COLUMBIA PLAN INVESTOR WEB (CPIWeb) ACCESS APPLICATION

Use this application to activate online access as plan sponsor for 401(k), profit sharing, money purchase pension, SEP IRA or SIMPLE IRA retirement plans. Once your online access is activated, you will be able to submit your plan contributions online, in addition to viewing plan and select participant information.

1. TERMS AND CONDITIONS FOR ONLINE ACCESS

- You will elect one eight-character operator identification or logon and include it in the appropriate boxes indicated in the plan information section below. There is only one operator identification per plan.
- A default password, "TRACWEB," has been elected for you. We recommend you change it upon your initial sign-in.
- Upon submission of the sponsor website access form, your online access will be established within five to seven business days. You will not be notified by written or oral correspondence when your account has been activated.
- Your operator identification and password should be kept confidential. It is your responsibility as the plan sponsor to maintain the integrity and security of your operator identification and password. Please provide the operator identification and password only to those who have a business need to know it in order to service your account(s), and who have agreed to maintain the confidentiality of the operator identification and password in substantially the same manner.
- Please consider carefully who will have access to the operator identification and password, as it will enable you to submit plan contributions and view confidential details of your plan and participant information.
- You agree to contact us to obtain a new operator identification and password in the event that either is compromised or lost, or you wish to withdraw access from a third party.

This application will be reviewed and you may be contacted for further information.

2. PLAN INFORMATION

Please read the terms and conditions for online access above and complete the following:

_____

Plan name

_____ _____ - _____ _____

Plan ID **Tax ID** **Operator ID**

_____

Employer name

_____

Employer address

_____ _____ _____

City **State** **Zip code**

_____ - _____ - _____ _____

Employer phone number **Employer e-mail address**

Do you sponsor any other retirement plans? ☐ Yes ☐ No

Please List _____

3. SIGNATURE

As the plan sponsor of the plan(s) referenced above, I acknowledge that I have read the terms and conditions for online access above. By my signature below, I agree to these terms and conditions.

X _____ _____ / _____ / _____

Employer signature **Date (mm/dd/yyyy)**

Fax this completed application to 816-474-3938. If you have any questions, call Columbia Retirement Plan Services at 800-799-7526.

Columbia Management.