

ENROLLMENT FORM**ICCD, Inc.
Retirement Plan****Plan Number:** 873496**Participant Information:** Tell us who you are, and how we can reach you.

| | | |
|------------------------------------|---|---|
| Name (first, middle initial, last) | Social Security Number | <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Address (number & street) | Date of Birth (MM/DD/YYYY) | Date of Hire (MM/DD/YYYY) |
| | Home Phone | Work Phone & Extension |
| City/Town | State | Zip Code |
| Email Address | Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single | |

Contribution Information: Tell us how much you would like to save per pay period.

| | |
|------------------------|--|
| PRE-TAX CONTRIBUTIONS | <input type="checkbox"/> Yes, I want to contribute ____% or \$____ of my compensation per pay period on a pre-tax basis. |
| CATCH-UP CONTRIBUTIONS | <p>The IRS allows participants age 50 or older to contribute additional amounts each year, based on the Cost of Living Adjustment. Catch-Up contributions will be made on a pre-tax basis.</p> <p><input type="checkbox"/> Yes, I want to make a Catch-Up contribution of ____% or \$____ of my compensation under the catch-up provision.</p> |
| WAIVE PARTICIPATION | <input type="checkbox"/> No, thank you. I do not want to participate in my employer's retirement plan at this time. I am choosing not to save any compensation. |

Investment Selection: We'll tell you about your investment choices; you decide what's right for you.**OPTION ONE: I DON'T WANT TO GO IT ALONE****Managed Account Program**

I WANT MY RETIREMENT PLAN ACCOUNT MANAGED BY PROFESSIONALS.

Your plan offers a managed account program that is designed to make it easier for you to manage your account. The related fees are described in the Advisory Services Overview section of your enrollment materials.

Once you have enrolled, you can update your personal information through Voya's participant Web site. After you log on, click on Get Investment Advice.

☐ Yes, I want to participate in the managed account program to receive professional investment management and ongoing oversight of my retirement account.

You can personalize your retirement strategy even further if you wish to provide salary information:

Annual Salary \$_____

Form No. E001 (01/25) (NY)

>>> Complete entire form.
Signature required on last page of form.

**Voya Retirement Insurance
and Annuity Company**P.O. Box 990063
Hartford, CT 06199-0063**VOYA**
FINANCIAL GROUP

Fold and tear on perforation

Name (first, middle initial, last)

Social Security Number

Plan Number: 873496

Investment Selection (continued): We'll tell you about your investment choices; you decide what's right for you.**OPTION TWO: I LIKE TO KEEP IT SIMPLE****VOYA INDEX SOLUTION PORTFOLIOSSM**

I WANT TO INVEST IN PROFESSIONALLY MANAGED PORTFOLIOS THAT PROVIDE DIVERSIFICATION.

☐ Yes! I want to invest 100% of my contributions in the selected Voya Index Solution Portfolio.**Select the Voya Index Solution Portfolio that tracks most closely with the year you plan to retire.**

- | | |
|--|--|
| <input type="checkbox"/> VOYA INDEX SOLUTION 2030 PORT ADV | <input type="checkbox"/> VOYA INDEX SOLUTION 2055 PORT ADV |
| <input type="checkbox"/> VOYA INDEX SOLUTION 2035 PORT ADV | <input type="checkbox"/> VOYA INDEX SOLUTION 2060 PORT ADV |
| <input type="checkbox"/> VOYA INDEX SOLUTION 2040 PORT ADV | <input type="checkbox"/> VOYA INDEX SOLUTION 2065 PORT ADV |
| <input type="checkbox"/> VOYA INDEX SOLUTION 2045 PORT ADV | <input type="checkbox"/> VOYA INDEX SOLUTION INC PORT ADV |
| <input type="checkbox"/> VOYA INDEX SOLUTION 2050 PORT ADV | |

OPTION THREE: I WANT TO BE IN CONTROL

I WANT CONTROL. I WILL CHOOSE MY OWN INVESTMENT MIX.

☐ Yes, I want to invest my contributions according to the allocations designated below. A maximum of 25 investment options may be selected.

Use this section to select a percentage other than 100% for options previously listed.

| | Fund# | | Fund# |
|-------------------------------------|--------------|--------------------------------------|--------------|
| Stability of Principal | | Asset Allocation | |
| Voya Fixed Account | (xxxx) ____% | Voya Index Solution Inc Port Adv | (1547) ____% |
| Voya Govt Money Market Portfolio I | (003) ____% | Balanced | |
| Bonds | | VY Invesco Eqty & Inc Port I | (452) ____% |
| PIMCO Intl Bnd Fd (Unhedged) A | (8557) ____% | Large Cap Value/Blend | |
| PIMCO VIT Real Return Portfolio Adm | (833) ____% | Vanguard VIF - Equity Income Port | (414) ____% |
| Vict Pionr Strategic Income Fund Y | (1583) ____% | Voya U.S. Stock Index Port Inst | (829) ____% |
| Voya High Yield Portfolio Srv | (787) ____% | Large Cap Growth | |
| Voya Intermediate Bond Port I | (004) ____% | Voya Large Cap Growth Port Srv | (1255) ____% |
| Asset Allocation | | Small/Mid/Specialty | |
| Voya Index Solution 2030 Port Adv | (6490) ____% | Cohen & Steers Real Estate Secs Fd A | (8657) ____% |
| Voya Index Solution 2035 Port Adv | (1541) ____% | Franklin Small Cap Value VIP Fd 2 | (073) ____% |
| Voya Index Solution 2040 Port Adv | (6492) ____% | VY AmCen Sm-Md Cp Val Port I | (434) ____% |
| Voya Index Solution 2045 Port Adv | (1544) ____% | VY Baron Growth Port I | (430) ____% |
| Voya Index Solution 2050 Port Adv | (6491) ____% | Vanguard VIF - Small Comp Grwth Port | (413) ____% |
| Voya Index Solution 2055 Port Adv | (1164) ____% | Voya Russell Mid Cap Index Port I | (1560) ____% |
| Voya Index Solution 2060 Port Adv | (3210) ____% | Voya Russell Sm Cp Index Port I | (1563) ____% |
| Voya Index Solution 2065 Port Adv | (E472) ____% | Global / International | |
| | | American Funds New World Fund R3 | (7176) ____% |
| | | Voya International Index Port I | (1551) ____% |

Total**100%**All contributions should be made in whole percentages, totaling 100%. **Please initial any erasures, strikeouts or corrections.**

| | | |
|------------------------------------|------------------------|---------------------|
| Name (first, middle initial, last) | Social Security Number | Plan Number: 873496 |
|------------------------------------|------------------------|---------------------|

Rollover

Do you want to learn more about rolling over and consolidating your retirement investments? Contact a Customer Service Associate today by calling 1-800-584-6001.

Acknowledgements and Signature

Voya Financial reserves the right to cancel your access to the Managed Account Program at any time without prior notice. If I elect to participate in the plan's Managed Account Program, I hereby acknowledge that I have received and read the program terms and conditions and other Legal Information (Advisory Services Overview, Disclosure Statement, and Privacy Policy) and agree to be bound by the terms of the Advisory Services Agreement. I understand that the applicable fees will be deducted periodically from my account.

One or more of these options may be offered through a custodial or trust arrangement and/or a group annuity or funding agreement issued by Voya Retirement Insurance and Annuity Company. For investment options offered through a funding agreement or group annuity contract, I understand that the current tax laws provide for deferral or taxation on earnings on account balances; and that, although the funding agreement or group annuity contract provides features and benefits that may be of value, it does not provide for any additional deferral of taxation beyond that provided by the Plan itself.

I have received, read and understood the Voya Financial participant information booklet, prospectuses and/or investment option summaries describing the investment options.

SIGN me up! Please sign and date below.

Participant Signature _____ **Date** _____

Please complete this form and return it to your Employer.