



VANTAGEPOINT TRADITIONAL & ROTH IRA ACCOUNT APPLICATION INSTRUCTIONS

Carefully read the instructions before completing the attached application. You may find it helpful to detach the application and refer back to these instructions while completing the application. Please print legibly in blue or black ink. If you would like to complete this form online and establish your account immediately, please visit www.icmarc.org and access the IRA Wizard. If you need any assistance in completing this application, please call Investor Services at 800-669-7400.

Please return the completed application, any contribution or rollover check, and any applicable *Vantagepoint IRA Rollover Form* or *Vantagepoint IRA Direct Transfer Form* in the enclosed envelope, or mail in your own envelope to:

Vantagepoint Transfer Agents, P.O. Box 17010, Baltimore, MD 21297-1010.

CLASSIFICATION OF IRAS

Traditional IRAs are funded with annual contributions of up to a specified dollar limit each year (see chart below). A separate Traditional IRA may also be established for a non-wage earning spouse, and funded with an additional amount of up to the specified dollar limit each year. Contributions may be made on either a **deductible** or **nondeductible** basis (see IRA Publication 590 for more information). All earnings on Traditional IRA assets are tax-deferred until the time of withdrawal.

You may also open a Vantagepoint IRA to accept assets from an eligible retirement plan (457(b), 401 defined contribution, 401 defined benefit, or 403(b)) or another Traditional IRA. The following types of retirement plan distributions cannot be moved to a Traditional IRA.

Payments Spread Over Long Periods of Time: You cannot move a payment if it is part of a series of equal (or almost equal) payments made at least once a year and lasting for your lifetime (or your life expectancy), your lifetime and your beneficiary's lifetime (or life expectancies), or a period of 10 years or more.

Required Minimum Payments: Beginning in the year you reach age 70½ (or retire, if later), a certain portion of your payment from your retirement plan cannot be moved because it is a required minimum payment that must be paid to you. However, once you have received the required minimum payment for a particular year, you may move the remainder of your retirement plan account to a Traditional IRA. (You will be required to continue receiving the required minimum payment from your IRA.)

Emergency or Hardship Withdrawals: Emergency (from a 457(b) plan) or hardship (from a 401 or 403(b) plan) withdrawals cannot be moved to a Traditional IRA.

Note: If you are a 401 plan participant born prior to 1936, you may want to consider establishing a separate Traditional IRA ("Conduit IRA") for your retirement plan assets. You should speak with a tax or financial adviser to see if this would enable you to take advantage of special income tax rules when you take a distribution from your account. If you wish to open a "Conduit IRA," please write "Conduit" in Section 1 for the IRA type.

Roth IRAs are funded with annual nondeductible (after-tax) contributions of up to the specified dollar limit (see chart below). A separate Roth IRA may also be established for a non-wage earning spouse and funded with an additional annual nondeductible contribution of up to the specified dollar limit. Earnings on Roth IRA accounts may be distributed tax-free, provided they are not withdrawn until after the contributions have been in the account for five years from the date of your first Roth IRA contribution or conversion and certain other requirements are met (see IRS Publication 590 for more information). You may also open a Vantagepoint Roth IRA to accept assets from another Roth IRA.

Roth Conversion IRAs hold assets that were formerly held in a Traditional, SEP or SIMPLE IRA. A Roth Conversion IRA may also hold assets formerly held in 457(b), 401 defined contribution, 401 defined benefit, 403(a) or 403(b) plans if certain requirements are met. Traditional IRA assets converted to Roth Conversion IRA assets are taxable (to the extent the converted assets have not already been taxed) while future earnings are not taxable if held in the account for five years from the date of your first Roth IRA contribution or conversion and certain other requirements are met (see IRS Publication 590 for more information). A penalty may apply if the assets are withdrawn within five years of the year of the conversion. If you wish to establish a Roth Conversion IRA you should not use this package. Instead, please call Investor Services at 800-669-7400 and request the *Vantagepoint Roth Conversion IRA Packet*.

Dollar Limits for Traditional and Roth IRA Contributions

- If you are age 50 or older, you may make additional annual catch-up contributions to your IRA each year.
- Note: Your aggregate contributions to both a Traditional and a Roth IRA cannot exceed the specified dollar limit in any given year.

YEAR	CONTRIBUTION LIMIT	CATCH-UP LIMIT (Age 50 and Older)
2016	\$5,500	\$6,500

The limit will be indexed to reflect inflation thereafter in \$500 increments.

SECTION 1: PERSONAL INFORMATION

All the information in this section is required in order to establish your Vantagepoint IRA. If you wish to establish multiple IRA types, you must complete separate applications. If you wish to establish a Roth Conversion IRA, you should not use this packet. Instead, please call Investor Services and request the *Vantagepoint Roth Conversion IRA Packet*.

Please Note: Federal Law allows the use of a P.O. Box only in conjunction with a street address.

SECTION 2: FUNDING YOUR VANTAGEPOINT IRA WITH A DIRECT TRANSFER

If converting assets from a Traditional IRA directly to a Roth IRA, please complete and return the Vantagepoint Roth IRA Conversion Form. Check the box if you are transferring assets from another IRA custodian or from another eligible retirement plan (401 defined contribution, 401 defined benefit, 457(b), 403(a) or 403(b)). In addition, please complete the enclosed *Vantagepoint IRA Direct Transfer Form* and return the form along with this application.

Please Note: Roth IRAs can accept rollovers from Roth IRAs, 401 defined contribution, 401 defined benefit, 457(b), or 403(b) plans and conversion assets from Traditional or Conduit IRAs. Traditional IRAs can accept transfers/rollovers from other Traditional IRAs, Conduit IRAs, SEP IRAs, SIMPLE IRAs (after two years of participation), or from 401 defined contribution, 401 defined benefit, 457(b), 403(a) or 403(b) plans (except for Designated Roth Accounts).

SECTION 3: FUNDING YOUR VANTAGEPOINT IRA WITH A CHECK

Complete this section if you are including a check to initially fund your IRA (this includes a rollover, see below). If you are funding your IRA through a direct transfer, please do not complete this section and continue to Section 4.

CHECK INFORMATION: The initial minimum contribution is \$1,500 for Vantagepoint Traditional and Roth IRAs. Checks should be made payable to **Vantagepoint Transfer Agents** and mailed with this application. Complete the appropriate box(es) to indicate how you are funding your IRA. **Please include your Reference Code on the check.**

ANNUAL CONTRIBUTION: If your check is for a Vantagepoint Traditional or Roth IRA contribution, please indicate the year toward which the contribution should apply in the appropriate application box. If you do not indicate a year, your contribution will be applied toward contributions for the year in which your check is received. Annual contributions for Vantagepoint Traditional and Roth IRAs may be made up until your tax return due date (normally April 15) of the following calendar year.

ROLLOVERS: A rollover occurs when you withdraw your money from another IRA custodian or other eligible retirement plan (401 defined contribution, 401 defined benefit, 457(b), 403(a) or 403(b)) and reinvest it in a Vantagepoint IRA. You must complete the rollover within 60 days of receiving the assets to avoid paying income taxes and a potential early withdrawal penalty. If you initially withdrew assets from an IRA (Traditional or Roth) for a first-time home purchase, but did not use the funds for that purchase, you have 120 days from the date you received the money to complete the rollover. Please also complete the enclosed *Vantagepoint IRA Rollover Form* and return the form, along with this application.

SECTION 4: ALLOCATION OF CONTRIBUTIONS

You may either elect **Option #1** to select your own investments or **Option #2 “Managed Accounts”** and have ICMA-RC manage your account for you for an ongoing asset-based fee. Please read the enclosed *ICMA-RC Guided Pathways® Fund Advice and Managed Accounts Investment Advisory Agreement* for additional information.

OPTION #1 — Your contributions can be invested in one or more funds available to your IRA. Use whole percentages for your allocations (e.g., 50 percent, not 33⅓ percent). Do not use fixed dollar amounts. Please read the appropriate prospectus for full descriptions of the funds. If no allocation instructions are provided, the percentages do not total 100 percent, or the allocation is invalid, assets will be allocated to the Dreyfus Cash Management Fund until additional instructions are received from you. Investment in a money market fund is neither insured nor guaranteed by the U.S. government. There is no assurance that a money market fund will be able to maintain a stable net asset value of \$1.00 per share. Please read the prospectus carefully prior to investing any money.

OPTION #2 — **Please ensure all requested Managed Accounts information is provided in Section 4. If information is missing your assets may be allocated to the Dreyfus Cash Management Fund until your Managed Accounts enrollment can be completed.**

For Your Desired Retirement Age: Enter the year in which you would like to retire. If no age is provided, age 65 will be used.

For Your Annual Desired Retirement Income: Enter the total annual dollar amount you wish to receive from all of your retirement income sources. If no dollar amount is provided, the Annual Desired Retirement Income will be calculated as 100% of your after-tax salary.

For Your Contributions: Please indicate your annual contribution to your IRA either as a percentage of your current salary or as a dollar amount and indicate whether it is a Traditional or Roth contribution.

For Social Security Retirement Benefits: Please indicate whether you expect to receive Social Security retirement benefits. If you select “Yes” or do not select either box, we will include an estimate of Social Security benefits.

For Number of Dependents: You may include up to 10 dependents and your spouse (if your spouse’s financial information is included) that you currently claim as an exemption on your tax return.

For Your Pension: Please indicate whether you expect to receive Pension payments. If you select “No” or do not select either box, we will not include Pension information. If you select “Yes” please provide an annual Pension Benefit Amount estimate by selecting one of the two below options:

Option A — Enter the annual benefit amount you expect to receive in retirement in today's dollars, **OR**

Option B — Enter the percentage of your salary you expect to receive in retirement.

In addition, Select "Yes" to "Is your pension subject to a cost of living adjustment (COLA)?" if your annual pension benefit will increase after retirement.

If you wish to further personalize your Managed Accounts enrollment, please complete and return the attached page, *Additional Managed Accounts Information*. This information can also be provided at any time after your initial enrollment. Although this supplemental information is not required to enroll you in Managed Accounts, we strongly recommend you provide as much information about yourself as possible to help ICMA-RC provide you with a more personalized level of account management.

Please Note: The allocation instructions you provide in Option #1 will affect contributions only. To specify the allocation for any rollover contributions from an IRA or other eligible retirement plan, please contact ICMA-RC for the appropriate transfer form that will provide instructions on establishing a rollover allocation. In the absence of rollover allocation instructions, incoming rollover IRA assets will be invested in the Dreyfus Cash Management Fund until additional instructions are received from you.

SECTION 5: AUTOMATIC INVESTMENT PROGRAM (AIP)

Complete this section to initiate contributions to your Vantagepoint IRA through the Automatic Investment Program (AIP).

The AIP is a quick and easy way to take advantage of dollar cost averaging, by consistently investing a regular dollar amount regardless of market fluctuations. After your Vantagepoint Traditional or Roth IRA has been established (no initial minimum contribution is required), a fixed minimum amount of \$50 or greater can be transferred on a monthly or quarterly basis directly from your bank account to your Vantagepoint IRA. AIP contributions will be reported as current year contributions.

- A. Contribution Information:** Indicate the amount and frequency of your AIP contribution. Your AIP payments can be requested on any day of the month. If the date you chose falls on a holiday, weekend or any day the stock market is closed, your deduction will occur the following business day. Requests to initiate AIP contributions must be received at least 6 business days prior to the designated date, otherwise your AIP payments will begin on the designated date of the following month.
- B. Bank Account Information:** Please complete and attach a voided check.

SECTION 6: BENEFICIARY DESIGNATION

Your primary beneficiary(ies) designation tells us who should receive your Vantagepoint IRA balance if you should die before full disbursement of your IRA. Your contingent beneficiary(ies) designation tells us who should receive your Vantagepoint IRA balance if all your primary beneficiary(ies) die before you should die and before full disbursement of your IRA. For example, a married Vantagepoint IRA holder with children might name his/her spouse as the primary beneficiary and the children as contingent beneficiaries. Payment to beneficiaries will be made according to the rules of succession. For example, if you name your brother 50% primary beneficiary and your brother dies before you then your brother's percentage is discarded when distributing your account; 100% of your account will be paid to the other named primary beneficiary(ies). If all of your primary beneficiaries predecease you, your account will be paid to your contingent beneficiary(ies). If none of your named primary or contingent beneficiaries are living or you do not name a beneficiary, the proceeds will be paid to your surviving spouse or, in the absence of a surviving spouse, to your estate. If you live in a community property state (AZ, CA, ID, LA, NV, NM, TX, WA, or WI) you must name your spouse as 100% primary beneficiary unless your spouse waives this right by signing this form. If a Social Security Number is not provided and/or we cannot locate the named beneficiary, the Vantagepoint IRA balance will be paid to your surviving spouse if he/she can be located, or if no surviving spouse can be located, to your estate.

Use whole percentages (e.g., 50 percent, not 33 $\frac{1}{3}$ percent) to designate your beneficiaries. If whole percentages are not given, any fractions will be applied to the first listed beneficiary in the applicable category (e.g. primary or contingent).

SECTION 7: CUSTOMER INFORMATION VERIFICATION

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW VANTAGEPOINT IRA — To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

What this means for you? When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you.

If you currently have an existing account with ICMA-RC (401, 457, IRA, RHS) no further verification is needed. Simply check the "Existing Account" box in Section 7.

We also are required to verify your identity through documents that you provide us. **PLEASE EITHER SUBMIT A COPY OF ONE OF THE FOLLOWING DOCUMENTS WITH THIS APPLICATION OR SEND TO US WITHIN 30 DAYS:**

- An unexpired Driver's License
- An unexpired Passport
- Any unexpired government-issued identification evidencing nationality or residence and bearing a photograph

PLEASE SEND THESE DOCUMENTS TO: By Mail: **Vantagepoint Transfers Agents, LLC, P.O. Box 17010, Baltimore, MD 21297-1010**

By fax: **202-962-4601 (Attn: Special Products Team)**

FAILURE TO PROVIDE THESE DOCUMENTS AS REQUIRED BY FEDERAL LAW WILL RESULT IN YOUR ACCOUNT BEING CLOSED WITH ALL INVESTMENTS BEING REDEEMED UPON THE TIME OF CLOSURE AND THE PROCEEDS MAILED TO YOU. ICMA-RC WILL NOT BE RESPONSIBLE FOR ANY TAX CONSEQUENCES RESULTING FROM YOUR FAILURE TO COMPLY WITH THIS REQUEST. PLEASE SEE ICMA-RC'S PRIVACY POLICY AS IT PERTAINS TO THE PATRIOT ACT. IF YOU HAVE ANY QUESTIONS OR CONCERNS, PLEASE CONTACT AN INVESTOR SERVICES REPRESENTATIVE AT 800-669-7400.

SECTION 8: INVESTOR SIGNATURE

Once you have completed this form, please sign and return it along with any initial contribution or rollover check and any applicable *Vantagepoint IRA Rollover Form* or *Vantagepoint IRA Direct Transfer Form* in the enclosed envelope, or mail in your own envelope to Vantagepoint Transfer Agents, P.O. Box 17010, Baltimore, MD 21297-1010. Please keep a copy of the completed application and other forms for your files.

If you live in a community property state (AZ, CA, ID, LA, NV, NM, TX, WA, or WI), you must name your spouse as 100% primary beneficiary unless your spouse waives this right by signing this form.

By signing this application you acknowledge the following:

- A. I am a member of one of the eligible categories for Vantagepoint IRA participation listed below:
1. Participants in plans administered by ICMA Retirement Corporation, regardless of current employment status
 2. Employees of ICMA Retirement Corporation clients
 3. Employees of International City/County Management Association
 4. Employees, officers, directors and trustees of the ICMA Retirement Corporation and affiliated organizations
 5. Spouses, domestic partners, children, parents, and brothers and sisters of eligible depositors above (1,2,3,4)
 6. Employees of state and local governmental entities that are not clients of ICMA Retirement Corporation
 7. Members of state and local public-sector unions
- B. I have received and read the *Vantagepoint Traditional IRA* or *Vantagepoint Roth IRA Custodial Account Agreement* and *Disclosure Statement* and agree to be bound by the terms of the applicable Custodial Agreement of which the application is a part.
- C. I have the right to revoke the IRA during the seven calendar days after my IRA has been established if I have not received the *Vantagepoint Traditional IRA* or *Vantagepoint Roth IRA Custodial Account Agreement* and *Disclosure Statement* at least seven days before my IRA account is established.

To revoke your IRA, you must request the revocation in writing and send or deliver it to:

ICMA-RC
Attention: Workflow Management Team
P.O. Box 96220
Washington, DC 20090-6260

- D. I hereby adopt the Vantagepoint IRA as indicated in Section 1 of this application, appointing MG Trust Company d/b/a Matrix Trust Company, as Custodian, and ICMA-RC to perform the administrative services.
- E. If I elected to add the Automatic Investment Program feature to a Vantagepoint IRA, I hereby authorize and request ICMA-RC, upon receiving instructions from me, to secure payment of amounts to be invested by me by initiating entries to my account at the bank ("Bank") named in Section 5, and to credit, as requested, the proceeds to the Vantagepoint IRA I am adopting in Section 1, without responsibility for the appropriateness thereof or the existence of any further authorization relating thereto. I authorize and request "Bank" to accept any such debit entries initiated by ICMA-RC. I hereby ratify any telephone instructions given pursuant to this authorization and agree that neither the Custodian, ICMA-RC, nor their affiliates will be liable for any losses resulting from unauthorized transactions if they follow reasonable procedures designed to verify the identity of the caller.
- F. If I elected Option #2 "Managed Accounts" in Section 4, I hereby verify that by signing this Account Application I have read and understand: 1) The ICMA-RC *Guided Pathways® Fund Advice and Managed Accounts Investment Advisory Agreement*, dated September 2015 (the "Investment Advisory Agreement"), including the information on Managed Accounts advisory fees and 2) *Part 2A of ICMA-RC's Form ADV for Guided Pathways® and Retirement Readiness Reports Advisory Services*. If I elected Option #2 "Managed Accounts" in Section 2, I also certify that I agree to all the terms and conditions set forth on the enclosed Investment Advisory Agreement and that I am also executing the Investment Advisory Agreement as of the date I sign this Account Application.
- G. ICMA-RC has established required procedures for Internet and telephone transfers that include personal identification numbers, recording of instructions, and written confirmations. In the event I choose to transfer funds by Internet or telephone I agree that neither the Custodian nor ICMA-RC nor their affiliates, will be liable for any loss, cost, or expense for acting upon any Internet or telephone instructions believed by it to be genuine and in accordance with the required procedures.
- H. I hereby agree to indemnify the Custodian and ICMA-RC (their agents, affiliates, successors and employees) from any liability with respect to distributions from my Vantagepoint IRA.
- I. As required by law and under penalty of perjury, I certify that the Social Security Number (Taxpayer Identification Number) I provided for myself is correct.



APPLICATION

1 PERSONAL INFORMATION (ALL INFORMATION MUST BE COMPLETED)

Name (Last, First and Middle Initial)	Mailing Address (Use of P.O. Box also requires Street Address)		
Social Security Number: _____ - _____ - _____	City	State	Zip
Work Phone Number: (_____) _____ - _____	Home Phone Number: (_____) _____ - _____		
Date of Birth: (MM/DD/YYYY) ____/____/____	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single	
THE TYPE OF IRA I AM ESTABLISHING IS A:	Email Address: _____		

Vantagepoint Traditional IRA: 701 _____ **OR** Vantagepoint Roth IRA: 705/706 _____

2 FUNDING YOUR VANTAGEPOINT IRA WITH A DIRECT TRANSFER

I am directly transferring assets from an IRA custodian or from another eligible retirement plan to a Vantagepoint IRA. (Please complete and return enclosed *Vantagepoint IRA Direct Transfer Form*.) *If converting assets from a Traditional IRA directly to a Roth IRA, please complete and return the Vantagepoint Roth IRA Conversion Form.*

3 FUNDING YOUR VANTAGEPOINT IRA WITH A CHECK

I have enclosed a check totaling \$ _____ made payable to **Vantagepoint Transfer Agents**, which is a:

- Contribution amount \$ _____ for 20 ____ (year)
- Contribution amount \$ _____ for 20 ____ (year)
- Rollover check \$ _____ (Please complete and return enclosed Vantagepoint IRA Rollover Form.)

4 ALLOCATION OF CONTRIBUTIONS (SELECT ONLY ONE OF THE FOLLOWING TWO OPTIONS)

OPTION #1 — Input the fund codes and allocation percentages (must total 100%) to show how contributions to your account will be invested. A list of funds and codes can be found on the Investment Options Sheet. Read Section 4 of the form instructions for information on how assets will be invested in the absence of accurate and complete instructions. **Note: Please use whole percentages only.**

ALLOCATION			
CODE	PERCENT	CODE	PERCENT
TOTAL = 100%			

DO NOT COMPLETE THIS SECTION IF YOU ELECTED OPTION 1.

OPTION #2 - Managed Accounts— By electing this option, you agree to have your account professionally managed by ICMA-RC. If you elect this option, do not complete Option #1.

Annual Salary: \$ _____ Desired Retirement Age: _____ Your Annual Desired Retirement Income: \$ _____ or _____%
(100% of current after-tax salary is recommended)

Annual IRA Contribution _____% or \$ _____

Will you receive Social Security Retirement Benefits? Yes No Annual Social Security Retirement Benefit \$ _____ (Please see instructions for further details)

Number of Dependents _____

Will you receive Pension payments outside of Social Security or your 457 or 401 Plan retirement accounts? Yes No. If you select "Yes", please complete A, B and C below:

(A) Age at which Pension Begins _____

(B) Annual Pension Benefit Amount (choose only one) Option A: \$ _____ (In today's dollars) you expect to receive in retirement **Or**
 Option B: _____% of your salary you expect to receive in retirement

(C) Is your Pension subject to a cost of living adjustment (COLA) in retirement? Yes No

Last Name _____ First Name _____ MI _____ Social Security Number _____ IRA Number **7** _____

5 AUTOMATIC INVESTMENT PROGRAM (AIP)

Please provide the month, day and year you want your AIP to occur. (Your bank can take approximately 2–5 business days to process request.)

A. Automatically contribute \$ _____* to my Vantagepoint IRA, on a (check one box):

Monthly basis beginning ____/____/____ (mm/dd/yy).**

Quarterly basis beginning ____/____/____ (mm/dd/yy).**

B. Bank Information: Please complete and attach a copy of a voided check:

Bank Name: _____ Bank Account Number: _____

Bank Telephone Number: (_____) _____ - _____

Type of Bank Account: Checking Account (27) **OR** Savings Account (37)

Bank's 9-digit Routing Number: _____ (normally located in the bottom left hand corner of a check)

The name on your bank account: _____

* Must be a minimum of \$50.00.

** If no date is provided the default will be the 20th of the next month. If the date you choose falls on a holiday, weekend or any day the stock market is closed, your deduction will occur the following business day. Requests to initiate AIP contributions must be received at least 6 business days prior to the designated date, otherwise your AIP payments will begin on the designated date of the following month.

By completion of this section and my signature in Section 8, I hereby authorize ICMA-RC to initiate debit entries to my bank account indicated above at the depository financial institution named above, and to debit the same to such account. This authorization is to remain in full force and effect until ICMA-RC has received notification from me of its termination in such time and manner as to afford ICMA-RC and my bank a reasonable opportunity to act on it.

6 BENEFICIARY DESIGNATION

I hereby designate the person(s) named below as primary beneficiary(ies) to receive payment of the value of my Vantagepoint IRA upon my death. I have attached a separate sheet listing any contingent beneficiary(ies). If there is no primary beneficiary living at the time of my death, the balance is to be distributed to the contingent beneficiary(ies) I have designated on the attached sheet. Payment to beneficiaries will be made according to the rules described in the attached instructions. If you need more space, please attach a separate piece of paper. If you live in a **community property state (AZ, CA, ID, LA, NV, NM, TX, WA, or WI)**, you must name your spouse as 100% primary beneficiary unless your spouse waives this right by signing this form.

PRIMARY BENEFICIARY(IES)

First Name, M.I., Last Name <i>(If trust, please give name, address, and trustee's name.)</i>	Share <i>(whole percentages)</i>	Social Security or Employer Identification Number <i>(for nonindividual beneficiaries)</i>		Date of Birth/Date of Trust	Beneficiary is:		
					Spouse	Other	Trust
1. _____	_____ %	_____ - _____ - _____	_____ / _____ / _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. _____	_____ %	_____ - _____ - _____	_____ / _____ / _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. _____	_____ %	_____ - _____ - _____	_____ / _____ / _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. _____	_____ %	_____ - _____ - _____	_____ / _____ / _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
TOTAL = 100%							

CONTINGENT BENEFICIARY(IES)

First Name, M.I., Last Name <i>(If trust, please give name, address, and trustee's name.)</i>	Share <i>(whole percentages)</i>	Social Security or Employer Identification Number <i>(for nonindividual beneficiaries)</i>		Date of Birth/Date of Trust	Beneficiary is:		
					Spouse	Other	Trust
1. _____	_____ %	_____ - _____ - _____	_____ / _____ / _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. _____	_____ %	_____ - _____ - _____	_____ / _____ / _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. _____	_____ %	_____ - _____ - _____	_____ / _____ / _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. _____	_____ %	_____ - _____ - _____	_____ / _____ / _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
TOTAL = 100%							

Last Name _____ First Name _____ MI _____ Social Security Number _____ IRA Number **7** _____

7 CUSTOMER INFORMATION VERIFICATION

Please read the attached instructions for Section 7 prior to completing this Section. Please select only one:

- I have an existing account with ICMA-RC.
- I have attached a copy of the required identification document.
- I will submit the required identification document to ICMA-RC within 30 days.
- ICMA-RC Representative (must complete each line):
 Type of ID: _____
 ID Number: _____
 Retirement Plans Specialist Name: _____
 Rep Code: _____

Failure to provide this information as required by federal law will result in your account being closed with all investments being redeemed at the time of closure and the proceeds mailed to you. ICMA-RC will not be responsible for any tax consequences resulting from your failure to comply with this request. Please see ICMA-RC's Privacy Policy as it pertains to the Patriot Act. If you have any questions or concerns, please contact an Investor Services Representative at 800-669-7400.

8 INVESTOR SIGNATURE

I acknowledge that I have read and agreed to the disclosure in Section 8 of the instructions.

Your Signature _____ Date: ____/____/____

Your Spouse's Signature _____ Date: ____/____/____
(if resident of a community property state)

Authorized Signature for the Custodian  _____ Title **Manager, Relationship Management**

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VANTAGEPOINT TRADITIONAL & ROTH IRA ACCOUNT

ADDITIONAL MANAGED ACCOUNTS INFORMATION INSTRUCTIONS

Only complete and return this page if you selected Managed Accounts (Option #2) in the “Allocation of Contributions” section on Page 1 of this form and wish to further personalize your enrollment in Managed Accounts.

Although this additional information is not required to enroll you in Managed Accounts, we strongly recommend you provide as much information about yourself as possible to help ICMA-RC provide you with a more personalized level of account management.

Your Spouse or Partner Information provided in Section 1: Including information on your Spouse’s or Partner’s salary will increase your household retirement income and retirement income goals, which has a direct impact on the advice you will receive. If you elect to include your spouse or partner, it is important that you provide information on his/her Social Security benefits, Pensions, and Outside Accounts.

Social Security Retirement Benefits: Please indicate whether your spouse or partner will expect to receive Social Security retirement benefits. If you select “Yes” or do not select either box, we will include an estimate of Social Security benefits.

Annual Social Security Retirement Benefit – If no Annual Social Security Retirement Benefit is provided, Managed Accounts will generate an estimated amount based on your spouse or partner’s current salary. If you wish to have Social Security benefits included in the account management for a retired spouse or partner, you must provide an estimated annual dollar amount.

Pension:

- *Annual Pension Benefit Amount*, please choose only one of the two below options:

Option #1 – Enter the annual benefit amount your spouse or partner expects to receive in retirement in today’s dollars.

OR

Option #2 – Enter the percentage of salary your spouse or partner expects to receive in retirement.

- Select “Yes” to “Is their pension subject to a cost of living adjustment (COLA)?”, if your spouse or partner’s annual pension benefit will increase after retirement.

Outside Accounts Information provided in Section 2:

- Annual Outside Account contributions will be considered as Pre-Tax for all account types except for Roth IRA, Taxable Savings, and Taxable Brokerage which will be considered Post-Tax.
- Please designate the asset allocation for the listed outside accounts. If no asset allocation is provided or if the asset allocation provided does not total 100%, the asset allocation will initially be designated as 55% U.S. Large Cap Stocks, 5% U.S. Small Cap Stocks, and 40% Bonds.
- To provide information on more than two outside accounts, (1) write “see attached sheet” in the section and (2) attach and sign a separate piece of paper with your name, plan number, Social Security Number, and additional outside account information.

Once you have completed this page, sign it and submit it to your employer along with the enrollment form.

A confirmation package will be mailed to you following receipt, in good order, of all necessary documentation. This package will confirm your personal and financial information and provide you with your wealth forecast and information on how ICMA-RC will be managing your account.

To update your information, including the asset allocation for your outside accounts, at any time after your Managed Accounts enrollment, go online to www.icmarc.org or call Investor Services at 800-669-7400 to request a *Guided Pathways® Managed Accounts Update Form*.



ADDITIONAL MANAGED ACCOUNTS INFORMATION

Only complete and return this page if you selected Managed Accounts (Option #2) in the "Allocation of Contributions" section on the Vantagepoint Traditional and Roth IRA Application and wish to further personalize your enrollment in Managed Accounts.

1 YOUR SPOUSE OR PARTNER INFORMATION

Please read the instructions for completing this form for important information about including Spouse or Partner information.

Spouse or Partner Name (Last, First, Middle Initial): _____

Date of Birth: ____/____/____ Male Female Desired Retirement Age: ____ Current Annual Salary \$ _____

Your Spouse or Partner's Annual Desired Retirement Income (after-tax) \$ _____ (100% of current after-tax salary is recommended)

Will your Spouse or Partner receive Social Security Retirement Benefits? Yes No

Annual Social Security Retirement Benefit \$ _____ (Please see instructions for further details)

Spouse or Partner's Pension

(A) Age at which Pension Begins: _____

(B) Annual Pension Benefit Amount (choose only one):

Option #1: \$ _____ (In today's dollars) your spouse/partner expects to receive in retirement, OR

Option #2: _____% of your spouse/partner's salary he/she expects to receive in retirement

(C) Is this Pension subject to a cost of living adjustment (COLA) in retirement? Yes No

2 OUTSIDE ACCOUNT INFORMATION

OUTSIDE ACCOUNT 1: Account Owner: You or Your Spouse/Partner

Account Type (Check only one): 401(k) 401(a) 403(b) 457 Traditional IRA Roth IRA Taxable Savings Taxable Brokerage

Account Name: _____

Total Account Balance \$ _____ You or Your Spouse/ Partner Annual Contribution \$ _____ Employer Annual Contribution* \$ _____ *If applicable

Asset Allocation Details

U.S. Large Cap Stocks % U.S. Small Cap Stocks % International Stocks % Bonds % Cash % Total = 100%

If no information is provided or the asset allocation does not total 100%, the asset allocation will be defaulted to 55% U.S. Large Cap Stocks, 5% U.S. Small Cap Stocks and 40% Bonds.

OUTSIDE ACCOUNT 2: Account Owner: You or Your Spouse/Partner

Account Type (Check only one): 401(k) 401(a) 403(b) 457 Traditional IRA Roth IRA Taxable Savings Taxable Brokerage

Account Name: _____

Total Account Balance \$ _____ You or Your Spouse/ Partner Annual Contribution \$ _____ Employer Annual Contribution* \$ _____ *If applicable

Asset Allocation Details

U.S. Large Cap Stocks % U.S. Small Cap Stocks % International Stocks % Bonds % Cash % Total = 100%

If no information is provided or the asset allocation does not total 100%, the asset allocation will be defaulted to 55% U.S. Large Cap Stocks, 5% U.S. Small Cap Stocks and 40% Bonds.

3 SIGNATURE

Participant Signature _____

Date: ____/____/____



VANTAGEPOINT IRA ROLLOVER FORM INSTRUCTIONS

Use this form to reinvest assets into a Vantagepoint IRA that you received from a (1) Traditional (including “Conduit”) or Roth IRA at another custodian or (2) another eligible retirement plan (401 defined contribution, 401 defined benefit, 457(b), 403(a) or 403(b)) to a Vantagepoint Traditional IRA. (If you are a 401 plan participant born prior to 1936, you may want to consider establishing a separate Traditional IRA (“Conduit IRA”) for your retirement plan assets. You should speak with a tax or financial adviser to see if this would enable you to take advantage of special income tax rules when you take a distribution from your account.)

The following types of retirement plan distributions cannot be moved to a Traditional IRA:

Payments Spread Over Long Periods of Time: You cannot move a payment if it is part of a series of equal (or almost equal) payments made at least once a year and lasting for: your lifetime (or your life expectancy), your lifetime and your beneficiary’s lifetime (or life expectancies), or a period of 10 years or more.

Required Minimum Payments: Beginning in the year you reach age 70½ (or retire, if later), a certain portion of your payment from your retirement plan cannot be moved because it is a required minimum payment that must be paid to you. However, once you have received the required minimum payment for a particular year, you may move the remainder of your retirement plan account to a Traditional IRA. (You will be required to continue receiving the required minimum payment from your IRA.)

Emergency or Hardship Withdrawals: Emergency (from a 457 plan) or hardship (from a 401 or 403(b) plan) withdrawals cannot be moved to a Traditional IRA.

You may find it helpful to detach the form and refer back to these instructions while completing the form. Please print legibly in blue or black ink. Please call Investor Services at 800-669-7400 if you need any assistance in completing this form.

Please return the completed form along with your *Vantagepoint Traditional & Roth Account Application* (if you are establishing a new Vantagepoint IRA) and check made payable to **Vantagepoint Transfer Agents** in the enclosed envelope, or mail to: **Vantagepoint Transfer Agents, P.O. Box 17010, Baltimore, MD 21297-1010.**

IMPORTANT ROLLOVER INFORMATION

You must complete the rollover within 60 days of receiving the assets to avoid paying income taxes and a potential early withdrawal penalty. If you initially withdrew assets from your Traditional or Roth IRA for a first time home purchase, but did not use the funds for that purchase, you have 120 days from the date you received the money to complete the rollover. You may not roll over the same IRA assets more than once within one 12-month period. For this reason, if you have not already received the assets, you may wish to move your IRA assets through a direct transfer using the *Vantagepoint IRA Direct Transfer Form*.

SECTION 1: PERSONAL INFORMATION

Please complete this section carefully. All the information in this section is required in order to complete your rollover.

Please indicate if you have an existing Vantagepoint Traditional, Vantagepoint Roth or Vantagepoint Conduit IRA and if so, please complete the IRA account type number in the spaces provided (the IRA account type number is listed on the Vantagepoint IRA statements). If you have not yet established a Vantagepoint IRA, you must return a completed *Vantagepoint Traditional & Roth IRA Account Application*.

SECTION 2: ACCOUNT YOU ARE ROLLING OVER

- A. Type of Account:** Please indicate the type of your existing account. If you wish to move assets from an existing IRA to a Vantagepoint IRA, your existing IRA must be the same type as the Vantagepoint IRA to which you are rolling. If you wish to roll over multiple accounts, please complete a separate Vantagepoint IRA Rollover Form for each rollover.
- B. Amount of Rollover:** Indicate the amount of your enclosed rollover check. Checks should be made payable to Vantagepoint Transfer Agents. Please include your Social Security Number on the check.
- C. One-Time Rollover Investment Allocation:** This allocation will only be used to invest this particular rollover. Future rollovers will be invested according to the instructions provided on future *Vantagepoint IRA Rollover Forms*. **If you do not specify a one-time rollover allocation, your entire rollover will be invested in Dreyfus Cash Management Fund.** In addition, if the allocation total does not add up to 100 percent or if an invalid fund is indicated, the amount that cannot be properly allocated will be invested in Dreyfus Cash Management Fund. Investment in a money market fund is neither insured nor guaranteed by the U.S. Government. There is no assurance that a money market fund will be able to maintain a stable net asset value of \$1.00 per share. Please read the prospectus carefully prior to investing any money.

PLEASE REFER TO THE IRA FUNDS INVESTMENT OPTIONS SHEET FOR A LIST OF FUNDS AND CODES

IMPORTANT: IF YOU ARE ENROLLED IN MANAGED ACCOUNTS for your Vantagepoint IRA account, you should not designate an allocation for this rollover contribution. All contributions will be invested in the funds selected under Managed Accounts.

SECTION 3: SIGNATURE

Please sign, date, and return the form along with your *Vantagepoint Traditional & Roth IRA Account Application* if you are establishing a new Vantagepoint IRA.

SECTION 4: ICMA-RC REPRESENTATIVE INFORMATION

Do not complete. Your ICMA-RC representative will complete this section.



VANTAGEPOINT IRA ROLLOVER FORM

Use this form to reinvest assets into a Vantagepoint IRA that you received from a (1) Traditional IRA (including "Conduit") or Roth IRA at another custodian or (2) another eligible retirement plan (401 defined contribution, 401 defined benefit, 457(b), 403(a) or 403(b)).

Please Note: Roth IRAs can accept rollovers from Roth IRAs, 401 defined contribution, 401 defined benefit, 457(b), or 403(b) plans and conversion assets from Traditional or Conduit IRAs. Traditional IRAs can accept transfers/rollovers from other Traditional IRAs, Conduit IRAs, SEP IRAs, SIMPLE IRAs (after two years of participation), or from 401 defined contribution, 401 defined benefit, 457(b), 403(a) or 403(b) plans (except for Designated Roth Accounts).

1 PERSONAL INFORMATION (ALL INFORMATION MUST BE COMPLETED)

Name (Last, First, Middle Initial) _____

Daytime Phone Number: (_____) _____ - _____

Social Security Number: _____ - _____ - _____

Evening Phone Number: (_____) _____ - _____

Email Address: _____

My existing Vantagepoint IRA is a:

Traditional IRA **7 0 1** **OR** Conduit IRA **7 0 3** **OR** Roth IRA **7 0 5** **7 0 6**

OR

I am opening a new Vantagepoint Traditional or Roth IRA (please return a completed *Vantagepoint Traditional & Roth IRA Account Application*)

2 ACCOUNT YOU ARE ROLLING OVER

A. The type of account I am rolling over from is a: Traditional IRA **OR** Roth IRA **OR** 457(b) plan **OR** 403 plan **OR** 401 defined contribution plan **OR** 401 defined benefit plan **OR** Other _____

B. I am including a rollover check for \$ _____ made payable to **Vantagepoint Transfer Agents**.

C. Allocate your rollover assets in percentages among the available fund choices. This allocation will only be used to invest this particular rollover. Future rollovers will be invested according to the instructions provided on future *Vantagepoint IRA Rollover Forms*. **Please see Section 2 of the Instructions for additional details.**

Use whole percentages (e.g., 50 percent, not 33 $\frac{1}{3}$ percent). Do not use fixed dollar amounts. Fill in the boxes at right with codes of the fund(s) in which you want to invest. Please refer to the *IRA Funds Investment Options Sheet* for a list of funds and codes.

ALLOCATION			
CODE	PERCENT	CODE	PERCENT
TOTAL = 100%			

IMPORTANT: IF YOU ARE ENROLLED IN MANAGED ACCOUNTS for your Vantagepoint IRA account, you should not designate an allocation for this direct transfer contribution. All contributions will be invested in the funds selected under **Managed Accounts**.

3 SIGNATURE

I hereby attest that I have received and read the applicable prospectus for my investments and that my rollover is being performed within the time frame prescribed by law.

As required by law and under penalty of perjury, I certify that the Social Security Number (Taxpayer Identification Number) I provided for myself is correct.

Your Signature _____

Date: ____/____/____

4 ICMA-RC USE ONLY

Retirement Plan Specialist Name _____

Rep Code _____



VANTAGEPOINT TRADITIONAL & ROTH IRA ACCOUNT

VANTAGEPOINT IRA DIRECT TRANSFER FORM INSTRUCTIONS

Use this form to authorize ICMA-RC to receive a transfer (1) of assets directly from another Traditional IRA custodian or other eligible retirement plan (457(b), 401(a), 403(a) or 403(b) (except for Designated Roth Account assets) to a Vantagepoint Traditional IRA or (2) of assets directly from another Roth IRA custodian or from a Designated Roth Account to a Vantagepoint Roth IRA or (3) of assets between similar Vantagepoint IRAs types, without you having receipt of the funds. You may find it helpful to detach the form and refer back to these instructions while completing the form. Please print legibly in blue or black ink.

Please call Investor Services at 800-669-7400 if you need any assistance in completing this form, or if you wish to transfer assets to an ICMA-RC account other than a Vantagepoint IRA.

Please return the completed form along with your Vantagepoint Traditional & Roth Account Application (if you are establishing a new Vantagepoint IRA) to: **Vantagepoint Transfer Agents, P.O. Box 17010, Baltimore, MD 21297-1010.**

SECTION 1: PERSONAL INFORMATION

All the information in this section is needed in order to complete your transfer.

SECTION 2: TRANSFERRING TO

Please indicate the existing Vantagepoint Traditional, Vantagepoint Retirement Plan Rollover (Conduit) or Vantagepoint Roth IRA you wish to transfer to and complete the IRA account type number in the spaces provided (the IRA account type number is listed on the Vantagepoint IRA statement). If you have not yet established a Vantagepoint IRA, please return a completed *Vantagepoint Traditional & Roth IRA Account Application* with this form.

SECTION 3: TRANSFERRING FROM

Please indicate the type of account from which you wish to transfer (non-ICMA-RC account types are listed in the column on the left and existing ICMA-RC accounts are in the column on the right).

If you are transferring non-deductible or after-tax contributions to a Vantagepoint Traditional IRA, it is your responsibility to keep track of the amount of these non-deductible or after-tax contributions, and report them to the IRS on the applicable forms. This will enable you to determine the non-taxable amount of any future distribution.

For transfers from non-ICMA-RC accounts only

- 1) Return a copy of your current account statement with this form.
- 2) Check with the other financial institution to determine if they require any additional forms to process your liquidation and transfer.

SECTION 4: TRANSFER INSTRUCTIONS TO FORMER TRUSTEE/CUSTODIAN

The sending institution should include your Social Security number and name on all checks or wire instructions.

SECTION 5: TRANSFER AMOUNT

Please indicate whether you wish to transfer the total (lump sum) value of your account or only a portion of your account. If you elect to transfer a portion of your account, please indicate the dollar amount you wish to transfer and the funds from which you wish assets to be taken.

SECTION 6: INVESTMENT ALLOCATION

You must complete this section even if the IRA from which you are transferring is a Vantagepoint IRA.

This allocation will only be used to invest this particular transfer. Future transfers will be invested according to the instructions provided on future *Vantagepoint IRA Direct Transfer Forms*. **If you do not specify a one-time transfer allocation, your entire transfer will be invested in Dreyfus Cash Management Fund.** In addition, if the allocation total does not add up to 100 percent or if an invalid fund is indicated, the amount that cannot be properly allocated will be invested in Dreyfus Cash Management Fund. Investment in a money market fund is neither insured nor guaranteed by the U.S. Government. There is no assurance that a money market fund will be able to maintain a stable net asset value of \$1.00 per share. Please read the prospectus carefully prior to investing any money.

IMPORTANT: IF YOU ARE ENROLLED IN MANAGED ACCOUNTS for your Vantagepoint IRA account, you should not designate an allocation for this direct transfer contribution. All contributions will be invested in the funds selected under Managed Accounts.

SECTION 7: INVESTOR SIGNATURE

Please sign and date the form to authorize the liquidation and transfer of your account assets to a Vantagepoint IRA and mail to Vantagepoint Transfer Agents, P.O. Box 17010, Baltimore, MD 21297-1010. We will forward this form to your current custodian/trustee and track your liquidation and transfer for you. Please check with your existing custodian/trustee to determine if a signature guarantee or any additional forms are required to process this liquidation and transfer. (The lack of a required signature guarantee or required existing custodian/trustee forms will delay your transfer. Signature guarantees can be obtained at most banks.) A notary public signature does not qualify as a signature guarantee.

SECTION 8: CUSTODIAN AUTHORIZATION

Do not complete. This verifies to your existing IRA custodian that MG Trust Company d/b/a Matrix Trust Company maintains an IRA account for you.

SECTION 9: ICMA-RC REPRESENTATIVE INFORMATION

Do not complete. Your ICMA-RC representative will complete this section.



VANTAGEPOINT IRA DIRECT TRANSFER FORM

1 PERSONAL INFORMATION (ALL INFORMATION MUST BE COMPLETED)

Name (Last, First, Middle Initial)	Daytime Phone Number: (_____) _____ - _____
Social Security Number: _____ - _____ - _____	Evening Phone Number: (_____) _____ - _____
Email Address: _____	

2 TRANSFERRING TO

The Vantagepoint IRA I wish to transfer to is:

Traditional IRA **7 0 1** _____ **OR** Conduit IRA **7 0 3** _____ **OR** Roth IRA **7 0 5** _____ **7 0 6** _____

OR

I am opening a new Vantagepoint Traditional/Conduit or Roth IRA (please return a completed *Vantagepoint Traditional and Roth IRA Account Application*).

You may transfer assets from another Traditional/Conduit IRA account or other eligible retirement plan (except for Designated Roth Account assets) to a Vantagepoint Traditional IRA or from another Roth IRA or a Designated Roth Account to a Vantagepoint Roth IRA.

3 TRANSFERRING FROM

I am requesting a liquidation and transfer of my assets **from** my: (Check only one box below)

<p>Non-ICMA-RC Account</p> <p><input type="checkbox"/> Non ICMA-RC 457(b) plan account, OR</p> <p><input type="checkbox"/> Non ICMA-RC 401 plan account, OR</p> <p><input type="checkbox"/> Non ICMA-RC 403 plan account, OR</p> <p><input type="checkbox"/> Non ICMA-RC Traditional IRA, OR</p> <p><input type="checkbox"/> Non ICMA-RC Conduit IRA, OR</p> <p><input type="checkbox"/> Non ICMA-RC Roth IRA account, OR</p> <p><input type="checkbox"/> Non ICMA-RC Simple IRA account, OR</p> <p><input type="checkbox"/> Non ICMA-RC Designated Roth Account, OR</p> <p><input type="checkbox"/> Non ICMA-RC Other: _____</p>	<p>Existing ICMA-RC IRA</p> <p><input type="checkbox"/> Existing Vantagepoint Traditional IRA 7 0 1 _____, OR</p> <p><input type="checkbox"/> Existing Vantagepoint Conduit IRA 7 0 3 _____, OR</p> <p><input type="checkbox"/> Existing Vantagepoint Roth IRA 7 0 5 _____, OR</p> <p>Existing ICMA-RC Retirement Plan Account (401 or 457) Do not use this form. Please request a <i>401 or 457 Benefit Withdrawal Packet</i> and complete the form in the "Transferring to a Vantagepoint Traditional IRA" section.</p>
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For Non-ICMA-RC Accounts Only: Please complete the section below and return a copy of your current account statement with this form to assist us in identifying the assets you are transferring.

Name of Existing Trustee/Custodian: _____

Name of Existing Employer Plan (if applicable): _____

Phone Number of Existing Trustee/Custodian: (_____) _____ - _____

Address of Existing Trustee/Custodian: _____

Existing Plan/IRA Account Number: _____

4 TRANSFER INSTRUCTIONS TO FORMER TRUSTEE/CUSTODIAN

By Check: Please make all checks payable to **Vantagepoint Transfer Agents FBO, (Individual's Name and Social Security Number)** and mail to:
Vantagepoint Transfer Agents, P.O. Box 17010, Baltimore, MD 21297-1010

By Wire: Please send wires payable to:
Vantagepoint Transfer Agents, M&T Bank, FBO (Individual's Name and Social Security Number), ABA #022000046, Account #89559029

5 TRANSFER AMOUNT

I wish to liquidate and transfer: My entire account OR The following portion of my account in the manner specified below:

Fund Name	Dollar Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Please attach a separate sheet if additional instructions are needed.

6 INVESTMENT ALLOCATION

I wish to invest my transferred assets in the following funds:

Allocate your transferred assets in percentages among the available fund choices. This allocation will only be used to invest this particular transfer. Future transfers will be invested according to the instructions provided on future Vantagepoint IRA Direct Transfer Forms. If you do not specify a one-time transfer allocation, your entire transfer will be invested in Dreyfus Cash Management Fund. In addition, if the allocation total does not add up to 100 percent or if an invalid fund is indicated, the amount that cannot be properly allocated will be invested in Dreyfus Cash Management Fund.

SEE THE IRA FUNDS INVESTMENT OPTIONS SHEET FOR FUND CODES

ALLOCATION			
CODE	PERCENT	CODE	PERCENT
TOTAL = 100%			

Use whole percentages (e.g., 50 percent, not 33 1/3 percent). Do not use fixed dollar amounts. Fill in the boxes at right with codes of the fund(s) in which you want to invest.

IMPORTANT: IF YOU ARE ENROLLED IN MANAGED ACCOUNTS for your Vantagepoint IRA account, you should not designate an allocation for this direct transfer contribution. All contributions will be invested in the funds selected under Managed Accounts.

7 INVESTOR SIGNATURE

I authorize and request the custodian/trustee of my existing account in Section 3 to liquidate and transfer my existing account to my Vantagepoint IRA.

I hereby agree to indemnify the current custodian (its agents, affiliates, successors and employees) of my IRA and MG Trust Company d/b/a Matrix Trust Company, ICMA-RC and their affiliates from any and all liability resulting from my failure to meet any IRS requirements.

I hereby attest that I have received and read the applicable prospectus for the investments for which I have provided allocation instructions.

As required by law and under penalty of perjury, I certify that the Social Security Number (Taxpayer Identification Number) I provided for myself is correct.

Your Signature _____ Date: ____/____/_____

SIGNATURE GUARANTEE

Please check with your current custodian to determine if a signature guarantee is required to process this transfer. The lack of a required signature guarantee may delay this transaction. Signature guarantees are available at most banks

Authorized Officer to Place Stamp Here

Guarantor Signature _____ Title: _____

Date: ____/____/_____

8 CUSTODIAN AUTHORIZATION (DO NOT COMPLETE)

MG Trust Company d/b/a Matrix Trust Company hereby attests that it maintains an IRA for the above named individual, and will accept the above referenced transfer of assets.

Authorized Signature for the Custodian  Title: **Manager, Relationship Management**

9 ICMA-RC USE ONLY (DO NOT COMPLETE)

Retirement Plan Specialist Name _____ Rep Code _____ Type of ID Verified (Drivers License, Passport, etc.) _____