

Automated Clearing House (ACH) Electronic Funds Transfer (EFT) Form for Plan Contributions

Please use this form to establish the ACH privilege that allows you to process plan contributions via EFT for 401(k), profit sharing, money purchase pension, SEP IRA or SIMPLE IRA retirement plans. Please mail the completed form to Columbia Management Investment Services Corp. (CMIS) at the address below. Within three weeks of CMIS receiving your form in proper order, you may initiate plan contributions. Plan contributions received before 4:00 p.m. ET will receive that day's price. Contributions received after 4:00 p.m. ET will receive the next business day's price. Funds will usually be withdrawn from your bank account within three business days after the receipt of your plan contribution(s). If you have any questions regarding this privilege, please call a retirement plan services representative at 800.799.7526.

| Part 1 | Plan Information | | | | | |
|--|--|---|---|--|---|--|
| Plan Name | | | | | Plan ID | |
| Employer Name | | | | Tax Identification Number | | |
| Part 2 | Bank Information | | | | | |
| Please conta | act your bank to verify ACH EFT service is a | /ailable. | | | | |
| Bank Account Number (Do not use spaces or dashes) | | | ABA Routing Number | | | |
| Name of Bank Account Owner | | | Name of Joint Owner, if applicable | | | |
| Account Type | : ☐ Checking ☐ Savings Please attach a b | lank check ma | ked "Void" — (De | posit slip | s are not acceptable) | |
| Part 3 | Signatures | | | | | |
| respective at instructions. directors, ag | <u> </u> | vees will be liab anagement Inve claims or liabilit | le for any loss, inju stment Services Co y arising from their | ry, damag orp., the C r compliar | e or expenses as a result of acting upon my Custodian and their respective affiliates, officers, nce with these instructions. I understand that | |
| Signature of Employer | | Date (MM/DD/YYYY) | | Print Name of Employer Signature | | |
| Part 4 | Return Instructions | | | | Reset Form | |
| Regular mail Columbia Management Investment Services Corp. Attn: Retirement Plan Services P.O. Box 219104 Kansas City, MO 64121-9104 | | es Corp. | Overnight mail | Columbia Management Investment Services Corp. c/o SS&C GIDS, Inc. Attn: Retirement Plan Services 430 W 7th Street, STE 219104 Kansas City, MO 64105-1407 | | |

For assistance completing this form, please contact a representative at 800.799.7526, Monday through Friday, 8:00 a.m. to 5:00 p.m. Eastern time. Columbia Threadneedle Investments (Columbia Threadneedle) is the global brand name of the Columbia and Threadneedle group of companies. Columbia Management Investment Services Corp. is the transfer agent for Columbia Funds.