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EQUITABLE

Equitable Retirement Vision℠

Plan Setup
Paperwork - Questionnaire

Express Mail:
Equitable Retirement Plan Services
430 W 7th Street Suite 219886
Kansas City, MO 64105-1407
Regular Mail:
Equitable Retirement Plan Services
PO Box 219886
Kansas City, MO 64121-9886

PLEASE PRINT

Please provide the information requested below to enable plan setup by Equitable Retirement Services.

1. Employer/Plan Information

Plan Name: City of Council Bluffs 457(b)

Plan Address: 209 Pearl Street EIN: 42-6004428

City: Council Bluffs St: IA Zip: 51503

Employer Name: City of Council Bluffs

Plan Administrator: Brenda Norton

Email Address: bnorton@councilbluffs-ia.gov

Phone Number: 712-890-5272 Fax Number: _____

Alternate Contact Name: _____

Alternate Contact Email Address: _____

Alternate Contact Phone Number: _____

Alternate Contact Role: ☐ Day to Day Contact ☐ Payroll Contact ☐ Other: _____

Is the Day to Day Contact an authorized individual that can approve Loans and Withdrawals? ☐ Yes ☐ No

Plan Type (select one): ☐ 403(b) ☑ 457(b) ☐ 401(k) ☐ 401(a) – If 401(a), Select _____ PS, _____ MP _____

Is this a governmental FICA replacement plan? ☐ Yes ☑ No

Is the plan subject to ERISA? ☐ Yes ☑ No

Plan Effective Date (per the plan document): _____

Plan Year End (mm/dd): 12/31

Employer Type (select one):

For Profit	Governmental	Tax Exempt	Church
☐ Corporation	☐ Public School K-12	☐ 501(c)(3)	☐ Church or Church Controlled Organization
☐ S Corporation	☐ Public School Higher Ed	☐ 501(c)(4), (5), and (6)	
☐ LLC	☐ Charter School	☐ Healthcare	
☐ Partnership	☑ Other Governmental Entity	☐ Other	
☐ Sole Proprietor			
☐ Healthcare			

2. Other Employers and/or Location Information

Entity/Location Name: _____

Address: _____ City: _____ St: _____ Zip: _____

Contact Name: _____ Email Address: _____

Phone Number: _____ Fax Number: _____

Is this location a related employer? If yes, provide: tax ID _____ payroll frequency _____

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3. Service Level Selection

Please select the desired level of recordkeeping and administrative services to be provided to the Plan:

☑ **Basic Service** (please complete the "Plan Sponsor Authorization for Third Party Administrator" Form)

☐ **Basic Plus Service** (please complete the "Basic Plus Addendum Questionnaire")

☐ **Full Service**

4. Plan Document

Do you have a Plan Document? ☑ Yes ☐ No

If you answered No, are you either a church or self-employed minister? ☐ Yes ☐ No

If you adopted an Equitable pre-approved or specimen plan document indicate which document was used below:

For 401(k) plan

☐ Equitable pre-approved 401(k) plan document

☐ Equitable pre-approved Money Purchase Pension plan doucment

☐ Equitable pre-approved Profit Sharing plan document

☐ N/A - Other pre-approved or individually designed plan document used

For 403(b) and/or 457(b) only

☐ Equitable pre-approved 403(b) plan document

☑ Equitable provided specimen 457(b) governmental plan document

☐ N/A – Other pre-approved or individually designed 403(b) plan document used or non-Equitable specimen 457(b) document used

For 401(a) plan

☐ Equitable pre-approved Money Purchase Pension plan document

☐ Equitable pre-approved Profit Sharing plan document

☐ Equitable pre-approved Grandfathered 401(k) plan document

☐ N/A – Other pre-approved or individually designed plan document used

5. Payroll Information

Contribution Frequency: ☐ Weekly ☑ Bi-Weekly ☐ Bi-Monthly ☐ Monthly

Anticipated First Payroll Date: _____ Payroll Provider: in house

Payroll Provider Contact Name: Michell Houseton Email Address: mhouseton@councilbluffs-ia.gov

Phone Number: 712-890-5341 Fax Number: _____

Payroll Integration - ☐ Yes ☑ No - subject to availability of current payroll providers and certain plans/markets may not be available.

6. Banking/Automatic Clearing House (ACH) Information

Should you choose to process contributions under your Plan by automated payments from your bank account, attach a pre-printed check or a letter from the bank with the same information provided on the check. This information will be maintained within PlanConnect's recordkeeping system and will be transmitted to the Custodian upon the remittance of a contribution file via www.equitable.com. The Custodian (Benefit Trust Company) will initiate the transfer of funds from the bank account that is identified within the documentation attached when a payroll file is submitted to PlanConnect.

Please indicate the bank account type: ☑ Checking account ☐ Savings account

Alternative Method:

Manual Check: This process allows the Plan to send a check to Benefit Trust Company at the address shown below to fund the payroll files that will be submitted to PlanConnect. This method incurs an additional fee of $100.00 per payroll file.

Regular Mail:
Equitable Retirement Vision
PO Box 219886
Kansas City, MO 64121-9886

Overnight Mail:
Equitable Retirement Vision
430 W 7th Street, Suite 219886
Kansas City, MO 64105-1407

Docusign Envelope ID: BD56F3C2-17AC-4CEF-B783-8864132592B1

7. Approved Vendors

Is Equitable Retirement Plan Services℠ the only provider available to the Plan Participants? ☑ Yes ☐ No (if No, complete the rest of this section)
The Vendor(s) named below is/are the approved Provider(s) under the Employer's Plan for ongoing Contributions and/or the acceptance of Transfers & Exchanges until notified otherwise.

Important Note: The Provider contact information entered below must be for the vendor's service/processing office, not that of the Registered Representatives who are representing the vendor.

Provider Name/ Address	Name/Email (Required)/Phone/Fax	Payroll Deduction Contributions	Transfers	Exchanges
	Name: _____ Email: _____ Ph: _____ Fax: _____	☐	☐	☐
	Name: _____ Email: _____ Ph: _____ Fax: _____	☐	☐	☐
	Name: _____ Email: _____ Ph: _____ Fax: _____	☐	☐	☐
	Name: _____ Email: _____ Ph: _____ Fax: _____	☐	☐	☐

8. Default Investment Funds

1. **Plan Default Fund:** The following fund will be used for the investment of any Plan level account, for example Forfeiture or Plan Expense Account. (Choose 1 or 2 below)

   ☐ 1. Money Market Fund:
   Fund Name: _____
   Ticker: _____
   CUSIP: _____

   ☑ 2. The Equitable Fixed Account

2. **Participant Default Fund:** The following fund(s) will be used for the investment of any participant account that PlanConnect has not received investment direction:

Option A - Single Participant Default Fund or Target Date Suite of Funds:
Target Date Funds

If a target date suite of funds are selected, the entire suite of funds will be added to the Plan's Investment Options as well as any additional portfolio/funds that the target date fund series include in the future unless otherwise instructed by the Employer Plan Sponsor.

Option B: Custom Model/Option
• List Investment Option(s) and percentages (must equal 100%).

_____ _____% _____ _____%
_____ _____% _____ _____%
_____ _____% _____ _____%

☐ **Option C: • Stadion's QDIA Managed Account as selected in Section 12 below.**

***For ERISA-Covered Plans*-Qualified Default Investment Alternative ("QDIA")**
The Participant Default Fund Option Selected above is designated as a QDIA* Yes ☐ No ☑

**Use of a Participant Default Investment option that meets U.S. Department of Labor ("DOL") requirements for a "Qualified Default Investment Alternative" can limit Plan Sponsor Fiduciary liability for default investments made in the absence of individual participant investment instructions. DOL regulations provide examples of permissible QDIAs such as Target Date Funds, "balanced funds" appropriate for the plan as a whole and managed accounts. Use of a QDIA requires initial and annual participant notification. Please refer to DOL regulation §2550.404c-5 for more information.*

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9. Converting Assets

Are there existing plan assets that will be converting to Equitable Retirement Vision? ☐ Yes ☑ No

If yes, please identify where the assets are currently held: _____

Prior Recordkeeper contact number and email: _____

Are there restricted assets that are within the plan that are unable to transfer at time of conversion ("outside assets")? ☐ Yes ☐ No

If yes, do you want PlanConnect to obtain the values of assets held outside Equitable Retirement Vision from the investment provider holding such outside assets and make it available to your participants? ☐ Yes ☐ No

Please note that the value of outside assets is for informational purposes only, and the accuracy of such information cannot be guaranteed. The outside asset values we disclose may be incorrect or not current. Further, if your outside asset provider does not agree to share data, PlanConnect will not be able to provide you with this service.

☐ Participant Default Conversion

All transferring plan assets will be invested in a money market investment option until all reconciliations are completed. Once the conversion is complete, the Plan assets will be invested according to the Participant investment elections in effect on the day the assets are allocated to the Participant accounts. If the Participant has not made an affirmative investment election, the funds will be invested in the Participant Default Fund selected in Default Investment Funds section.

☐ Like Fund Conversion (Mapping)

All transferring assets will be invested in the Plan's new Investment Options with objectives that are reasonably similar to the corresponding funds in your existing investment line-up. Once the conversion is complete, Plan assets will remain invested according to the Like Fund Conversion Mapping strategy provided by the Plan Fiduciary. Participants may change their investment elections via the Internet once the conversion is complete. Please indicate below how post-conversion future ongoing participant salary reduction contributions should be invested in the absence of an affirmative participant investment election (please select one):

☐ Future participant salary reduction contributions will be invested according to the Like Fund Conversion Mapping strategy

☐ Future participant salary reduction contributions will be invested in the Participant Default Investment

10. Investment Fiduciary Services

Please note that if you selected the services provided by either Wilshire or SWBC, you authorize PlanConnect to deduct the fees (as described in the fee disclosure provided by Wilshire or SWBC) from your participant accounts and make payments directly to Wilshire or SWBC, as applicable.

A. ☐ I am **declining** all investment fiduciary services available.

B. ☐ **WILSHIRE INVESTMENT SERVICES**

Plan Sponsor elects the following investment fiduciary services to be provided by Wilshire Associates Incorporated (Wilshire):

☐ **3(21) Investment Advisory Services**

☐ **3(38) Investment Management Services**

C. ☐ **SWBC Investment Fiduciary Services**

Plan Sponsor elects the following investment services to be provided by SWBC Retirement Plan Services ("SWBC"):

☐ **3(21) Investment Advisory Services**

☐ **3(38) Investment Management Services**

D. ☑ **OTHER THIRD PARTY FIDUCIARY SERVICES**

Please complete the following information if the Plan has an investment manager as defined in Section 3(38) of ERISA providing fiduciary investment advisory services to the Plan and its participants.

Name of the Registered Investment Adviser (RIA): Security National Bank

Address of the RIA: 1120S 101st Street, Omaha, NE 68124

Name of the Investment Adviser Representative (IAR): Douglas Oldaker/David Shrader

Phone Number: 402-449-0939 Email: dshrader@snbomaha.com

Indicate if you would like to allow the above Investment Adviser Representative to create plan level asset allocation models for the Plan:

Yes ☐ or No ☑

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11. Administrative Fiduciary Services

Are you choosing to make Administrative Fiduciary Services available to the plan? ☐ Yes ☑ No

If yes, has the Plan Sponsor completed the necessary agreements with the third party firm, National Benefit Services, LLC? ☐ Yes ☐ No

If yes, what is the level of service selected?

- ☐ Tier 1
- ☐ Tier 2
- ☐ Tier 3 (not available for Non-ERISA plans)
- ☐ Notice Delivery Services

12. Managed Account Services

Equitable Retirement Vision makes managed account services available through Stadion Money Management ("Stadion") at your election. You may elect this service through a separate agreement with Stadion.

You may elect the "Storyline" managed accounts under two different scenarios: as the plan's qualified default investment alternative or as a managed account service offered to participants in your retirement plan - Participant Elected Managed Account. PlanConnect will receive compensation from Stadion for providing ongoing administrative services to support Stadion's managed accounts. The fees for each of these services (including compensation to PlanConnect) are described and disclosed in the plan sponsor and participant agreements with Stadion.

Please note if you elect managed account services through Stadion, you authorize PlanConnect to deduct the fees (as described in fee disclosure from Stadion) from your participants' accounts and make payments directly to Stadion. You further authorize PlanConnect to provide plan and participant data necessary for Stadion to manage accounts for participants. If you terminate Stadion's managed account services, you must promptly notify PlanConnect in writing of such termination.

Please check one of the options below:

- ☐ I am electing the Participant Elected Managed Account service through Stadion.
- ☐ I am electing the QDIA Managed Account Default Investment Alternative Managed Account service through Stadion.
- ☑ I am declining electing managed accounts through Stadion.

13. Self Directed Brokerage Accounts

Are you choosing to make Self Directed Brokerage Accounts available to the participants of the plan? ☑ Yes ☑ ~~No~~

If yes, has the Plan Sponsor completed the necessary agreements with the third party brokerage firm,

Charles Schwab & Co., Inc.? ☑ Yes ☐ No

x _____ Signature

If yes, do you have any existing participant self directed brokerage accounts transferring? ☒ Yes ☐ No

x _____ Date

14. Contribution Sources

Select contribution sources that are currently being used under your Plan. If you should need further sources in the future they can be added at that time.

- ☑ Pre-Tax Deferral
- ☑ Roth Contributions
- ☐ After-Tax Deferral
- ☐ Employer Matching Contributions
- ☐ Employer Nonelective Contributions
- ☑ Pre-Tax Rollover
- ☑ Roth Rollover
- ☐ Qualified Nonelective
- ☐ Qualified Matching
- ☐ Safe Harbor Nonelective
- ☐ Safe Harbor Match
- ☐ QACA Safe Harbor Match
- ☐ QACA Safe Harbor Employer
- ☐ Prevailing Wage ER 401(k)
- ☐ Prior Pension Plan
- ☐ QVEC
- ☐ Employee 414(h) Pre-Tax Contribution - Mandatory
- ☐ Rollover - 457(b) Rollover

Are age 50 Catch-up contributions allowed?	☑ Yes	☐ No
Will special final 3-year catch-up contributions be allowed? (Non-ERISA 403(b) only)	☐ Yes	☐ No
Will Rollovers be accepted in the Plan?	☑ Yes	☐ No
Will Transfers be accepted in the Plan?	☑ Yes	☐ No
Will Contract Exchanges be accepted in the Plan?	☑ Yes	☐ No

If yes, are there any special provisions or restrictions regarding the rollover/transfer/contract exchanges?

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15. Loan and Distribution Information

A. Hardship and Unforeseeable Emergencies

Does the Plan allow hardship distributions (if 401(k) or 401(a) or 403(b))? ☐ Yes ☐ No

Does the Plan allow unforeseeable emergency distributions (if 457(b))? ☑ Yes ☐ No

Does the plan allow for the inclusion of earnings for salary deferrals? ☑ Yes ☐ No

B. In-Service Distributions

Does your Plan allow in-service distributions? ☑ Yes ☐ No

If yes, at what age? 59.5 (Note: if age is prior to 59 1/2, salary deferrals cannot be distributed.)

C. Loans

Does your Plan allow loans? ☑ Yes ☐ No

If yes, the minimum loan amount? 1,000

Maximum number of active loans per Plan Participant? 1 (Default is one active loan)

16. PlanConnect Fees – Calculation and Payment Options

Please select a method of fee calculation and payment based on the Service Level Selection in Section 3. Refer to your 408(b)(2) Fee Disclosure and/or the Recordkeeping Services Agreement Schedule A Addendum for a description of each option:

Full Service Fee Calculation: ☐ Dollar Amount based on number of eligible employees OR

☐ Percentage of plan assets*

Basic Plus Fee Calculation: ☐ Annual $1,800 Flat Dollar Amount OR

☐ Percentage of plan assets*

Important Note: If you elect to have fees calculated as a percentage of plan assets, your fee may increase as plan assets grow causing the plan to pay more over time. Plan fiduciaries should carefully consider the long-term impact of the potential for increased fees associated with this option.

Payment of Fees

Fees may be invoiced directly to the Plan Sponsor or paid from Plan assets (Participant Accounts). Unless otherwise selected below, fees calculated as dollar amounts above will be invoiced directly to the Plan Sponsor and fees calculated as a percentage of Plan assets will be paid from Plan assets. To override these default methods of payment, please select the preferred method of payment for each Fee Type below:

Fee Type	Invoice to Plan Sponsor	Pay from Plan Assets
Recordkeeping Fee:	☐	☑
Service Level Fee:	☐	☑
Optional Fees:	☐	☐

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17. Authorized Plan Sponsor/Employer Signature and Representation

By signing below, I hereby represent that I am authorized to execute this document on behalf of the Employer and the Plan. I further represent that the above information is correct and accurate and understand that neither PlanConnect nor any of its affiliates shall be liable for any actions it takes or omits to take based on the information provided herein. This information will be used to administer and recordkeep the Plan and the Employer will be responsible to update PlanConnect in writing on any changes needed to the above information. I acknowledge that the Plan fiduciary and Plan Administrator have an ongoing obligation to monitor administrative services provided by PlanConnect and ensure that the Plan is administered in accordance with applicable laws and the terms of the Plan documents.

If I elected any of services in sections 10 through 13, I further acknowledge the following: (i) each of these services is provided by a third party entity that is neither an affiliate nor a subcontractor to PlanConnect and its affiliate, (ii) the plan sponsor/employer has not received any advice or recommendations from PlanConnect or its affiliates in selecting any of these services; and (iii) the plan sponsor/employer is responsible for determining whether to retain the third party entity to provide such optional services for the plan, including whether the arrangement is reasonable.

Brenda Norton	Director. Human Resources
Name of Authorized Plan Sponsor/Employer	Title
Signed by: Brenda Norton 9EF75300B772473...	3/6/2025 | 10:56 AM EST
Signature of Authorized Plan Representative	Date

The Equitable Retirement Vision℠ defined contribution program consists of a custodial account offered through Benefit Trust Company, within which plan participants' chosen mutual fund shares are held, as well as a group fixed annuity contract (generic form number 2016FA-MFrev, 2016FA-MF403b) issued by Equitable Financial Life Insurance Company ("Equitable Financial").The program is distributed by Equitable Distributors, LLC ("Equitable Distributors"). Equitable Financial and Equitable Distributors are located at 1345 Avenue of the Americas, NY, NY 10105, (212) 314-4600. Equitable Financial is solely responsible for meeting the obligations of the group fixed annuity contract.

Offered by affiliated and unaffiliated entities, the program is the result of various strategic partnerships, including one between Equitable Distributors, LLC and PlanConnect, LLC. The Equitable Retirement Plan Services℠ platform includes recordkeeping, trading and custodial services to plan sponsors for the program. Benefit Trust Company serves as custodian of mutual funds selected by plan participants. PlanConnect, LLC serves as the platform's record-keeper.

Equitable Retirement Plan Services℠ and Equitable Retirement Vision℠ are service marks of the contractual arrangements between affiliated and/or unaffiliated entities within the platform; PlanConnect® is a registered service mark of PlanConnect, LLC (100 Madison Street, Syracuse, NY 13202. (800) 923-6669). Equitable Financial, Equitable Distributors and PlanConnect, LLC are separate, but affiliated companies. Benefit Trust Company is a separate and unaffiliated company.

The investments in this program are subject to investment risks, including possible loss of the principal invested. They are not insured by the Federal Deposit Insurance Corporation nor are they deposits to, obligations of, or guaranteed by any bank.

Certificate Of Completion

Envelope Id: BD56F3C2-17AC-4CEF-B783-8864132592B1
Status: Delivered
Subject: Complete with Docusign: Council Bluffs adding brokerage accounts
Source Envelope:
Document Pages: 7
Signatures: 0
Envelope Originator:
Certificate Pages: 4
Initials: 0
Allison Spiro
AutoNav: Enabled
1345 Avenue of America
EnvelopeId Stamping: Enabled
New York, NY 10105
Time Zone: (UTC-05:00) Eastern Time (US & Canada)
allison.spiro@equitable.com
IP Address: 141.191.64.5

Record Tracking

Status: Original
5/16/2025 1:01:30 PM
Holder: Allison Spiro
allison.spiro@equitable.com
Location: DocuSign

Signer Events	Signature	Timestamp
Brenda Norton bnorton@councilbluffs-ia.gov Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Accepted: 5/16/2025 4:07:45 PM ID: 66c8982e-3921-4156-9069-c6ea015f4058		Sent: 5/16/2025 1:04:21 PM Viewed: 5/16/2025 4:07:45 PM

In Person Signer Events	Signature	Timestamp

Editor Delivery Events	Status	Timestamp

Agent Delivery Events	Status	Timestamp

Intermediary Delivery Events	Status	Timestamp

Certified Delivery Events	Status	Timestamp

Carbon Copy Events	Status	Timestamp

Witness Events	Signature	Timestamp

Notary Events	Signature	Timestamp

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	5/16/2025 1:04:21 PM
Certified Delivered	Security Checked	5/16/2025 4:07:45 PM

Payment Events	Status	Timestamps

Electronic Record and Signature Disclosure

ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

From time to time, Equitable Advisors, LLC (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

Getting paper copies

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a $0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact Equitable Advisors, LLC:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:
To contact us by email send messages to: kelly.esposito@equitable.com

To advise Equitable Advisors, LLC of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at kelly.esposito@equitable.com and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

To request paper copies from Equitable Advisors, LLC

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to kelly.esposito@equitable.com and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

To withdraw your consent with Equitable Advisors, LLC

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;

ii. send us an email to kelly.esposito@equitable.com and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

Required hardware and software

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: https://support.docusign.com/guides/signer-guide-signing-system-requirements.

Acknowledging your access and consent to receive and sign documents electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

By selecting the check-box next to 'I agree to use electronic records and signatures', you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify Equitable Advisors, LLC as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by Equitable Advisors, LLC during the course of your relationship with Equitable Advisors, LLC.