

Dallas County, TX Deferred Compensation Plan Participation Agreement and Service Request

Retireme	ent Solutions	Pai	ticipation Ag	greement and Service I	Request	
Participant Information	Name			Social Security Number		
☐ Check here	Address			Date of Birth		
if this is a name change (proof of name change must be attached) Check here if this is a new address	City, State, & Zip Code			Contact Phone Number		
	Employer Name			Alternate/Cell Phone Number		
	Department			Plan ID		
				0038128001		
	Email Address			Gender ☐ Male ☐ Female		
Type of Request	□ New □ Reinstatement □ Change Deferrals can start or increase no earlier than the first day of the month following the month this application is signed. Start Deferral on:					
Deferral Summary, Payroll Frequency and Catch-Up Provision	Annuity Amount:	\$ %	P	ayroll Frequency: Semi-N	onthly	
	Special: \$	%		Special Pay Period Ending Dates		
	Total Deferred	\$ %	Start:			
	Total Deferral:	Ť	Stop:	Includible Compensation: \$		
	☐ Enroll me in asset rebalancing. I agree to comply with and be bound by the terms and conditions of the service including any restrictions imposed by the investment options. I understand I can obtain more informa-		he	Catch-Up Provision Utilized		
	ment options. I understand I can obtain more information about the service, its terms and conditions by contacting the NRS Service Center.		a- On- On- Yes (50	☐ Yes (50 and over) ☐ Yes (standard catch-up) ☐ No		
	tacting the NRS Servi	ce Center.	Normal Re	Normal Retirement Age:		
Funding Options		INDE® Target Destination Series ion 2015 Fund (Institutional Service Class)	LARGE CAP C	% Dreyfus Appreciation Fund, Inc.		
	% Destinat	ion 2030 Fund (Institutional Service Class) ion 2035 Fund (Institutional Service Class) ion 2040 Fund (Institutional Service Class)		% Fidelity Equity-Income Fund % Fidelity OTC Portfolio		
Only for New Business or	% Destination 2045 Fund (Institutional Service Class) % Destination 2050 Fund (Institutional Service Class)			% Nationwide® Fund (Class D)% Nationwide Growth Fund		
Allocation	% Retirement Income Fund (Institutional Service Class)					
Changes					(R) - Guardian Fund	
(Must be	% Moderat	e Fund (Service Class) ely Conservative Fund (Service Class)				
in Whole %	INTERNATIONAL	rative Fund (Service Class)				
and Total	(Investo					
100%)	% Nationw	ide® International Index Fund (Class A) ide® International Value Fund				
	% Oppenh	onal Service Class) eimer Global (Class A)	BALANCED			
		apital Mgmt Small Company Fund onal Shares)				
	% Nationw	ide® Variable Insurance Trust: Nationwide® anager NVIT Small Company Trust (Class I)	<u>BONDS</u>			
	% Nationw	ide® Small Cap Index Fund (Class A) ide® U.S. Small Cap Value Fund				
	% Neuberg	onal Service Class) ger Berman Equity Trust (R) - Genesis Fund	FIXED/CASH			
	(Trust C	•				
	% JP Morg	n Century Vista Fund (Investor Class) an Mid Cap Value Fund (Class A) ide® Mid Cap Market Index Fund (Class A)		Trust (Institutional Shares) Morley Stable Value Retirement Fund		
	LARGE CAP	n Century Growth Fund (Investor Class)		% Nationwide® Fixed Account% Nationwide® Money Market Funds (Prime Shares)		
	 Merican Century Value Fund (Investor Class) American Funds The Investment Company of America TOTAL FOR BOTH COLUMNS MUST EQUAL 100%				MUST EQUAL 100%	
	(Class A) 1. If the total investment option allocation percentage equals less than 100%, the difference will be invested in the default option, Nationwide® Fixed Account. If the total investment option percentage is greater than 100%, your application will be rejected and your allocations will not be processed.					
-	percentage is greater than 100%, your application will be rejected and your allocations will not be processed. Check here if this is a change of beneficiary. (Beneficiaries listed above replace any prior designation) PLEASE NOTE: Percentage split must total 100%, and must					
Beneficiary Designation	be in whole percentages. If additional space for beneficiaries is required, please complete and attach additional sheets with all of the required information below, then mark this box:					
		Beneficiary Name	Social Security	ty Number	% Split	
	☐ Primary ☐ Contigent	Address		Date of Birth	Phone #	
		Beneficiary Name	Social Security	ty Number	% Split	
	☐ Primary	Belleticiary Name	Social Security	y Number	% Spire	
	☐ Contigent	Address		Date of Birth	Phone #	
Authorization	I authorize my Employer to reduce my salary by the above amount which will be credited to my employer's Plan. The reduction will continue until otherwise authorized in accordance with the Plan. The withholding of my deferred amount by my Employer and its payment to the designated investment option(s) will be reflected in the first pay period contingent on the processing of this application by the Plan Administrator in conjunction with the set-up time required by my payroll center. The reduction is to be allocated to the funding options in the percentages indicated above. Some mutual funds may impose a short-term trade fee. Please read the underlying prospectuses carefully. I have read and understand each of the statements on the front and back of this form, which have been drafted in compliance with the Internal Revenue Code. I accept these terms and understand that these statements do not cover all the details of the Plan or products. Participant's Signature					
				Retirement Specialist's Number		
	nememen specialisi s signature		kememen sp	remement specialists number		

DALLAS COUNTY, TEXAS EMPLOYEE DEFERRED COMPENSATION PLAN MEMORANDUM OF UNDERSTANDING

- 1. I understand that my participation in the Plan is governed by the terms and conditions of the Plan Document. The product informational brochure and fund prospectuses are available upon request at www.dallascountydc.com or by calling 1-877-NRSFORU.
- 2. The total annual deferral amount to all 457(b) plans is the lesser of \$17,500 or 100% of includible compensation. Under certain circumstances, additional amounts above the limit may be deferred into the Plan if (1) I will attain age 50 or older during the current calendar year, or (2) I am within three years of Normal Retirement Age and did not defer the maximum amount in prior years. The Plan Document provides additional details about deferral limits. Deferrals in excess of maximum amounts are not permitted and will be considered taxable income when refunded. It is my responsibility to ensure my deferrals do not exceed the annual limit.
- 3. I may withdraw funds from the Plan only upon severance from employment; at age 70 1/2 (if deferrals have stopped); upon an unforeseeable emergency approved by the Plan; or I may take an one time in-service withdrawal if my account value is \$5,000 or less (as adjusted) and I have not deferred into the Plan for two or more years. In some cases withdrawal for purchase or repayment of service credits in a governmental defined benefit plan may be permitted. Additionally, funds may be withdrawn upon my death. All withdrawals of funds must be in compliance with the Internal Revenue Code and applicable regulations, some of which are expressed in the Plan Document.
- 4. Generally, my distributions must begin no later than April 1st following the year I reach age 70 1/2. If I work beyond age 70 1/2, generally, my distributions must begin no later than April 1st following the year I have a severance from employment or retire. Please consult your plan document for further details. All distributions are taxable as ordinary income and subject to income tax in the year received. My distributions must be made in a manner that satisfies the minimum distribution requirements of IRC Sec. 401(a)(9), which currently requires benefits to be paid at least annually over a period not to extend beyond my life expectancy. Failure to meet minimum distribution requirements may result in the payment of 50% federal excise tax.
- 5. The funds in my account may be eligible for rollover to a traditional IRA or Roth IRA or to an eligible retirement plan. The "Special Tax Notice Regarding Plan Payments" provides detailed information about my options. Due to important tax consequences related to distributions, I have been advised to consult a tax advisor. I expressly assume the responsibility for tax consequences relating to any distributions, and I agree that neither the Plan nor the Plan Administrator shall be responsible for those tax consequences.
- 6. I understand that all amounts deferred into the plan and earnings on the amounts deferred are held in a trust, custodial account or annuity contract for the exclusive benefit of the participants and their beneficiaries until such time as the deferred amount is made available to the participant or beneficiary.
- 7. I understand that all products are optional.
- I understand that I may make changes among the investment options within my account as frequently as daily, but any change may be subject to the restrictions of the Plan and/or the investment provider. Changes may be made by calling 1-877-NRS-FORU (1-877-677-3678) or logaing on to www.nrsforu.com.
- 9. I understand I must defer a minimum of \$20 per month into the Plan to satisfy minimum plan requirements.
- 10. I understand that no changes will be effective until they are processed in the Deferred Compensation Service Center.
- 11. Participants enrolling or electing to increase 457 deferrals must provide includible compensation data acceptable to NRS and notify NRS of any subsequent decrease in includible compensation.
- 12. Availability of life insurance options and other investment options may vary by plan. I understand that if an allocation is made to a closed or unavailable investment option, the allocation will be made to the default option, the Nationwide® Money Market Fund. I understand that if the total investment option allocation percentage equals less than 100%, the difference will be invested in the default option, the Nationwide® Money Market Fund. I understand that if the total investment option allocation is greater than 100%, my application will be rejected and my allocations will not be processed.
- 13. I understand that when enrolling or electing to increase 457 deferrals, I must provide includible compensation data to NRS and notify NRS of any subsequent decrease in includible compensation.
- 14. Nationwide does not charge an explicit fee on participant accounts.

NATIONWIDE LIFE FIXED ACCOUNT

- 1. A guaranteed interest rate is declared quarterly and credited daily, which is not lower than the minimum annual rate.
- 2. Exchanges or transfers may be made based upon one of the following options as chosen by your entity (employer).

 Exchanges and/or transfers from the Fixed Account may be made up of 100% of my account value. The total of all participant exchanges and/or transfers shall not exceed 12% of the total amount held in the Deposit Fund for the entity (employer) under the Fixed Account as of December 31 of the previous calendar year. Once this aggregate limit is met, no further exchanges or transfer into my Fixed Account for the 5-year term without cancelling the Provision.

Exchange: An exchange is the movement of money between the Nationwide Life Fixed Account and Variable Annuity options and/or between the funds in the Variable annuity option.

<u>Transfer</u>: A transfer is the movement of money between product providers within the same plan.

Nationwide may earn a spread on assets held in the Nationwide Fixed Account, which is reflected in the crediting rate.

NATIONWIDE LIFE VARIABLE ANNUITY CONTRACT

- 1. An Variable Account Charge is deducted daily from the variable account and is equal to 0.00%.
- 2. I understand that retirement income payments and termination values (if any), provided by the contract are variable when based on the investment experience of a separate account and are not guaranteed as to the dollar amount.

MORLEY STABLE VALUE RETIREMENT FUND

- 1. The Morley Stable Value Retirement Fund is not a mutual fund.
- 2. I understand that exchanges to competing investment options must be held in a non-competing investment option for a minimum of 90 days before I can subsequently transfer to a competing option.

ENDORSEMENT DISCLOSURE

Nationwide Retirement Solutions, Inc. and Nationwide Life Insurance Company have endorsement relationships with the National Association of Counties and the International Association of Firefighters-Financial Corporation. More information about the endorsement relationships may be found online at www.nrsforu.com.

MUTUAL FUND PAYMENT DISCLOSURE

Nationwide Retirement Solutions, Inc. and its affiliates (Nationwide) offer a variety of investment options to public sector retirement plans through variable annuity contracts, trust or custodial accounts. Nationwide may receive payments from mutual funds or their affiliates in connection with those investment options. For more detail about the payments Nationwide receives, please visit www.nrsforu.com.