

City of Melbourne, FL Deferred Compensation Plan Participation Agreement & Service Request

Personal Inform	mation					
Plan Name: City of Melbourne, FL				Plan ID: 0036656001		
Name:				SSN:		
Date of Birth:				Date of Hire:		
Address:				City, State, & ZIP:		
Home Phone Nun	nber:			Work Phone Number:		
Email Address:				Gender: ☐ Male ☐ Female		
How would you lil	ke to be contac	ted if additiona	l information	is required? 🗌 Telepho	ne 🗌 Email	
	ns, contribution				ede any prior information provided y Employee Contribution) and/o	
Paperless Deli	very Consen	t				
agreements and ot statements, accour	her information at documents an record by check	provided in con d other docume ing the box belo	nection with yents sent in colow, these doc	our retirement plan elect nnection with your retirer uments will be made avai	e statements, confirmations, terms cronically. Unless you choose to have nent plan delivered via US Mail to the lable to you electronically.	
Contribution S	Summary & P	ayroll Frequ	ency			
	Dollar Amount or Percent		Payroll Fre	Payroll Frequency: Bi-Weekly		
457(b) Pre-Tax	\$	%	Start Contribution On (Pay Period):			
457(b) Roth*	\$	%	☐ Enroll me in asset rebalancing I agree to comply with and be bound by the terms and conditions of the service including any restrictions			
Total	\$	%	imposed by the investment options. I understand I can obtain mor information about the service, its terms and conditions by contacting			
*Roth contributions	are made on an	after-tax basis.		wide Service Center.	erms and conditions by contacting	
Beneficiary De	esignation					
PLEASE NOTE: Pe If additional space Primary Beneficial	rcentage split ne for beneficiari	nust total 100% es is required, a tal 100%):	for each cate	listed below replace any egory of beneficiary. onal sheets and mark thi	s box:	
Name:	Name:		Relationship:	SSN:	Phone #:	
Address:				Date of Birth:	% Split:	
Name:			Relationship:	SSN:	Phone #:	
Address:				Date of Birth:	% Split:	
Contingent Benefi	i ciary(ies) (mus	t total 100%):				
Name: R			Relationship:	SSN:	Phone #:	
Address:				SSN:	% Split:	
Name:			Relationship:	SSN:	Phone #:	
Address:				Date of Birth:	% Split:	

Funding Options			
Asset Allocation - Nationwide® Target Destination Series	Mid Cap		
% Nationwide® Destination 2015 Fund	% JPMorgan Mid Cap Value Fund (Class I)		
(Institutional Service Class)	% Wells Fargo Advantage Funds - Discovery Fund		
% Nationwide® Destination 2020 Fund (Institutional Service Class)	(Administrator Class)		
% Nationwide® Destination 2025 Fund	% Nationwide Mid Cap Market Index Fund		
(Institutional Service Class)	<u>Large Cap</u>		
% Nationwide® Destination 2030 Fund (Institutional Service Class)	% American Funds - The Growth Fund of America		
% Nationwide® Destination 2035 Fund	(Class A)		
(Institutional Service Class)	% Fidelity Contrafund		
% Nationwide® Destination 2040 Fund			
(Institutional Service Class)	% Nationwide®S&P 500 Index Fund		
% Nationwide® Destination 2045 Fund	(Institutional Service Class)		
(Institutional Service Class)	<u>Balanced</u>		
% Nationwide® Destination 2050 Fund (Institutional Service Class)	% American Funds - The Income Fund of America		
% Nationwide® Destination 2055 Fund	<u>Bonds</u>		
(Institutional Service Class)	% Ivy High Income Fund (Class I)		
% Nationwide® Destination 2060 Fund			
(Institutional Service Class)	% Western Asset Core Bond Fund (Class I)		
International	Fixed/Cash		
% Nationwide® International Index Fund (Class A)	% Nationwide® Money Market Fund (Prime Shares)		
% Oppenheimer Global Fund (Class A)	% Nationwide® Fixed Account		
Small Cap % Brown Capital Mgmt. Small Company Fund			
(Investor Class)	I agree the allocation will be made to the not in good order option, the Nationwide* Destination 2035 Fund (Institutional Service Class) if my total percentage is less than 100%. If the total investment option percentage is greater than 100%, My application will be returned to me and my allocations will not be processed.		
Nationwide® Small Cap Index Fund (Class A)			
% Nationwide U.S. Small Cap Value Fund (R6 Class)			
Authorization			
Please send me a copy of the Informational Brochure/Pro			
☐ Please contact me regarding transferring my other pre-ta. ☐ Please send me forms regarding the Catch-up Provisions.	x retirement plans.		
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 accorda			
my Employer and its payment to the designated investment on the processing of this application by the Plan Administrat			
center. The reduction is to be allocated to the funding options impose a short-term trade fee. Please read the underlying pr			
I have read and understand each of the statements on th			
compliance with the Internal Revenue Code. I accept these the details of the Plan or products.			
Participant Signature:	Date:		
Retirement Specialist Name (Print):	Agent #:		

Form Return

By mail: Nationwide Retirement Solutions PO Box 182797 Columbus, OH 43218-2797

By fax: 877-677-4329



City of Melbourne, FL Deferred Compensation Plan Memorandum of Understanding

The purpose of the Memorandum of Understanding is to make you aware of some of the highlights, restrictions and costs of your Plan. It is not intended to cover all the details of the Plan and should not be relied upon in making decisions about Plan benefits. You should refer to the Plan Document for specific details about the Plan's provisions and the prospectuses and other documentation for the Plan's underlying investment options.

- 1. 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. 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.
- 2. Enrollment or contribution changes cannot be effective prior to the first day of the month following receipt of the participant's request. The employer's processing schedule will determine the actual effective date of the contribution. It is the Plan Sponsor's/Pay Center's responsibility to ensure deferrals do not commence too early.
- 3. If the Plan permits designated Roth contributions, these contributions are made on an after-tax basis, which means they will not be subject to income taxes when distributed at a later time. As opposed to the withdrawal of earnings on pre-tax contributions, though, 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." In order to be a qualified distribution, the distribution must be made five or more years after January 1 of the first year the participant made Roth contributions to the Plan and must be made on or after the attainment of age 59½, 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 January 1 of the year of the first contribution to a designated Roth account. A non-qualified Roth distribution may result in an additional 10% early withdrawal tax on the portion of the distribution includible in gross income if made from rollovers to this Plan from a qualified plan or a 403(b) plan, and no statutory exceptions apply. Please note that once made, contributions and/or rollovers to a Roth account may not be reversed. In the event the participant desires to make contribution changes, only future contributions and/or rollovers can be redirected (contributed as pre-tax funds).
- 4. The Plan Document governs when distributions may be made from the Plan. In general, distributions may be made from a 457(b) plan only upon separation from service, upon attainment of age 70½, or upon the death of the participant. Section 457(b) plans can also permit withdrawals from the Plan (even if the participant is still employed) in cases of an unforeseeable emergency approved by the Plan; when taking a loan, or for a one-time in-service withdrawal if the participant's account value is \$5,000 or less and the participant has not contributed to the Plan for two or more years. All withdrawals of funds must be in compliance with the Internal Revenue Code (the "Code") and any applicable regulations as well as the Plan Document, which the participant should consult to confirm which distribution opportunities are available.
- 5. Contributions, in the form of salary reductions, will be made until I notify NRS or my Plan Sponsor otherwise. Once notification is received, salary reductions will be changed as soon as administratively feasible. NRS will invest contributions received from the Plan Sponsor as soon as administratively feasible.
- 6. Participation in any of the employer's plans is governed by the terms and conditions of the Plan Document which should be consulted for plan details. Fund prospectuses are available upon request at nrsforu.com or by calling 877-NRS-FORU (877-677-3678).
- 7. Generally, distributions from the Plans must begin no later than the 1st of April following the later of the year the participant reaches age 70½ or separates from service. The Plan Document should be consulted for further details. Generally, all pre-tax distributions are taxable as ordinary income and are subject to income tax in the year received. Plan distributions must be made in a manner that satisfies the minimum distribution requirements of Code section 401(a)(9), which currently requires benefits to be paid at least annually over a period not to extend beyond the participant's life expectancy. Failure to meet minimum distribution requirements may result in the participant being subject to a 50% federal excise tax.
- 8. Any beneficiary designation I made on this form will supersede any prior beneficiary designation and shall become effective on the date accepted by the Plan, provided that this designation is accepted by the Plan prior to my death. Further, any benefits payable at my death shall be paid in substantially equal shares to my beneficiaries unless I specify otherwise. My death benefits will be paid first to my Primary Beneficiaries. If any of my Primary Beneficiaries predecease me, then my death benefits will be paid to the remaining Primary Beneficiaries. Contingent Beneficiaries will only receive benefits if no Primary Beneficiary survives me. If no beneficiary designation is on file, benefits will be paid as set forth in the Plan Document. If I participate in both a 457(b) plan and a 401(a) plan administered by NRS, I understand my beneficiary designations made on this form will apply to both plans unless I have indicated otherwise.
- 9. Disclaimer for Community and Marital Property States: If the participant resides in a community or marital property state, the participant's spouse may have a property interest in the participant's Plan account and the right to dispose of the interest by will. Therefore, NRS disclaims any warranty as to the effectiveness of the participant's beneficiary designation or as to the ownership of the account after the death of the participant's spouse. For additional information, please consult your legal advisor to learn more about how your beneficiary designation may be affected by community or marital property state law.
- 10. Participants must notify NRS of any address changes, beneficiary changes, contribution changes, allocation changes or errors on the participant's account statement.
- 11. Participants will receive a statement of their account quarterly.
- 12. All Plan transactions initiated using the telephone will be recorded for the participant's protection.

City of Melbourne, FL Memorandum of Understanding

Investment Options

- 1. Participant contributions will be invested pursuant to the participant's selection of funding options specified on the Participation Agreement.
- 2. NRS will permit participants and beneficiaries to exchange amounts among the Variable and Fixed investment options as frequently as permitted by the Plan, subject to the limits and rules set by each Fund and the Annuity Contracts. Changes may be made by calling 877-NRSFORU or by logging on to nrsforu.com. Investment options may be periodically changed or restricted, and may vary by the source of the money invested.
- 3. Transfers between investment options are provided for under the Plan subject to limitations or restrictions (including redemption fees), if any, as imposed by the investment providers. Some mutual funds may also impose a short term trading fee. I understand that any information regarding limitations or restrictions as they apply to the Plan may be obtained from the Plan Administrator. Participants should read the underlying mutual fund prospectuses carefully.
- 4. The Net Asset Value of a mutual fund changes on a daily basis and there is no guarantee of principal or investment return.
- 5. If the participant selects an investment option that is closed or unavailable, the money will be invested in the Nationwide Money Market Fund, which is the default investment option. If participants elect a total investment allocation percentage that is less than 100%, the difference will be invested in the Nationwide Money Market Fund. If the participant elects a total investment allocation percentage greater than 100%, the deferral election will be rejected and the participant's investment option selections will not be processed.
- 6. The Plan may impose a Plan administration fee or investment management fees. Fees can vary depending on the mutual funds in which the participant invests. For more information regarding fees, please call 877-NRS-FORU (877-677-3678).

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. Nationwide may earn a spread on assets held in the Nationwide 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.
- 3. The Fixed Account has a 90-day equity wash with competing investment options. An equity wash is a contractual provision that requires any transfer from the Nationwide Fixed Account to a competing option (for example, the Nationwide Money Market Fund) to first be directed to any other investment option not designated as a competing option for 90 days.

Nationwide Life Variable Annuity Contract

- 1. I understand that a Variable Account Charge is deducted daily from the Variable Account of 0.30%.
- 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.

Mutual Fund Payments Disclosure

Nationwide Retirement Solutions, Inc. and its affiliates (Nationwide) offer a variety of investment options to public sector retirement plans through variable annuity contracts and 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 nrsforu.com.

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 nrsforu.com.

Consent to Electronic Paperless Delivery and Access

By providing your email address here, 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 email 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 electronic 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 requesting paper. You may opt out of electronic 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 Preference

You are able to update your email address or change your Paperless Preferences anytime either on the website 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.