Touchstone Money Purchase Program REALLOCATION TRANSFER / FUTURE INVESTMENT ELECTIONS

Complete all sections below and Print clearly in Blue or Black ink

Part 1	PARTICIPANT INFORMA	ATION			
Participant Name					Social Security Number
Street Address					Date of Birth
City			State	Zip Code	Date of Hire
Day time Phone Number		Email Address			Company Division or Location

REALLOCATON TRANSFER / FUTURE INVESTMENT ELECTIONS

I elect to reallocate the investment of my existing account balance and/or invest future contributions to my account as indicated below (must be in whole percentages and total 100%). Check only ONE box below :

This election applies to my existing balance only.

This election applies to my future contributions only.

This election applies to both my existing balance and future contributions.

Note: to select different elections for existing balance and future contributions, submit a separate form for each.

Investment Option	Reallocation Percent	Investment Option	Reallocation Percent	
Touchstone Active Bond Fund Class A	%	Touchstone Small Company Fund Class A	%	
Touchstone Balanced Fund Class A	%	Touchstone Global ESG Equity Fund Class A	%	
Touchstone Flexible Income Fund Class A	%	Touchstone Ultra Short Duration Fixed Income	%	
Touchstone International Equity Fund	%	Federated Government Obligations Fund SS	%	
Touchstone Credit Opportunities Fund	%	Touchstone Strategic Income Opportunities Class	%	
Touchstone Dividend Equity Fund Class A	%	Touchstone Sands Select Growth Fund Class A	%	
Touchstone Large Cap Focused Fund	%	Touchstone Value Fund Class A	%	
The sum of the "Reallocation Percent" columns must equal 100%				

Part 3 PARTICIPANT SIGNATURE

I authorize USI Consulting Group (USICG), as recordkeeper for my Plan, to make the above changes in the percentages indicated. I understand that the requested changes will occur as soon as administratively feasible and that every effort will be made to implement the changes on the day my form is received by USICG, provided that my form isin good order and received before **1:00 PM EST**, and provided that the fund selections I have made are not subject to any trade restrictions imposed by the investment fund managers that would prevent my changes from being implemented. I further understand that this authorization will supersede any previously dated elections I have made and will be processed upon receipt regardless of any other activity or transactions I may initiate on paper or via the website. I acknowledge that some funds may impose redemption feesto prevent short term trading and round trip transactions and authorize USICG to execute the acknowledgement on my behalf in order to implement my requested changes. This authorization will continue in effect until changed by me.

Employee Signature

Part 2

Date

Once you have completed the form, please forward to USICG choosing **ONE** of the options below:

Email address: USICGForms@usicg.com

Fax	Numbe	r• ((610)	362-8281
ιαλ	NULLING	•• •	010)	302-0201

Regular Mail: USI Consulting Group Attn: Touchstone Investments Service 95 Glastonbury Blvd., Suite 102 Glastonbury, CT 06033