



City of Aurora, Colorado 457(b) Deferred Compensation Plan EZ Enrollment Form

Personal Information

Plan Name: City of Aurora, Colorado Plan ID: 0038773001
 Name: _____
 Date of Birth: _____ SSN: _____ Gender: Male Female
 Street Address: _____
 City: _____ State: _____ ZIP: _____
 Home Phone: _____ Work Phone: _____
 Email: _____

Paperless Delivery Consent

By providing your email address you are consenting to electronic (paperless) delivery of documents related to your retirement plan, e.g. - statements, confirmations, terms, agreements, etc. If you would like to receive the above referenced documents in paper form via U.S. Mail you can do so by contacting Customer Service at 1-877-677-3678 and requesting paper. You may opt out of electronic delivery of your plan related documents at any time by logging in to your account at aurora457.org as well. There is no additional cost to receive documents in paper format via U.S. Mail.

Contribution Summary

457(b) Pre-Tax \$ _____ OR _____% Start Contribution On (Pay Period): _____
 457(b) Roth After-Tax² \$ _____ OR _____% Payroll Frequency¹: Bi-Weekly
Total \$ _____ **OR** _____% Monthly

I understand that contributions to my account will be invested in an American Funds Target Date Fund closest to the year in which I turn 65 years old

¹Your contribution election will start as soon as administratively practicable following the execution of this EZ Enrollment Form. The City's processing schedule will determine the effective date of the contribution. Please remember to check your paystub to confirm your selected contributions are accurately reflected and being processed. ²Roth contributions are made on an after-tax basis.

Beneficiary Designation

IMPORTANT NOTES: 1) Allocations must total 100% for each category of beneficiary; and **2)** If you designate a single primary or contingent beneficiary and do not list a percentage, it will be designated as 100%.

I have additional beneficiaries. If you want to designate more than 1 of each type of beneficiary, you may attach a page with the additional beneficiary information. Allocations must still total 100% for each category.

Primary Beneficiary Full Name: _____ Allocation: _____%
 Relationship: _____ SSN: _____ Date of Birth: _____
 Address: _____ Phone: _____

Contingent Beneficiary Full Name: _____ Allocation: _____%
 Relationship: _____ SSN: _____ Date of Birth: _____
 Address: _____ Phone: _____

Authorization

I authorize my Employer to reduce my salary by the above amount which will be credited to my account with the City of Aurora Colorado Deferred Compensation Plan. I understand that I may cancel my enrollment if I contact the Service Center at 877-677-3678 within 10 business days of the signature date of this form. The salary 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 will be reflected as early as administratively practicable following the execution of this Participation Agreement. Some mutual funds may impose a short-term trade fee. Please read the underlying prospectuses carefully, which are available upon request or via aurora457.org. I have read and understand each of the statements on the Memorandum of Understanding accompanying this form, which are intended to comply 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.

Signature: _____ **Date:** _____

Return form to:

Mail: Nationwide Retirement Solutions, PO BOX 182797, Columbus, OH 43218-2797 **Email:** rpublic@nationwide.com **Fax:** 877-677-4329

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City of Aurora, Colorado

457(b) Deferred Compensation Plan

Memorandum of Understanding

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The purpose of this memo is to ensure that you fully understand the major terms, restrictions and costs of the City of Aurora, CO Deferred Compensation Plan. However, it does not cover all the details of the Plan. Please refer to the Plan Document for specific details.

I understand and acknowledge the following:

1. I understand that my participation in the Plan is governed by the terms and conditions of the Plan Document. The product information brochure and fund prospectuses are available upon request at aurora457.org or by calling 877-677-3678.
2. The total annual contribution amount to all 457(b) plans is the lesser of the maximum annual 457(b) contribution limit or 100% of the participant's includible compensation. This amount may be adjusted annually. More information on the maximum contribution limits can be found at irs.gov. Under certain circumstances, additional amounts above the limit may be contributed to the Plan if (1) the participant attains age 50 or older during the current calendar year, or (2) the participant is within three years of the Plan's Normal Retirement Age and did not contribute the maximum amount to the 457(b) Plan in prior years (3) the participant is aged 60 through 63. The Plan Document provides additional details about contribution limits. Contributions in excess of maximum amounts are not permitted and will be reported as taxable income when refunded. It is the participant's responsibility to ensure contributions to all 457(b) plans in which the participant participates, regardless of employer, do not exceed the annual limit.
3. Effective January 1, 2026, any age based catch up contributions made by a Participant whose taxable wages for the preceding calendar year, as reported in Box 3 of Form W 2 by the Employer, exceed the applicable limit must be designated as Roth contributions. This wage limit is an indexed threshold and is subject to annual inflation adjustments as published by the IRS. Updated thresholds and related guidance can be found in the IRS's published regulations, available at the IRS Newsroom.
4. As opposed to the withdrawal of earnings on pre-tax contributions, the earnings on designated Roth contributions are generally not subject to future taxes as long as the distribution from the Roth account satisfies the requirements to be a "qualified distribution." Qualified distributions cannot be made within five years of the first designated Roth contribution to this plan, and must be made on or after the attainment of age 59½, on or after the participant's death, or the participant's disability. If the participant previously established another designated Roth account in another plan and is able to roll the funds from this plan to the other plan, the five-year period would begin to run from the date of the first contribution to the first designated Roth account. A non-qualified Roth distribution may result in a 10% additional tax for early withdrawal of that portion of the distribution that is includible in gross income, if made from rollovers to this Plan from a qualified plan like a 401(k) plan, unless a regulatory exception applies. Please note that once made, contributions and/or rollovers to a designated Roth account may not be reversed. In the event you wish to make changes, only future contributions and/or rollovers can be redirected.
5. I may withdraw funds from the Plan only upon severance from employment; at age 59½ (if deferrals have stopped); upon an unforeseeable emergency approved by the Plan; or I may take a one time in-service withdrawal if my account value is \$7,000 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.
6. Generally, you must begin taking distributions from the Plan no later than April 1 following the year you reach age 73. If you continue to work for this employer beyond age 73, (75 for an individual who attains age 74 after December 31, 2032), generally, your distributions must begin no later than April 1 following the year you separate from service or retire. Please consult the Plan Document for additional information. All distributions are taxable as ordinary income and subject to income tax in the year received. You must take distributions in a manner that satisfies the minimum distribution requirements of Section 401(a)(9) of the Code, which currently requires benefits to be paid at least annually over a period not to extend beyond your life expectancy. Failure to meet minimum distribution requirements may result in the payment of a 25% federal excise tax.
7. The funds in my account may be eligible for rollover to a traditional 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 understand that I should consult a tax advisor. I expressly assume the responsibility for tax consequences relating to any distribution, and I agree that neither the Plan nor the Plan Administrator shall be responsible for those tax consequences.
8. I understand that all products are optional.
9. 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. In addition, some mutual funds may impose a short term trade fee. Please read the underlying prospectuses carefully. Changes may be made by calling 877-677-3678 or logging on to aurora457.org.
10. Exchanges from and into available variable investment options may be subject to restrictions or limitations established by the investment provider, the Plan or its designated agent.
11. I understand that my enrollment or contribution change will start as soon as administratively practicable following the execution of this Participation Agreement. The City's processing schedule will determine the effective date of the contribution.

Asset Allocation Options

The asset allocation funds can be selected based on your personal objectives and risk tolerance. They are designed to provide asset allocation across several types of investments and asset classes. Therefore, in addition to the expenses of the asset allocation funds, you are indirectly paying a proportionate share of the applicable fees and expenses of the underlying funds. The use of asset allocation does not guarantee returns or insulate you from potential losses.

Aurora Fixed Account

1. A guaranteed interest rate is declared quarterly and credited daily, which is not lower than the minimum annual rate.
2. Exchanges and/or transfers may be made up to 100% of the participant's account value.
3. Nationwide may earn a spread on assets held in the Aurora Fixed Account, which is reflected in the crediting rate. The spread represents the difference between what Nationwide earns on investments and what it credits to the Fixed Account as interest.

Mutual Fund Options

The value of amounts allocated to mutual funds options will vary depending upon the value of the chosen mutual funds and could result in either a gain or loss. The fund prospectuses were made available to me and can be obtained upon request.

Mutual Fund Service Fee Payments Disclosure

Nationwide offers 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 aurora457.org.

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 aurora457.org.

Consent to Paperless Delivery and Access

By providing your email address, you are agreeing and consenting to receive and view plan benefit statements, correspondence and confirmations, and other communications electronically. These materials will be provided through an e-mail message notifying you that electronic documents are available online for you to view and print. This replaces all written communication associated with your Retirement Plan(s) serviced by Nationwide and you will no longer receive these documents via US Mail. By providing your consent to paperless delivery, you are acknowledging and confirming that you are consenting to receive Plan Communications electronically, as they are now available or as they may be required or become available in the future and that you have access to view and print your documents electronically from the website and to save them from your computer or other electronic device. If you would like to receive the above referenced documents in paper form via US Mail you can do so by contacting Customer Service at 877-677-3678 and request paper. You may opt out of paperless delivery of your plan related documents at any time. There is no additional cost to receive documents in paper format via US Mail.

Changing Your Email Address and Your Paperless Delivery Preferences

You are able to update your email address or change your Paperless Delivery Preferences anytime either on the web site or via Customer Service.

Your Right to Revoke Consent

You have the right to revoke your consent to receive documents electronically. Your consent shall be effective until you revoke it by changing your delivery preferences via Customer Service or on the website by selecting US Mail delivery.