidelity Advisor® Technology	_____	% PIMCO Real Return
_____	% Allspring Small Company Value	_____	% Franklin Growth Opportunities	_____	% PIMCO StocksPLUS® Small Fund
_____	% American Century Diversified Bond	_____	% Franklin High Income	_____	% Pioneer Strategic Income
_____	% American Century Equity Income	_____	% Franklin Income	_____	% Royce Small-Cap Opportunity
_____	% American Century Heritage	_____	% Goldman Sachs Emerging Markets Equity	_____	% Royce Small-Cap Value
_____	% American Century International Growth	_____	% Goldman Sachs Government Income	_____	% Swan Defined Risk
_____	% American Century Select	_____	% Guggenheim Core Bond	_____	% T. Rowe Price Capital Appreciation
_____	% American Century Short Duration Strategic Income	_____	% Guggenheim Floating Rate Strategies	_____	% T. Rowe Price Growth Stock
_____	% American Century Strategic Allocation: Aggressive	_____	% Guggenheim High Yield	_____	% T. Rowe Price Retirement Balanced
_____	% American Century Strategic Allocation: Conservative	_____	% Guggenheim Macro Opportunities	_____	% T. Rowe Price Retirement 2010
_____	% American Century Strategic Allocation: Moderate	_____	% Guggenheim Managed Futures Strategy	_____	% T. Rowe Price Retirement 2015
_____	% American Century Sustainable Equity	_____	% Guggenheim Multi-Hedge Strategies	_____	% T. Rowe Price Retirement 2020
_____	% American Century Ultra®	_____	% Guggenheim Risk Managed Real Estate	_____	% T. Rowe Price Retirement 2025
_____	% American Funds® American Balanced Fund®¹	_____	% Guggenheim SMid Cap Value	_____	% T. Rowe Price Retirement 2030
_____	% American Funds® American Mutual Fund®¹	_____	% Guggenheim StylePlus Large Core	_____	% T. Rowe Price Retirement 2035
_____	% American Funds® New Perspective Fund®	_____	% Guggenheim Total Return Bond	_____	% T. Rowe Price Retirement 2040
_____	% American Funds® Washington Mutual Investors Fund™	_____	% Impax High Yield Bond	_____	% T. Rowe Price Retirement 2045
_____	% AMG River Road Mid Cap Value	_____	% Invesco Comstock	_____	% T. Rowe Price Retirement 2050
_____	% Baron Asset	_____	% Invesco Core Plus Bond	_____	% T. Rowe Price Retirement 2055
_____	% Baron Real Estate	_____	% Invesco Developing Markets¹	_____	% T. Rowe Price Retirement 2060
_____	% BlackRock® Equity Dividend	_____	% Invesco Discovery	_____	% Templeton Global Bond
_____	% BlackRock® Global Allocation	_____	% Invesco Energy	_____	% Vanguard® 500 Index
_____	% BNY Mellon Appreciation	_____	% Invesco Equity and Income	_____	% Vanguard® Developed Markets Index
_____	% BNY Mellon Dynamic Value	_____	% Invesco EQV Emerging Markets All Cap	_____	% Vanguard® Emerging Markets Stock Index
_____	% Calamos® Growth and Income	_____	% Invesco Global	_____	% Vanguard® Mid Cap Index
_____	% Calamos® Market Neutral Income	_____	% Invesco Gold & Special Minerals	_____	% Vanguard® Real Estate Index
_____	% Calvert Core Bond	_____	% Invesco Value Opportunities	_____	% Vanguard® Small Cap Index
_____	% Calvert Emerging Markets Equity	_____	% Janus Henderson Absolute Return Income Opportunities	_____	% Vanguard® Target Retirement 2020
_____	% Calvert Flexible Bond	_____	% Janus Henderson Adaptive Risk Managed U.S. Equity	_____	% Vanguard® Target Retirement 2025
_____	% Calvert Growth Allocation	_____	% Janus Henderson Global Equity Income	_____	% Vanguard® Target Retirement 2030
_____	% Calvert Small-Cap	_____	% Janus Henderson Global Life Sciences	_____	% Vanguard® Target Retirement 2035
_____	% ClearBridge Mid Cap	_____	% Janus Henderson Mid Cap Value	_____	% Vanguard® Target Retirement 2040
_____	% ClearBridge Sustainability Leaders	_____	% Janus Henderson Overseas	_____	% Vanguard® Target Retirement 2045
_____	% Delaware Ivy Asset Strategy	_____	% JPMorgan Growth Advantage	_____	% Vanguard® Target Retirement 2050
_____	% Delaware Ivy High Income	_____	% JPMorgan Income	_____	% Vanguard® Target Retirement 2055
_____	% Delaware Ivy International Core Equity	_____	% JPMorgan Short Duration Core Plus	_____	% Vanguard® Target Retirement 2060
_____	% Delaware Ivy Large Cap Growth	_____	% JPMorgan U.S. Government Money Market	_____	% Vanguard® Target Retirement 2065
_____	% Delaware Ivy Mid Cap Growth	_____	% JPMorgan US Small Company	_____	% Vanguard® Target Retirement Income
_____	% DWS International Growth	_____	% Needham Aggressive Growth	_____	% Vanguard® Total Bond Market Index
_____	% Federated Hermes Corporate Bond	_____	% Neuberger Berman Large Cap Value	_____	% Vanguard® Total International Bond Index
_____	% Federated Hermes Prudent Bear	_____	% Northern Global Tactical Asset Allocation	_____	% Victory RS Partners
_____	% Fidelity® Advisor High Income Advantage	_____	% PGIM Global Total Return	_____	% Victory RS Science and Technology
_____	% Fidelity® Advisor International Capital Appreciation	_____	% PGIM Jennison Mid-Cap Growth	_____	% Victory RS Value
_____		_____	% PGIM Jennison Utility	_____	% Virtus Ceredex Mid Cap Value Equity
_____		_____	% PIMCO All Asset	_____	% Virtus KAR Mid-Cap Growth
_____		_____	% PIMCO CommodityRealReturn Strategy	_____	% Virtus SGA Global Growth
_____		_____	% PIMCO Emerging Markets Bond	_____	% Western Asset Core Bond

¹Not available to plans established after April 12, 2013.

Automatic Asset Rebalance (AAR)

Check one Frequency below only if you wish to establish Automatic Asset Rebalance. Your account will be rebalanced on the first business day of the month according to the frequency selected. Frequencies are based on a calendar year.

Frequency: Monthly Quarterly Semi-Annually Annually

Must Total 100%

Step 6 – Provide Primary and Contingent Beneficiary(ies)

Provide beneficiary designations. Use whole percentages totaling 100% for Primary and 100% for Contingent.

	Primary Beneficiary Name (Full Legal Name)	Social Security No.	DOB (mm/dd/yyyy)	Relationship to Participant	% of Benefit
1.					
2.					
3.					
4.					
5.					

Must Total 100%

	Contingent Beneficiary (Full Legal Name)	Social Security No.	DOB (mm/dd/yyyy)	Relationship to Participant	% of Benefit
1.					
2.					
3.					
4.					
5.					

Must Total 100%

I have additional beneficiary designations and have listed them, in this same format, on page 10 in the **Additional Information** section. **Beneficiary must be marked as Primary or Contingent.**

Continued on Next Page ►

Step 7 – Participant Signature

I understand and acknowledge that:

- I am permitted to direct my investments in this plan and I am responsible for the results of my investment directions.
- I have received and reviewed the information about investment choices and had the opportunity to freely choose how my contributions are to be invested.
- I should contact my financial representative to confirm the assessment of redemption fees and the availability of certain funds.
- Transactions may be requested via phone, Internet, or other electronic means by the Participant and/or financial representative based on instructions of the Participant. Security Distributors has established procedures reasonably designed to confirm that phone instructions are genuine. Neither the Fund nor Security Distributors will be liable for any loss, liability, or expenses arising out of any phone request, provided the procedures were followed. Thus, a stockholder may bear the risk of loss from a fraudulent or unauthorized request.

Tax Identification Number Certification

Under penalties of perjury I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); **and**
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, **and**
3. I am a U.S. citizen or other U.S. person (as defined in the IRS Form W-9 instructions).

You must cross out item 2 above, if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return.

I hereby: (1) acknowledge receipt and adoption of the Trust Agreement with UMB Bank, n.a. as trustee and (2) consent to the trust fees outlined in the Administrative Services Agreement. The Internal Revenue Service does not require your consent to any provisions of this document other than the certifications required to avoid backup withholding.

Important Information About Procedures For Opening A New Account

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means to you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Investment Advisor Authorization – For the Fee Based Election Only

Please read the advisor authorization.

If the Fee Based Option was elected as the purchase option, the following authorizations, confirmation, and disclaimers will apply to your enrollment.

Information Disclosure Authorization.

I authorize Security Benefit Life Insurance Company (SBL), Security Financial Resources, Security Distributors and their affiliates ("Security Benefit") to release account information to the advisor listed above ("Advisor") and to comply with written, telephone, internet or faxed instructions from the Advisor listed for the account. I authorize Security Benefit to provide, or give access to, my account information to one or more third parties at the request of my Advisor as deemed necessary or desirable by my Advisor to service my account.

Fee Payment Authorization.

If authorized, fees will be deducted from the funds to which account value is allocated in the same proportion as the value is allocated among the investment options as of the date each fee is deducted.

I hereby authorize Security Benefit to:

- (a) Comply with written or electronic requests from the Advisor to liquidate a given dollar amount to pay advisory fees under the advisory fee services agreement between the Advisor and me.
- (b) Liquidate the additional percentage or dollar amounts necessary to cover any charges resulting from the deduction of advisory fees from my account.

I acknowledge and agree that:

- (a) Security Benefit is not responsible or liable to determine that the instructions received from the Advisor are in compliance with the agreement between my Advisor and me.
- (b) Security Benefit has no duty to inquire into the amount withdrawn or the manner in which it is withdrawn from your account.
- (c) Withdrawals to deduct fees may incur withdrawal charges. If charges are due as a result of a withdrawal initiated to pay advisory fees, Security Benefit will liquidate a larger percentage or dollar amount than the amount requested to pay for such charges.

Waiver of Confirmation

Your Advisor may provide financial reports for you that include all transactions in your account. Confirm with your Advisor that they provide these services. Please complete this section if this option is provided by your Advisor and you do not wish to receive confirmations from Security Benefit.

- I understand that Rule 10b-10 under the Securities Exchange Act of 1934, as amended, requires that all security transactions involving variable annuities and other securities be confirmed in writing to me. In lieu of receiving such written confirmation from Security Benefit and its underwriters, I instruct Security Benefit to forward confirmation of securities transactions to Advisor on my behalf. I have an agreement with the Advisor pursuant to which they will prepare consolidated financial reports for me, and information concerning my investments will be included in such reports. I hereby release Security Benefit from any loss or liability relating thereto, including, without limitation, any loss or liability arising from or relating to the fact that confirmations are not sent to me, as well as any loss or liability arising from or relating to my Advisor's use of this information.

Disclaimers

Security Benefit does not make any representation or warranty concerning the tax treatment of payment of advisory fees under the Internal Revenue Code of 1986, as amended, or otherwise.

Security Benefit has no responsibility or liability for any taxes, penalties and/or interest that may be assessed by the Internal Revenue Service or other administrative tribunal or court arising out of this authorization.

Security Benefit is not involved in the selection of your Advisor, makes no representation or warranty regarding their services, and is not liable for their actions or inactions.

Provide Signatures

Your signature is required to authorize Security Benefit to activate this authorization.

I have read and understand the information contained in this form. I hereby release and hold Security Benefit harmless from any loss or liability arising out of any taxes, penalties, or interest resulting from any transaction initiated by my Advisor that I have authorized hereunder, including, but not limited to, (1) the tax treatment of payment of advisory fees under the Internal Revenue Code of 1986, as amended, or otherwise; and (2) any taxes, penalties, and/or interest assessed by the Internal Revenue Service or other administrative tribunal or court arising out of my authorization. I further hereby release and hold Security Benefit harmless from any loss or liability arising from Security Benefit allowing third party access to my account and account information at the direction of my Advisor and from any loss or liability arising from the services provided by my Advisor and my Advisor's actions or inactions with respect to my account. I understand and acknowledge that the account is solely responsible for the advisory fees set forth in the agreement between the Advisor and me.

This authorization shall remain in effect until the earlier of:

1. the next valuation date following the receipt by Security Benefit of notice of termination of this authorization, either (a) written and signed, or (b) submitted electronically, by either the Participant or Advisor;
2. the full surrender or total distribution of the account; or
3. Security Benefit's receipt of notification of the death of the Participant.

X _____
Signature of Employee

_____ Date (mm/dd/yyyy)

(You must include your designation if signing as a trustee, executor, custodian, guardian, or attorney-in-fact.)



Check all that apply

I elect to receive, electronically to my email address provided:

- Statements Confirms Fund Documents Tax Forms

Email Address _____

Continued on Next Page ►

Step 8 – Financial Professional Signature

This section of the enrollment form should be completed by your Financial Professional. Complete your information and sign.

THE FOLLOWING REPRESENTATIONS, WARRANTIES, AND CERTIFICATIONS APPLY WITH RESPECT TO THE PROVISION OF FIDUCIARY INVESTMENT ADVICE (AS DEFINED IN SECTION 3(21)(A)(iii) OF THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974, AS AMENDED (“ERISA”), SECTION 4975(e)(3)(B) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED (THE “CODE”), AND GUIDANCE ISSUED BY THE UNITED STATES DEPARTMENT OF LABOR), PROVIDED IN RELATION TO THE TRANSACTION CONTEMPLATED BY THIS FORM, INCLUDING ADVICE TO ROLL OVER (1) THE ASSETS OF A PLAN SUBJECT TO ERISA (“PLAN”) TO ANOTHER PLAN, (2) PLAN ASSETS TO AN INDIVIDUAL RETIREMENT ACCOUNT DESCRIBED IN CODE SECTION 4975(e)(1)(B) THROUGH (F) (“IRA”), (3) AN IRA TO A PLAN, OR (4) AN IRA TO ANOTHER IRA

By signing below, I represent, warrant, and certify to Security Benefit that I have complied with the United States Department of Labor’s Prohibited Transaction Exemption (PTE) 2020-02, in connection with the transaction contemplated by this form.

Without limiting the generality of the foregoing, I represent, warrant, and certify to Security Benefit that I:

- (1) acted in accordance with the “Impartial Conduct Standards,” including:
 - a. the investment advice I provided regarding the transaction was in the Participant’s best interest;
 - b. the combined total of all fees I have received and will receive for my services does not exceed reasonable compensation within the meaning of ERISA Section 408(b)(2) and Section 4975(d)(2) of the Code; and
 - c. I made no materially misleading statements to the Participant with respect to the recommended transaction and other relevant matters.
- (2) made the following written disclosures to the Participant:
 - a. an acknowledgment that I (and my supervising financial institution) am a fiduciary for purposes of ERISA and Section 4975 of the Code;
 - b. a description of the services to be provided and my and my financial institution’s material conflicts of interests, that is accurate and not misleading in any material respect; and
 - c. Effective July 1, 2022 or as otherwise mandated by the United States Department of Labor, if my advice involved a rollover recommendation, documentation of the specific reasons for that recommendation.
- (3) am not ineligible to rely on PTE 2020-02; and
- (4) am in compliance with all applicable conditions of PTE 2020-02.

Additionally, I acknowledge that neither Security Benefit nor any of its affiliates is a fiduciary with respect to the Participant’s transaction.

Financial Professional Name: _____

Financial Professional Number: _____

E-mail: _____ **Phone Number:** _____

Broker Dealer or Firm Name: _____

X _____
Signature of Financial Professional Date (mm/dd/yyyy)

Continued on Next Page ►

Additional Information

This space is provided for special instructions or additional beneficiary designations. Each Beneficiary designation must be in the same format and marked Primary or Contingent.

Mail to:

Security Benefit Retirement Plan Services
P.O. Box 219141
Kansas City, MO 64121-9141
Fax to: 816.701.7626

For expedited or overnight delivery:

Security Benefit Retirement Plan Services
430 W. 7th Street STE 219141
Kansas City, MO 64105-1407

Visit us online at [SecurityBenefit.com](https://www.SecurityBenefit.com)

Questions? Call our National Service Center at 1-800-747-3942.

Instructions

Use this form to transfer funds from your current carrier to Security Benefit. Complete the entire form.

Please type or print.

1. The Participant should complete this Incoming Funds Request form.
2. Please contact your current carrier for any form requirements it may have for transferring money to another company.
Note: If you are age 73 and unemployed, the Required Minimum Distribution must be completed by the current carrier prior to requesting this transfer of funds.
3. Obtain Signature Guarantee if required by your current carrier.
4. Upon receiving this material Security Benefit will send a letter to the current carrier.
5. If you are completing this form for a 403(b) or 403(b)(7) account/contract please contact your employer for any processing instructions the employer or third party administrator may require.

Notice to Current Carrier

This completed form and your current carrier's form along with a check made payable to Security Benefit for the benefit of the Participant listed on this should be mailed to:

Mail to: Security Benefit Retirement Plan Services P.O. Box 219141 Kansas City, MO 64121-9141	For expedited or overnight delivery: Security Benefit Retirement Plan Services 430 W. 7th Street STE 219141 Kansas City, MO 64105-1407
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SecurityBenefit.com

Provide Security Benefit Account Information

Plan Number _____ Plan Name _____

Name of Participant _____
First MI Last

Mailing Address _____
Line 1 Line 2
City State Zip Code

Social Security/Tax I.D. Number _____

Cell Phone Number _____ Home Phone Number _____

Indicate the type of account you would like to transfer your funds to (check one).

<input type="radio"/> 403(b)(7)	<input type="radio"/> 457(b) Governmental	<input type="radio"/> SIMPLE IRA*
<input type="radio"/> Roth 403(b)(7)**	<input type="radio"/> Roth 457(b)**	<input type="radio"/> Traditional IRA
TPA Approval Required	<input type="radio"/> 457(b) Tax Exempt	<input type="radio"/> Roth IRA
	<input type="radio"/> SEP-IRA	

* SIMPLE IRA accounts can only accept transfers from another SIMPLE IRA account. A rollover from a non-SIMPLE IRA account can be made after the account has been in effect for 2 years.

** Roth assets can only be transferred to a Roth designated account.

Continued on Next Page ►

Provide Your Current Carrier Information

Please fill out the name and contact information of your current carrier.

Current Carrier's Name _____

Mailing Address: _____
Line 1 Line 2

City State Zip Code

Phone Number _____ **Account Number for Current Carrier** _____

Indicate the account type you have with your current carrier (check one).

- 401(a) 403(b) TSA Roth 403(b)(7) 457(b) Tax Exempt* SEP-IRA
- 401(k) Roth 403(b) TSA 457(b) Governmental Traditional IRA SIMPLE IRA
- Roth 401(k) 403(b)(7) Roth 457(b) Roth IRA

Indicate the investment type you have with your current carrier (check one).

- Annuity Bank CD Mutual Fund

If this request involves an annuity and your entire account balance, please check one of the following. My policy is:

- Enclosed Lost/Destroyed

**Can only transfer to another 457(b) Tax Exempt.*

Set up Transfer/Rollover Options

403(b)/403(b)(7) accounts only:

Please indicate one of the following

- Transfer (prior employer 403(b) Plan to current employer 403(b) Plan)
- Exchange (exchange of 403(b)/403(b)(7) assets from one provider to another provider within your current employer's Plan)
- Rollover (not like to like, for example 457 to 403(b)(7), etc.)

All other accounts other than 403(b)/403(b)(7)

Type of Transfer/Rollover

- Rollover (not like-to-like, for example 457 to IRA, etc.)
- Transfer (like-to-like, for example, SIMPLE to SIMPLE, IRA to IRA, etc.)
- Conversion to Roth IRA

Amount of Transfer/Rollover

- Liquidate my entire Account: Estimated Value \$ _____
- Liquidate a specified amount: Amount to Transfer \$ _____
- Transfer over _____ years
- Monthly Quarterly Semi-Annually Annually

Distribution Requirements (if applicable)

I certify that applicable requirements have been met for distribution. Check all that apply:

- Age 59 ½ Disabled Severance from employment on _____
Date (mm/dd/yyyy)

Continued on Next Page ►

To view the investment options available for your contract, scan the **QR code** or visit **SecurityBenefit.com/Performance** and select your contract's product name.



Provide Investment Direction

Indicate your investment preferences below using whole percentages totaling 100%.

Please invest the funds (check one):

- As indicated on the enrollment form; or for an existing account, to the allocations on file.
- According to the Investment Allocations indicated below. Indicate whole percentages totaling 100%.

If no option is indicated above, the funds will be invested according to the allocations on file.

Percentage	Fund Name
_____ %	_____
_____ %	_____
_____ %	_____
_____ %	_____
_____ %	_____
_____ %	_____
_____ %	_____
_____ %	_____
_____ %	_____
_____ %	_____
_____ %	_____

Must Total 100%

For questions please consult with your financial professional.

Continued on Next Page ►

If you are transferring funds to or from an ERISA Plan or to or from an IRA, your Financial Professional must complete this section and sign below.

THE FOLLOWING REPRESENTATIONS, WARRANTIES, AND CERTIFICATIONS APPLY WITH RESPECT TO THE PROVISION OF FIDUCIARY INVESTMENT ADVICE (AS DEFINED IN SECTION 3(21)(A)(iii) OF THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974, AS AMENDED ("ERISA"), SECTION 4975(e)(3)(B) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED (THE "CODE"), AND GUIDANCE ISSUED BY THE UNITED STATES DEPARTMENT OF LABOR), PROVIDED IN RELATION TO THE TRANSACTION CONTEMPLATED BY THIS FORM, INCLUDING ADVICE TO ROLL OVER (1) THE ASSETS OF A PLAN SUBJECT TO ERISA ("PLAN") TO ANOTHER PLAN, (2) PLAN ASSETS TO AN INDIVIDUAL RETIREMENT ACCOUNT DESCRIBED IN CODE SECTION 4975(e)(1)(B) THROUGH (F) ("IRA"), (3) AN IRA TO A PLAN, OR (4) AN IRA TO ANOTHER IRA

By signing below, I represent, warrant, and certify to Security Benefit that I have complied with the United States Department of Labor's Prohibited Transaction Exemption (PTE) 2020-02, in connection with the transaction contemplated by this form.

Without limiting the generality of the foregoing, I represent, warrant, and certify to Security Benefit that I:

- (1) acted in accordance with the "Impartial Conduct Standards," including:
 - a. the investment advice I provided regarding the transaction was in the Participant's best interest;
 - b. the combined total of all fees I have received and will receive for my services does not exceed reasonable compensation within the meaning of ERISA Section 408(b)(2) and Section 4975(d)(2) of the Code; and
 - c. I made no materially misleading statements to the Participant with respect to the recommended transaction and other relevant matters.
- (2) made the following written disclosures to the Participant:
 - a. an acknowledgment that I (and my supervising financial institution) am a fiduciary for purposes of ERISA and Section 4975 of the Code;
 - b. a description of the services to be provided and my and my financial institution's material conflicts of interests, that is accurate and not misleading in any material respect; and
 - c. Effective July 1, 2022 or as otherwise mandated by the United States Department of Labor, if my advice involved a rollover recommendation, documentation of the specific reasons for that recommendation.
- (3) am not ineligible to rely on PTE 2020-02; and
- (4) am in compliance with all applicable conditions of PTE 2020-02.

Additionally, I acknowledge that neither Security Benefit nor any of its affiliates is a fiduciary with respect to the Participant's transaction.

Name of Financial Professional _____ Financial Professional Number _____

Financial Professional Phone Number _____ Broker/Dealer or Firm Name _____

Financial Professional Email _____

X _____ Date (mm/dd/yyyy) _____
Signature of Financial Professional

Obtain Signature Guarantee

Please obtain a Signature Guarantee ONLY if required by your Current Carrier.

You can obtain a Signature Guarantee from a bank, broker or other acceptable financial institution. A Notary Public cannot provide a Signature Guarantee.

X _____ Date (mm/dd/yyyy) _____ Title or Name of Institution _____
Signature of Guarantor

Place Signature Guarantee Stamp Here

Security Benefit Acceptance

To be completed by Security Benefit. Security Benefit hereby agrees to accept the transfer of the proceeds identified on this form.

X _____ Date (mm/dd/yyyy) _____ Title _____
Signature of Accepting Carrier

Financial Professional Use Only

Optional Instructions for Advisor Option 4 Accounts — Select Only One Choice

Rights of Accumulation

This account qualifies for rights of accumulation or reduced purchase load as described in the Custodial Agreement. Qualifying relationships to the account holder include self, spouse, and children under the age of 21. Please link accounts with the following Social Security Numbers:

_____	_____
_____	_____

Letter of Intent

This account qualifies for a purchase load discount by committing to purchase the specified amount below into this account. It is the client intent to purchase within a 13-month period an amount at least equal to:

- \$50,000
- \$100,000
- \$250,000
- \$500,000
- \$1,000,000 (if you intend to invest \$1,000,000 or more, the period is 36-months.)

Exclusive Transfer Offer — see corresponding flyer

All transfers to the account will be applied with no front end sales charge. See corresponding flyer for additional details.

Visit us online at SecurityBenefit.com
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Trust Account Agreement

This Trust Account Agreement (“Agreement”) establishes a Section 457(g) Individual Trust Account to hold contributions and earnings under a Code Section 457(b) eligible deferred compensation plan maintained by a governmental employer (“Employer”) on behalf of the Employer’s common-law employee (“Employee”). This Individual Trust Account shall become effective on the date the Trustee issues a confirmation to the Employee.

I. DEFINITIONS

“Account” or “Trust Account” means this individual trust account established by the Employer to hold the contributions and earnings for the benefit of the Employee.

“Code” means the Internal Revenue Code of 1986, and regulations and rulings issued thereunder, as amended to date.

“SD” means Security Distributors, which has distributed this Trust Account, which serves as agent of the Trustee for the acquisition and disposition of investments for the Trust Account, and which may exercise any authority granted hereunder and by any separate agreement with the Trustee. SD is a member of the Security Benefit Group.

“SFR” means Security Financial Resources, Inc., which serves as agent of the Trustee for recordkeeping and day to day operation of the Trust Account and which may exercise any authority granted hereunder and by any separate agreement with the Trustee. SFR is a member of the Security Benefit Group.

“Plan” means a 457 Deferred Compensation Plan adopted by the Employer in a form provided by SD for use with this Agreement, or another document provided to SD, under which the Employer makes contributions to the Account for the exclusive benefit of the Employee.

“Trustee” means UMB Bank, n.a., and any successor entity that satisfies the requirements of Code Section 401(f)(2), appointed by SD pursuant to Article VI below. Any reference to the Trustee in this Agreement shall include a reference to any agent of the Trustee while performing the duties of the Trustee, including SD and SFR.

II. ESTABLISHING A TRUST ACCOUNT; ADDITIONS TO ACCOUNT

1. Upon receipt of an application in a form acceptable to the Trustee, the Trustee shall establish an Account for the exclusive benefit of the Employee to receive contributions made under the provisions of the Plan.
2. Assets transferred from existing 457 accounts and annuities, eligible rollovers from other plans, and contributions made by the Employer under the Plan should be made payable to: “**Security Distributors**, as agent for UMB Bank, n.a., Trustee, Account of (Employee’s name), under §457 of the Internal Revenue Code.”
3. The minimum initial contribution shall be \$1,000 (\$25 if made by payroll deduction remitted by the Employer) or such other minimum as SD may establish.
4. All transfers, rollovers and contributions shall be in cash. Except for the fees and expenses of the Account, and except as the Plan may provide for vesting and forfeitures of matching or non-elective contributions, the Employee shall have a 100 percent nonforfeitable right to all amounts credited to his or her Trust Account.

III. TRUST ACCOUNT INVESTMENTS

1. The Trust Account shall invest in the shares of one or more registered investment companies (mutual funds) designated by SD and made available for investment of Account assets. SD shall have the authority to add mutual funds to those available for investment and to remove or replace mutual funds previously available. Upon removal of any mutual fund, SD may allow investments in the fund to continue, may allow additional investments in the fund for an Account already invested at the time of removal, or may require the sale of shares of the fund held in the Account. The Trustee may impose minimum dollar values for allocations of contributions or exchanges to a particular mutual fund investment option. The addition, removal or replacement of mutual funds may affect the compensation that SD and its affiliates receive in connection with the Trust Account (See, e.g., the discussion of Administrative, Marketing, and Support Service Payments). To the extent reasonably practicable, the Employee (or the Employer) will receive written notice reasonably in advance (typically at least 120 days under normal circumstances) before the effective date of any proposed mutual fund change(s). With respect to any fund removal for which liquidation will be required, the written notice will inform the Employee (or the Employer) of their right to elect to transfer the assets to one or more other available funds before the effective date of the change, and to which specific fund any assets remaining in the fund to be removed would otherwise be mapped (transferred) by default on the effective date of the change. This written notice will likewise explain that, if the Employee (or Employer) does not elect to transfer the assets to a different available fund prior to the effective date of the changes, the Employee (or the Employer) will be deemed by SD to have consented to such mutual fund change(s), and SD reserves the right to proceed with implementing such change(s), including with respect to the Trust Account.
2. The allocation of Account contributions between designated mutual funds shall be made by the Employee (or his or her attorney in fact, if accepted by SD) in any manner accepted by SD. SD may prescribe the manner of allocation when it deems appropriate, including when no allocation instructions have been received from the Employee or when a mutual fund is removed by SD as a fund available for investment of future contributions to the Account. By actually delivering such investment allocation instructions or direction, the Employee acknowledges that he or she has already or will promptly receive a prospectus of each such mutual fund. Employee will notify SD and request a current prospectus if it is not received within 10 business days.
3. The Employee (or his or her attorney in fact, if accepted by SD) may give SD instructions as to the exchange of shares between available mutual funds in any manner accepted by SD; provided that SD may prescribe required exchanges when it deems appropriate, such as when a fund is removed as a fund available for investment of existing account assets.

Except to the extent such exchanges are unilaterally conducted by or required by SD, neither the Trustee, nor its agent, nor any of said mutual funds will be responsible for originating or suggesting any such exchanges of shares.

4. Upon notice of any investment made in any manner directed by SD, and the failure of the Employee to issue further instructions on the allocation of Account assets within five business days, the Employee shall be deemed to have adopted and ratified the investment transactions completed under the direction of SD. All market risks and the timing of any such exchanges of shares conducted at the direction or deemed direction of the Employee shall be the sole responsibility of the Employee.
5. The purpose of the Account is to provide long term, retirement investment in a tax-deferred plan under Section 457 of the Code. SD reserves the right to impose restrictions on the method and number of investment exchanges and transfers, and to enforce them on an individual basis to this Account, without necessarily applying them to similar Trust accounts. These determinations may be made by SD in a discretionary manner, and shall not be subject to review on a fiduciary basis.

IV. ADMINISTRATION OF TRUST ACCOUNTS

1. In addition to and subject to the other provisions of this Agreement, the Trustee, directly and through its agents, shall have the following authority and powers in the administration of the Trust Accounts:
 - a. to interpret and apply the provisions of this Trust Account Agreement;
 - b. to receive all contributions, transfers and rollovers for investment in any of the mutual funds made available by SD for investment of Account assets under this Agreement;
 - c. to exchange investments between the mutual funds made available by SD for investment of Account assets as directed by the Employee, subject to the rights of SD with respect to exchanges;
 - d. to reinvest in an available mutual fund in the Trust Account all regular dividends and capital gains distributions payable on the shares of that fund;
 - e. to deliver or cause to be delivered to the Employee all notices, financial statements, prospectuses, and contracts relating to the fund shares held in the Account;
 - f. to keep and regularly furnish to the Employer and the Employee a statement of the Employee's Trust Account showing contributions, investments, earnings, gains, losses, and distributions made from the Account;
 - g. to make loan(s) from the Account to the Employee in accordance with non-discriminatory plan loan provisions adopted by the Employer and set forth in the Plan and other documents acceptable to SD, and to administer and enforce such loans;
 - h. to determine and distribute any benefits payable to the Employee or any Beneficiary of the Employee under the provisions of the Plan;
 - i. to make a distribution of any eligible rollover distribution in a direct trustee-to-trustee transfer (direct rollover) to a eligible retirement plan, as set forth in the Plan;
 - j. to prepare such returns, reports or forms as are required to be furnished to the Employee and to the Internal Revenue Service for distributions from the Trust Account;
 - k. to register the mutual fund shares credited to the Account in the name of the Trustee or its agent or nominee;
 - l. to determine and withdraw any fees and charges payable hereunder, as set forth in a separate schedule delivered with this Agreement, which is hereby incorporated into this Agreement, and, pursuant to a limited power of attorney granted by the Employee to the Trustee, to direct the sale of mutual fund shares from the account to pay for fees and charges and to authorize the trustee to retain sufficient assets upon any request for full distribution or transfer of the account to pay any remaining fees and charges; and
 - m. to do any and all other acts as the Trustee may deem necessary or appropriate to properly operate the Account.
2. Except for possession of Account assets, the forgoing duties of the Trustee have been delegated to SD and SFR under the provisions of a separate agreement. The Trustee shall be fully protected in relying on the actions of these agents and the statements and reports furnished it by them.
3. SD shall vote proxies for mutual fund shares in the Trust Account in any manner which it determines, in its discretion. Although SD may solicit voting instructions from the Employee, SD may issue or refuse to issue proxies as it deems appropriate, even if instructions are received from the Employee, without such determination considered to be a fiduciary act or conducted in a fiduciary capacity. SD may further vote proxies as "present" at any meeting of shareholders for the purpose of establishing a quorum, and to register such shares as voted, while abstaining or directing abstention on all or any issues on which shares may be voted at such meeting.
4. The Employer has the sole responsibility to administer the provisions of the Plan. Upon the remittance by the Employer of Plan contributions to the Trustee, the authority and responsibility of the Employer shall cease, except to the extent that forfeitures of non-vested contributions are required to be repaid to the Employer or applied as directed by the Employer under the terms of the Plan, and to the extent that the Employer is required to notify the Trustee of any severance of the employment of the Employee with the Employer.
5. The assets of the Trust Account shall not be subject to alienation, assignment, garnishment, attachment, execution or levy of any kind (other than fees and charges by the Trustee in accordance herewith), and any attempt to cause such assets to be so subjected shall not be recognized, except to such extent as may be required by law or the Code; provided, that the Trustee may recognize and take reasonable measures intended to comply with the provisions of any Domestic Relations Order it reasonably believes to be enforceable against the Trustee or Trust Account, including but not limited to a Qualified Domestic Relations Order which is enforceable against the Trustee or Trust Account under the provisions of Section 414(p) of the Code.

V. DUTY OF TRUSTEE AND AGENTS

1. The Trustee shall be fully protected in acting or omitting to take any action in reliance upon any instruction reasonably believed to originate with the Employee (or the Employee's attorney-in-fact) or the Employer and which is believed to be genuine and properly given. The Trustee shall also be fully protected in acting or omitting to take any action in reliance on its belief that any such instruction either is not genuine or is not properly given.
2. The Trustee shall be entitled to rely on all information provided to it by the Employer and Employee, and shall have no duty to verify or question the accuracy of such information.
3. To the extent permitted by law, the Employer and Employee shall fully indemnify the Trustee and hold it harmless from any and all liability which may arise in connection with this Agreement and the matters which it contemplates except for liability arising as a direct result of the Trustee's gross negligence or willful misconduct.
4. For purposes of this section, the term "Trustee" shall include in addition to the Trustee, any entity performing services for the Trustee, including SD and SFR, as well as any agents, affiliates, successors, assigns, officers, directors and employees of the Trustee and SD or SFR, and others performing services for the Trustee.
5. The Trustee and/or the funds disclaim any liability in the event that any such accounts are determined to be subject to taxation under the laws of any state or local tax authority.

VI. RESIGNATION AND REMOVAL OF TRUSTEE

1. SD shall have the right to remove the Trustee and designate a successor Trustee. Upon receipt by the Trustee of written acceptance by the successor of its appointment, the removal of the Trustee shall be effective and the Trustee shall forthwith transfer and pay over to such successor Trustee the assets of the Trust.
2. The Trustee shall at all times have the right to resign as Trustee under this Agreement by delivering to SD a written notice of resignation. Upon receiving such notice, SD shall appoint a successor Trustee. The successor Trustee shall not be responsible for any acts or omissions of prior Trustees of the Account, nor shall a prior Trustee be responsible for the acts of a successor, or for evaluating the abilities of any successor prior to transferring the assets of the Trust Account to the successor.

VII. AMENDMENT, TERMINATION AND FORFEITURES

1. This Agreement shall be amended by SD on behalf of the Trustee in order to comply with the provisions of the Code, or as it or the Trustee shall otherwise deem necessary. The Trustee shall provide prompt written notice and a copy of any such amendments to the Employee. However, no amendment shall be made that would retroactively deprive any Employee of any benefit to which he or she is entitled under this Agreement, unless such amendment is necessary to conform this Agreement to or satisfy the conditions of any law, governmental regulation or ruling.
2. The Trust shall terminate when all vested assets held therein have been distributed. The Trust shall also terminate upon a determination by the Internal Revenue Service that the Trust does not qualify under Code Section 457. Upon such termination the Trustee shall distribute all vested assets in the Trust Account to the Employee.
3. Upon the distribution of all vested amounts, or upon the certification by the Employer that a separation from service of the Employee has occurred without full vesting of any amount subject to a vesting schedule, any Employer contribution which is not vested shall be paid to the Employer or applied by the Trustee in the manner directed by the Employer.
4. If so requested by the Employer, the Trustee may terminate the Trust and distribute the Trust assets without the consent of the Employee if there is a distributable event (or at the request of the Employee prior to a distributable event if no contributions have been made to the Account for two years and no prior such request has been made by the Employee), the value of the vested Account is \$5000 or less, and the Employee is afforded the opportunity to directly roll over the balance of the Account to an eligible retirement plan. Furthermore, even if not permitted by the Code, the Trustee reserves the right to distribute the assets if the Trust value drops below \$5,000. This determination may be made by the Trustee or its agent in a discretionary manner, and shall not be subject to review on a fiduciary basis. To the extent required or permitted by the Code, any involuntary distribution may be made by transfer of the assets to an individual retirement account or annuity.

Administrative Services Agreement

1. **Services Provided.** Security Distributors (SD) and its affiliate, Security Financial Resources, Inc. (SFR), provide the following services for the Trust Account:
 - a. Distribution of Trust Accounts through independent financial planners, consultants, and other authorized individuals under the distribution option designated in the Employee's Account application.
 - b. Employer Section 457 Plan documents, Section 457(g) Trust Account Agreements and updates for these documents, as needed.
 - c. Trustee services for the Trust Accounts by an independent fiduciary, UMB Bank, n.a.
 - d. A broad variety of mutual funds for Employee directed investment of Trust Account assets.
 - e. Distribution of prospectuses, annual, semi-annual and other reports from mutual fund managers.
 - f. Daily processing of Account contributions, mutual fund dividends and fund distributions to the Accounts.
 - g. Daily valuations of Trust Accounts.
 - h. Daily Employee directed changes in contribution allocations and daily Employee directed investment exchanges between available investments.
 - i. Employee access to Account information by telephone and internet connections and Employee Account statements.
 - j. Retirement and investment educational materials to assist Employees in planning for their retirement.
 - k. Loan processing and administration for loans to Employees from their Trust Accounts.
 - l. Distributions to Employees from Trust Accounts, with required withholding of federal income taxes and reports of distributions to Employees and the IRS.

2. **Fees Charged by the Funds.** Each available investment has expenses and fees charged against the fund, as disclosed in the prospectus of the fund. In addition to investment management and other expenses reflected in the publicly quoted net asset value (NAV) of the fund, additional fees such as redemption fees, fund level sales charges and fund level contingent deferred sales charges may be imposed against Account investments in the funds under the circumstances described in the fund prospectus.

3. **Fees Charged to Accounts.** In addition to charges imposed by the mutual fund, the following additional fees will be charged by the Trustee against the assets in the Trust Account for the services provided by SD and SFR to the Accounts:
 - a. An annual administration fee of \$35.00 for each Account with a balance less than \$50,000, to be deducted annually on a day determined by the Trustee, or upon the distribution of all assets. In addition to the fees and charges otherwise described in this section, a \$25 withdrawal fee may apply to any withdrawal not requested through the participant account online at securityretirement.com.
 - b. A \$100 loan origination fee for processing a loan to an Employee from an Account, plus a \$50 annual loan maintenance fee.
 - c. The Trustee has previously offered two distribution options for payment of initial and trail commissions, including bonus commissions under special sales programs, to registered broker/dealers for authorized sales of this Account, which correspond to different asset based account fee structures for the accounts (designated Option 1 and 2). Effective January 2010, the Trustee will offer Options 3, 4, 5, 6, and 7, and will generally no longer accept sales of new accounts under Options 1 and 2 (though accounts under these options may continue to accept contributions and pay initial and trail commissions). Effective May 2017, the Custodian will also offer a new Option entitled "Fee Based Option." Effective October 2017, the Custodian will also no longer accept sales of new accounts under Options 5, 6 or 7(though accounts under these options may continue to accept contributions and pay initial and trail commissions). The Employee acknowledges that these commissions have been separately disclosed by the representative of the broker/dealer and agreed to by the Employee by submitting an Application for the Account. If not, or for further information, the Employee should contact his or her representative. If the agent of the original broker/dealer becomes associated with a new broker/dealer also authorized by SD to sell accounts similar to the Account, and the Employee consents in writing to a change of dealer request, the payment of commissions may be made at the option of SD to the new broker/dealer.
 - d. If the Employee had previously selected distribution Option 1 for his or her Account, the Trustee will charge and retain a sales charge (front load) of 5.25% on each contribution made to the Account to cover trustee, administration and distribution charges. For sales under Option 4, a sales charge of 5.50% will be made on each contribution. There is no front-end sales charge on contributions made under distribution Options 2, 3, 5, 6 and 7 or the Fee Based Option. Sales charges may be reduced or waived at the discretion of Trustee or under special sales programs.
 - e. If the Employee has selected distribution Option 3 or 6, the Trustee shall charge and retain a contingent deferred sale charge (surrender charge or end load) upon voluntary or involuntary withdrawals of assets from the Account, such charge to be equal to the lesser of a percentage the total contributions to the Account or a percentage of the value of the Account (as of the date of the withdrawal) according to the following schedule: 1% with respect to withdrawals made in the first year from the date the Account was established and 0% with respect to withdrawals made in the second year from the date the Account was established and thereafter. If the Employee has selected distribution Option 7, the Trustee shall charge and retain a contingent deferred sale charge upon voluntary or involuntary withdrawals of assets from the Account, such charge to be equal to the lesser of a percentage the total contributions to the Account or a percentage of the value of the Account (as of the date of the withdrawal) according to the following schedule: 5% with respect to withdrawals made in the first year from the date the Account was established, 4% in the second year, 3% in the third year, 2% in the fourth year, 1% in the fifth year and 0% with respect to withdrawals made in the sixth year from the date the Account was established and thereafter.

If the Employee has selected distribution Option 2, the Trustee shall charge and retain a contingent deferred sale charge upon voluntary or involuntary withdrawals of assets from the Account depending on the length of time each contribution has been held in the Account. Withdrawals in the first and second year since a contribution was made to the Account are subject to a 5% charge, withdrawals in the third year are subject to a 4% charge, withdrawals in the fourth year are subject to a 3% charge, withdrawals in the fifth year are subject to a 2% charge and withdrawals in the sixth year are subject to a 1% charge. The contingent deferred sales charge, if it applies, is equal to the lesser of (i) the specified percentage of the contributions to the Account or (ii) the specified percentage of the value of the Account (as of the date of the withdrawal). Loan payments made to the Account are considered to be contributions for the purpose of determining these charges. There is no contingent deferred sales charge for Options 1, 4 and 5, or the Fee Based Option.

- f. For the purpose of imposing any contingent deferred sales charge, no charge will be imposed on assets in the Account due to the reinvestment of dividends, capital gain distributions or other income, and such amounts in the Account will be deemed to be distributed from the Account first. Thereafter, contributions made to the Account first will be deemed to be distributed first. Contingent deferred sales charges will be waived if the distribution is attributable to: (i) the death or disability of the Employee, (ii) a required minimum distribution, (iii) a Qualified Domestic Relations Order or (iv) financial hardship. The Trustee may require such proof of financial hardship as it deems appropriate for the purpose of waiving this charge. Waivers will not be available through the mere passage of time for any reason, and will not be available under any circumstances, including death or disability, if the assets of the Account are being transferred to another 457 arrangement or individual retirement account or annuity. Finally, the Trustee may waive the charge, in whole or in part, at any time, in its discretion.
- g. If the Employee has selected distribution Option 1 or 4 for the Account, the Trustee shall charge and retain an additional unitized wrap fee of 0.35% of the assets in the Account each year, to cover trust and administrative expenses. For distribution Option 2, the Trustee shall charge and retain additional unitized wrap fee of 0.85% of the assets in the Account each year, to cover trust, administrative and distribution expenses. For distribution Option 3, the Trustee shall charge and retain an additional unitized wrap fee of 1.00% of the assets in the Account each year, to cover trust, administrative and distribution expenses. For distribution Option 5 or 7, the Trustee shall charge and retain an additional unitized wrap fee of 1.25% of the assets in the Account each year, to cover trust, administrative and distribution expenses. For distribution Option 6, the Trustee shall charge and retain an additional unitized wrap fee of 1.20% of the assets in the Account each year, to cover trust, administrative and distribution expenses. Unitized fees will be determined, and may be deducted currently or in advance, pro rata on a daily basis from the Account.
- h. For distribution Option 1 or 4, at the specific prior request of the Employee or the broker/dealer for any contribution or transfer into the Account (which the Trustee may, at its option, deem to be continuing for some or all future contributions or transfers, including contributions and transfers for other family members), any contribution which puts the higher of: (a) accumulated contributions and transfers to the Account, or (b) the Account value after the contribution or transfer, over a breakpoint may incur reduced sales charges. The following is the present schedule of breakpoints and reduced sales charges (which may be changed at the discretion of the Trustee):

<u>Breakpoints</u>	<u>Option 1</u>	<u>Option 4</u>
Less than \$50,000	5.25%	5.50%
\$50,000 to \$99,999	4.50%	4.75%
\$100,000 to \$249,999	3.75%	4.00%
\$250,000 to \$499,999	3.00%	3.25%
\$500,000 to \$999,999	2.00%	2.25%
\$1,000,000 or more	0.00%	0.00%*

*At this level, a 1% surrender charge will be imposed for one year.

- i. For the Fee Based Option, the Custodian shall charge an annual fee of 0.25%, which will be assessed monthly based upon the previous month-end balance. The Participant's representative may also add additional fees to the program such as investment advisory fees. The Participant acknowledges that these fees have been separately disclosed by the representative of the broker/dealer and agreed to by the Participant by submitting an Application for the Account. If not, or for further information, the Participant should contact his or her representative.
- j. An additional asset based fee of 0.45% applies to assets held in the Vanguard Funds. An additional asset based fee of 0.25% applies to assets held in the Needham fund. An additional asset based fee of 0.10% applies to assets held in the American Funds.

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FACTS	WHAT DOES SECURITY BENEFIT DO WITH YOUR PERSONAL INFORMATION?
Why?	Financial companies, including insurance companies and related insurance entities, choose how they share your personal information. Federal and state law gives consumers the right to limit some but not all sharing. These laws also require us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
What?	The types of personal information we collect and share depend on the product or service you have with us. This information can include: <ul style="list-style-type: none"> • Social Security number • account transactions • financial and health information • claims and payment information When you are <i>no longer</i> our customer, we continue to share your information as described in this notice.
How?	All insurance companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons insurance companies can share their customers' personal information, the reasons we may choose to share, and whether you can limit this sharing.

Reasons we can share your personal information	Does Security Benefit share?	Can you limit this sharing?
For our everyday business purposes — Such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes — to offer our products and services to you	Yes	No
For joint marketing with other financial companies	Yes	No
For our affiliates' everyday business purposes — information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes — information about your creditworthiness	No	Yes, see "To limit our sharing" below
For our affiliates to market to you	Yes	Yes, see "To limit our sharing" below
For nonaffiliates to market to you	Yes	Yes, see "To limit our sharing" below

To limit our sharing	To advise us of your preferences regarding our sharing your personal information with our affiliates and/or our non-affiliates you can: <ul style="list-style-type: none"> • Call 1.800.888.2461 — our representatives will assist you with your choice. Please have your account information available when you call. • Go to www.SecurityBenefit.com If you have already told us your choice of "No", we have it on file. Unless you are changing your choice back to "Yes", you will not need to tell us again. <p>Please note: If you are a new customer, we can begin sharing your personal information 30 days from the date we sent this notice. However, you can contact us at any time to limit this sharing.</p>
Questions?	<ul style="list-style-type: none"> • Call 1.800.888.2461 • Go to www.SecurityBenefit.com • Email us at: privacy.inquiry@securitybenefit.com

Who we are	
Who is providing this notice?	Security Benefit (Security Benefit Life Insurance Company, Security Distributors, LLC, First Security Benefit Life Insurance and Annuity Company of New York, and Security Financial Resources, Inc.)
What we do	
How does Security Benefit protect my personal information?	<ul style="list-style-type: none"> • We work to keep your information correct and safe. We design our business systems to properly gather, store, and process your personal information. We also work to make your personal information safe through the use of technology and business practices. • Only our agents, employees, and those we share your personal information with as disclosed in this notice are authorized to access your personal information. Our policies help make sure that our employees and agents protect your personal information. Our employees and agents who break these policies and practices are dealt with appropriately.
How does Security Benefit collect my personal information?	<p>We collect your personal information by some of the ways listed below:</p> <ul style="list-style-type: none"> • information provided by you (including names, addresses, and financial information) • information about your business with us or our agents (including claims and payment information) • information from or about your transactions with third parties (including insurance application histories, health history, and salary information) • information from consumer reporting agencies
Why can't I limit all sharing?	<p>Federal laws give you the right to limit:</p> <ul style="list-style-type: none"> • sharing for affiliates' everyday business purposes—information about your creditworthiness • affiliates from using your personal information to market to you • sharing for nonaffiliates to market to you <p>State laws and individual companies may give you additional rights to limit sharing. See <i>Other Important Information</i> below.</p>
What happens when I limit sharing for an account I hold jointly with someone else?	Your choices will apply to everyone on your account.
Definitions	
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies, including financial service providers such as insurance companies and insurance-related entities, and non-financial companies such as technology, real estate, sports and media, and consumer-experience companies. For example, our affiliates include, but are not limited to, First Security Benefit Life Insurance and Annuity Company of New York.
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies. For example, companies seeking to market their services to you.
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

Other important information

NOTICE OF INFORMATION PRACTICES

For residents of Arizona, California, Connecticut, Georgia, Illinois, Maine, Massachusetts, Minnesota, Montana, New Jersey, Nevada, North Carolina, Ohio, Oregon, and Virginia. These states require insurers and agents to describe their information practices in addition to providing a Privacy Notice. The two notices are very similar, but in general our Information Practices include the following: Security Benefit may obtain information about you and any other persons applying for insurance. Some of this information will come from you and some may come from other sources. That information and any other information collected by Security Benefit may in some circumstances be disclosed to third parties, such as agents, affiliates, service providers and others without your specific consent. In some cases, we may need your direct authorization before sharing that information. Residents have the right to access, to correct and, in some states, to delete (if incorrect) the information collected about them, except information that relates to a claim or to a civil or criminal proceeding. If you are refused coverage or if your application is postponed, you may also have the right to receive the specific reason in writing. To exercise your rights or if you wish to have a more detailed explanation of our information practices required by your state, please submit a written request by email to: privacy.inquiry@securitybenefit.com. **Additional information concerning our privacy policies can be found at <https://www.securitybenefit.com/legal/privacy> or call 1.800.888.2461.**

STATE-SPECIFIC DISCLOSURES

Customer personal information will be collected, used, and stored as required by applicable federal privacy laws. If the Customer's state laws provide more protection of the Customer's personal information than federal privacy laws, Security Benefit will protect the Customer's personal information as required by such state law.

YOUR AUTHORIZATION REQUIRED

Arizona, California, Maine, Massachusetts, Minnesota, Montana, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oregon, and Virginia. We will not share your personal information with non-affiliated third parties (or, in some circumstances, our affiliates) other than our agents or service providers unless you authorize us to share it or the law otherwise permits us to share it. You have the right to authorize or not authorize this sharing of personal information.

FOR VERMONT CUSTOMERS

We will not disclose your personal information, financial information, credit report, or health information to nonaffiliated third parties to market to you, other than as permitted by Vermont law, unless you authorize us to make those disclosures. Additional information concerning our privacy policies can be found at <https://www.securitybenefit.com/legal/privacy> or call 1.800.888.2461.

ADDITIONAL RIGHTS UNDER THE CALIFORNIA CONSUMER PRIVACY ACT (CCPA)

The California Consumer Privacy Act (CCPA) gives California residents certain privacy rights with respect to the limited non-public personal information we collect. These rights are:

- The right to notice of the personal information we collect
- The right to know the categories, sources and specific pieces of personal information we have collected about you in the past 12 months, including our purpose for collecting the information and the categories of third parties with whom we share that personal information, subject to certain exceptions.
- The right to delete some or all of the personal information we collect, subject to certain exceptions and
- The right to opt-out of our sale of your personal information, if we sell your personal information

CCPA rights are limited and do not apply to any of the NPI (described on Page 1) that we have collected from you and about you in connection with providing you an insurance or financial product or service.

The personal information we collect that is subject to the CCPA includes some of your internet and network activity (such as your browsing history, Internet Protocol address and interactions with our website) and inferences drawn about you from this information, such as your preferences, aptitudes and abilities. We may share this information with our service providers for a business purpose. We do not sell personal information about current or former customers to any third parties. We may allow third-party advertising cookies to be placed on your browser or mobile device when you visit our website. You may opt-out of third party cookies. To learn how to exercise your rights under the CCPA or if you wish to see a more detailed explanation of your rights, please visit our website at www.SecurityBenefit.com and click on "Privacy" on the home page or email us at: privacy.inquiry@securitybenefit.com.

NEVADA DO-NOT-CALL REGISTRY

If you are a Nevada resident, the following Telemarketing Notice applies to you. We may contact you by phone to offer additional financial products and services that may be of interest to you. You may elect to include your phone number on our internal Do-Not-Call list if you do not wish to receive telemarketing calls from us. If your telephone number is included on the Do-Not-Call list, we may still contact you for servicing purposes.

To include your phone number on our Do-Not-Call list, please follow the instructions in the "To Limit Our Sharing" box on page 1 of this document. Nevada residents may also call the Nevada Attorney General for further information about these rights by calling toll free **1.888.434.9989**.

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Your path *To and Through Retirement*[®] begins here.

Talk to your financial professional to learn more
or contact us at 800.888.2461.

Now Available: Track your retirement account progress with on-the-go access.
Download the My Security Benefit app today.



To access the app and content features, you must have a Security Benefit retirement plan account.
Google Play is a trademark of Google LLC.

Neither Security Benefit Corporation nor its affiliates are fiduciaries. This information is general in nature and intended for use with the general public. For additional information, including any specific advice or recommendations, please visit with your financial professional.