The University of Tennessee
Hybrid Retirement Plan
Premium Distribution Specification Form

Name ____________________________________________

Last                           First                           MI

Personnel Number ________________________________

Hire Date ________________________

PART I:
Participation Election — Indicate choice by placing a check in the appropriate box

☐ I hereby elect to participate in the Optional Retirement Program Hybrid and, thereby, waive my right to participate in the Tennessee Consolidated Retirement System. (Complete Part II & Part III)

OR

☐ I hereby elect to participate in the Tennessee Consolidated Retirement System Hybrid, and thereby, waive my right, at this time, to participate in the Optional Retirement Program. (Complete Part III)

I have read the foregoing instrument and have elected to join either the ORP Hybrid or the Tennessee Consolidated Retirement System Hybrid and execute a waiver of all prospective benefits in the plan for which I have elected not to join.

PART II:
You may specify distribution of your ORP Hybrid premiums among the three companies. You must specify a percentage (no fractions) to each company in such a way that the sum of the percentages equals 100%. Each percentage must be a whole number.

WARNING! If you are specifying a distribution to a company for the first time, you must complete the enrollment process for that company.

Online Confirmation Number: ________________________________
or Date & Time of Enrollment

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Code Number</th>
<th>Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Distribution to TIAA</td>
<td>403586</td>
<td>_____ %</td>
</tr>
<tr>
<td>Total Distribution to AIG</td>
<td>25500</td>
<td>_____ %</td>
</tr>
<tr>
<td>Total Distribution to VOYA</td>
<td>VFZ294</td>
<td>_____ %</td>
</tr>
</tbody>
</table>

PART III:

Signature ____________________________

Date ____________________________

Revised 07/29/2019