Not-For-Profit Organization Redemption Form

To Whom It May Concern:

Thank you for your inquiry regarding information related to a distribution of assets from an account registered as a Not-For-Profit Organization.

In response to your request, we have included information regarding distribution of the account. Please refer to the chart below to determine the documents that will be required to process your requested transaction. The documents required to be submitted with your request are based on the type of signature guarantee you are able to obtain and provide to Primerica Shareholder Services.

An original signature guarantee may be obtained from an officer of most financial institutions. A medallion signature guarantee is preferable. By obtaining a Medallion Signature Guarantee, you will not be required to furnish certain documents. If the signature guarantee is NOT medallion, you will be required to furnish additional documentation and provide the name and phone number of the person providing the signature guarantee for verification purposes. **Please note that a notary public cannot provide a signature guarantee.** A signature guarantee is a warranty by the grantor that the signature is genuine, and that the person(s) signing is competent and authorized to sign.

Documents Required	To Redeem with Medallion Signature Guarantee	To Redeem with Non-Medallion Signature Guarantee
Completed Distribution / Transfer Form signed by Executive Director or Board Member of the organization.	\checkmark	\checkmark
Certified copy of Organization By-Laws or Board Resolution signed and dated within the past 90 days.		\checkmark

Please note that if required, the certified copy of the Board Resolution (sample copy of a resolution attached) must list the individuals by name that are authorized to act on behalf of the organization. The Resolution must have been signed and dated within the past 90 days. The organization's seal may be used to certify the resolution or the secretary's signature notarized on the document. The Redemption Form may not be signed by the same person certifying the board resolution.

If you have questions or need additional information, please contact our Customer Service Department at (800) 544-5445. Customer Service Representatives are available to assist you, Monday through Friday between 8 a.m. and 8 p.m. ET.

Primerica Shareholder Services

INSTRUCTIONS:

- 1. Complete the attached Not-For-Profit Organization Redemption Form
- 2. Sign the form
- 3. Mail the completed, signed form to:

Not-For-Profit Organization Redemption Form

Please send to:	Regular Mail

Primerica Shareholder Services P.O. Box 534485 Pittsburgh, PA 15253 – 4485 Client Services: (800) 544-5445

Overnight Mail

Primerica Shareholder Services Attention: 534485 500 Ross Street, 154-0520 Pittsburgh, PA 15262

NOTE: Please provide the Not-For-Profit Organization's name and the account number so that we may process your request.

SECTION 1 - REDEMPTION OPTION AND AMOUNT

Please indicate the amount you wish to redeem from your account. You have three options:

- All Shares / All Fund Positions You may choose to redeem all shares in a specified fund position with this account number, or choose all fund positions to be redeemed. Unless otherwise specified, the account(s) will be closed and all options (i.e. Bank Draft, Systematic Withdrawal Plan) will be discontinued.
- 2. Dollars You may choose to redeem a specific dollar amount from a specified fund position with this account number, or choose all fund positions to be redeemed. You must leave a minimum balance as outlined in your fund prospectus or have an active Bank Draft Option on your account should you wish the account(s) to remain open.
- 3. Shares You may choose to redeem a specific number of shares from a specified fund position with this account number, or choose all fund positions to be redeemed. You must leave a minimum balance as outlined in your fund prospectus or have an active Bank Draft Option on your account(s) should you wish the account(s) to remain open.

SECTION 2 - REDEMPTION PROCEEDS

Please provide mailing instructions for your redemption check. We will process and mail your redemption check usually within two to three business days.

- To the Not-For-Profit organization as identified on in the account registration To have the check sent to the address and registration of record.
- To the following Payee and / or address To have the check sent to alternate payee and / or address. (Original Signature Guarantee Required).

SECTION 3 - DELIVERY OPTIONS

Please indicate which delivery options do you wish to receive the assets.

- **Express Mail** Please indicate if you wish to receive the check via express mail service. A daytime telephone number is required for all express mail packages. A signature will be required upon receipt of all express mail packages.
 - One-Day Air Express and deduct the fee charge from my account. The check will be sent via next-day air express in accordance with the mailing instructions.

NOTE: The overnight express fee is generally \$20 for most deliveries in the United States, however, if you reside in a rural area in the U.S. the charge could be higher. If you reside in Alaska, Hawaii, Puerto Rico or request overnight express to a PO Box, the overnight fee will be higher and you could be charged as much as \$30.00. If you request overnight express to Guam, the fee charge could be as much as \$70 or more. **Your account will be charged accordingly.**

- Wire Transfer A Wire Transfer should take place within 48 to 72 hours of processing your request for a redemption. Please complete the Wire Transfer, Bank Account Information and attach a voided check.
 - " Wire Transfer to the bank of record to have the redemption proceeds wired to the current bank draft account.
 - Wire Transfer to a non-record bank to have the redemption proceeds sent to a bank account not on file with Primerica Shareholder Services. When processing a Wire Transfer to a non-record bank, you must complete the bank name, bank contact person, bank telephone number, bank routing / transit number, bank account name and number and attach a voided check.

(Continue)

Not-For-Profit Organization Redemption Form

SECTION 3 - DELIVERY OPTIONS (continued)

- ACH Transfer An Automated and Clearing House (ACH) transfer should place within 72 to 96 hours of processing your request for distribution of shares. Please complete the Wire / ACH Transfer Information and attach a voided check.
- Wire / ACH Transfer to the bank of record to have the distribution proceeds Wired / ACH to the same account the bank draft option is being deducted from.
- Wire / ACH Transfer to a non-record bank to have the distribution proceeds sent to a bank account not on file with Primerica Shareholder Services. When processing a Wire / ACH Transfer to a non-record bank, you must complete the bank name, bank contact person, bank telephone number, bank routing / transit number, bank account name and number, and attach a voided check.

SECTION 4 - SIGNATURE AND SIGNATURE GUARANTEE

The Executive Director or Board Member of the Organization must sign the requests. If the request is being made by individual(s) other than the not-for-profit organization's officer(s), they must sign and provide certain documentary evidence to support their position to act on behalf of the not-for-profit organization. Please provide a daytime phone number where you can be reached should we need additional information to process your request.

An original signature guarantee may be obtained from an officer of most financial institutions. We are unable to accept a signature guarantee by a Notary Public. A signature guarantee is a warranty by the grantor that the signature is genuine, and that the person(s) signing is competent and authorized to sign.

ADDITIONAL FEES

CDSC FEE - If your account is invested in Class B Shares, your redemption may be subject to a CDSC Fee (Contingent Deferred Sales Charge). Please refer to your prospectus to determine the applicable CDSC percentage applicable to your Fund.

Primerica Shareholder Services

Not-For-Profit Organization Redemption Form

REQUIRE INFORMATI	ON
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Not-For-Profit Organization's Name:

Account Number:

7 | REDEMPTION OPTION AND AMOUNT

I / We would like to receive: (choose one)

All Shares in:				
FUND NUMBER / NASDAQ SYMBOL	NUMBER OF SHARES	OR DOLLAR AN	NOUNT	CONTINUE BANK DRAFT
	#	\$		
	#	\$		
	#	\$		
All Shares in All Fund Positions	•			►
2 REDEMPTION PROCEEDS	5			
Please tell us how to send the redemption p	proceeds.			
Please mail the check to: (choose one)				
The address of registration	To an alternate payee / add	ress: (complete name(s) and a	address below)	
Name(s):				
Address:				
City:		State:		Zip:
3 DELIVERY OPTIONS				
I / We would like to receive a check: (choo	se one)			
1 st Class Mail				
Next Day Air (read note regarding fee on inst	ruction page)			
Daytime phone number:	(Rec	uired for Express Mail Service)		
OR (choose one)				
I / We would like to wire transfer: (choose	one) To the active	bank of record at PSS;	OR To a	n alternate bank account.
I / We would like to ACH transfer: (choose	one) To the active	bank of record	OR To a	n alternate bank account.
				(Continue)

Primerica Shareholder Serv<u>ices</u>

Not-For-Profit Organization Redemption Form

4 SIGNATURE AND SIGNATURE GUARANTEE

X		
Authorized Officer of the Organization's Signature	Date	
X		
Authorized Officer of the Organization's Signature	Date	
Daytime phone number where you can be reached should we need additional int	ormation:	

SIGNATURE GUARANTEE STAMP: I guarantee the signature(s) of the applicant(s) and to the best of my knowledge and belief the applicant is of full age and legally competent. A separate signature guarantee stamp must be affixed to this form for each signor. *If this is a Medallion signature guarantee, I further affirm that I have checked and verified a certified copy of the Board Resolution signed and dated within the past 90 days naming the applicant as an authorized officer of the organization.*

(Signature Guarantee Seal for Signor #1)	(Signature Guarantee Seal for Signor #2)	
Guarantor Name:	Guarantor Name:	
uarantor Phone Number: Guarantor Phone Number:		
Wire / ACH Transfer	- Bank Account Information	
Bank Name:	Account Name:	
Contact Person:	Phone Number:	
Routing Number:	Account Number:	

Please check with your financial institution for any special wiring instructions required to process a wire transfer to your bank account. Some financial institutions clear transactions through other institutions. This will cause a problem in processing the wire if your bank does not accept direct wires, but uses a pay through institution.

IMPORTANT INFORMATION - Financial Institutions providing medallion signature guarantees have surety bond coverage that protects the transfer agents from "bad" guarantees. Primerica Shareholder Services will not accept a request to process a transaction that exceeds the financial institution's bond coverage. Please verify with your financial institution their amount of bond coverage to determine if the institutions bond will cover your requested redemption / distribution amount.

(Continue)

Primerica Shareholder Services

Not-For-Profit Organization Redemption Form

	I	RESOLUTION OF	BOARD OF DIREC	TORS		
OF						
		Name of Not	t-For-Profit Organizati	on		
(Name of Authorized Off						
ecretary of(Name of Not-I	For-Profit Organiza	ntion)	Located at	(Not-For-Profit O	rganization Address)	
(City and State of Not-For-Pr	ofit Organization)	(Zip	, a cor Code)			
ate of	; that the follo	owing is a true and co	orrect copy of a certa	in Resolution adopte	ed at a special meetin	ig of the Boar
rectors convened in accordance ad that such Resolution is now in	e with the law and a full force and effe	the by-laws of said or ect:	rganization on the	day of	(Month)	_ ,(Year)
IT RESOLVED that either			and / or n) (Na			
(Nan	ne of Authorized O	ffice 1 of Organization	n) (Na	ame of Authorized O	ffice 2 of Organizatio	n)
(Title i.e. Evecutive Director)		r-Profit Organization	and officers of this co	prporation be and the	ey are hereby author	ized for and o
(Title, i.e., Executive Director)	,	. fue we then Nett Feer Du				
half of the Not-For-Profit Organ	ization to withdrav	v from the Not-For-Pr	offt Organization's ac	count with	(Name of Fund)	
ith account number		the sum of \$		Dollars	()	No.
nd until written notice of such re DO FURTHER CERTIFY that the a I WITNESS WHEREOF, I have he	above and foregoir	ng Resolution has not	t been altered, amend	ded or repealed and		
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	<u> </u>					
uthorized Officer of Organization	i Signature					
uthorized Officer of(N	lame of Not-For-Pi	rofit Organization)				
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		Please send to:	Regular Mail		Overnight Mail	
Once completed, mail and required docume appropriate address I processing.	nts to	Pri P.C	merica Shareholder D. Box 534485 tsburgh, PA 15253 - (800) 544-5445	- 4485	Primerica Sharehold Attention: 534485 500 Ross Street, 15 Pittsburgh, PA 1526	4-0520
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