

Retirement Plan Manager Application

Use this form to grant or terminate a user's access to Invesco Retirement Plan Manager (RPM) or to add or update bank account information for RPM.

- The Plan's sponsoring employer must sign in section 5.
- Use a separate form for each plan.

PLEASE USE BLUE OR BLACK INK	PLEASE PRINT (CLEARLY IN BLOCK CAPITAL LETTERS
1 Plan Information		
Plan Type: <i>(Select one.)</i> ☐ SIMPLE ☐ SEP ☐ Solo 401(k) ☐ 401(k) ☐ Profit S	haring ☐ Money Purchase F	Plan □ 403(b)
Plan Name		
Invesco Plan ID	Plan's Tax Identification Number	
Name of Employer/Plan Administrator		
Mailing Address		
City	State	ZIP
Primary Phone Number		
☐ Check this box if this is a new address for the employer. ☐ Check this box if this is a new Plan Contact.	Please update the plan addre	ess of record.

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2 | Establish RPM User Access

The following individuals are to be granted RPM access. RPM permits the viewing of financial information at the plan level. Access also allows submission of contributions via the internet.

- RPM is intended for use by the employer, plan administrator, plan trustee or TPA. Participants can access their account(s) online at invesco.com/us.
- An RPM user name will permit an individual to access plan and participant information, submit and modify census data, submit contributions via the internet, modify future investment elections, and generate reports. Therefore, RPM access should only be granted to financial advisors if they are functioning as the TPA.
- Once access is established, each user will receive a user ID and default password at the email address provided below in three to five business days after the form has been received by Invesco Investment Services, Inc. (IIS).

Note: All fields are required unless otherwise noted.

1. Full Name	
Email Address	Relationship to Plan
Primary Phone Number	Existing RPM User ID (If applicable)
2. Full Name	
Email Address	Relationship to Plan
Primary Phone Number	Existing RPM User ID (If applicable)
3. Full Name	
Email Address	Relationship to Plan
Primary Phone Number	Existing RPM User ID (If applicable)
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3 | Terminate RPM User Access

The following individual(s) are to be removed from RPM access for the plan referenced in section 1. The Plan's sponsoring employer may also call an Invesco Client Services representative at the phone number referenced in section 6 to request their user name be removed.

1. Full Name (Please print)		
RPM User ID		
2. Full Name (Please print)		
RPM User ID		

4 | Bank Account Information For Contribution Funding

RPM contributions will be funded via the Automated Clearing House (ACH) Network or by mailing a check. To fund your plan contributions through the ACH Network, please provide bank account information below. By completing this section and signing this form, you, on behalf of the plan, are agreeing to the terms and conditions applicable to ACH transactions set forth in section 5. IIS must receive this form at least five business days prior to the submission of your initial ACH contribution.

Note:

- Only one bank account may be on file and it must be a participating member of the ACH network.
- Bank account must be a checking/demand deposit account. Savings accounts may not be used with RPM.
- Temporary or starter checks are not acceptable.
- If a voided company or corporate check is provided by the employer, plan administrator or plan trustee and the name on the bank account is different from the plan name, then a letter from that financial institution verifying the authorized signers must be included. **Important:** A verification letter from the financial institution will not be required for TPAs adding their own company bank instructions.
- Signature of all authorized signers of the bank account is required in section 5 if different from the employer's authorized signers named in section 1.
- Bank account information used for making plan contributions cannot be used to receive redemption proceeds from a
 participant's account.

Name(s) on Bank Account		
Pay to the order of	\$	
Please tape your voided check here.		
Routing Number	Account Number	

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5 | Authorization and Signature(s) (Please sign and date below.)

RPM User Authorization:

I authorize and direct IIS to grant or terminate the individuals identified in section 2 or 3, respectively, to the Plan's accounts via RPM. I understand that an RPM user name will permit an individual to access plan and participant information, submit and modify census data, submit contributions via the internet, modify future investment elections and generate reports. Therefore, RPM access should only be granted to financial advisors if they are functioning as the TPA.

ACH Authorization:

On behalf of the Plan, I authorize IIS to initiate drafts via the ACH Network from the bank account identified in section 4, pursuant to instructions received from the employer, plan sponsor, plan trustee, TPA, or appropriate officer and certify that the individual(s) in this capacity have the authority to provide such instructions. I understand that all purchases of fund shares pursuant to these instructions are subject to the terms of the prospectus(es) of the applicable funds. I understand that the amount drafted for the Plan's contribution funding will be set forth in the instructions so provided and the timing of any such draft will be dependent upon when the instructions are received by IIS. I agree that the rights of IIS with respect to each draft shall be the same as if it were drawn directly by the account owner or company, as applicable. I agree that, should any draft be dishonored, with or without cause, intentionally or inadvertently, IIS shall have no liability whatsoever with respect to any order for the purchase of fund shares which was to have been settled via such draft. I further agree that IIS may delay the payment of redemption proceeds with respect to fund shares purchased via such a draft for a period of up to ten (10) days in order to enable IIS to confirm that the draft has cleared. This authorization shall remain in full force and effect and IIS may continue to honor instructions to draft the referenced account until notification revoking this authority is provided at least seven business days prior to a scheduled draft. Notice should be provided to Invesco's Client Services at 866 690 0193 or in writing to: IIS, PO Box 219078, Kansas City, MO 64121.

In consideration of IIS acting on instructions and processing transactions as described above, I agree to indemnify and hold harmless Invesco Investment Services, Inc., its parents, affiliates, each of their respective employees, officers, trustees, directors, successors, assigns, and each of the Invesco Funds from and against any and all actions, suits, claims, costs, losses, liabilities, damages and expenses of any kind or character that may be incurred directly or indirectly as a result of your actions taken in accordance with the instructions and other provisions set forth herein.

Employer/Plan Administrator Authorization:

All authorized signers must sign below. Please attach an additional page if there are additional signers.

Employer/Plan Administrator Signature*	Date (mm/dd/yyyy)			
X				
Name (Please print)	Title			
Additional Employer/Plan Administrator Signature* (if applicable)	Date (mm/dd/yyyy)			
X				
Name (Please print)	Title			
Additional Authorized Bank Account Signature(s): Signature of authorized signer(s) of the bank account is required, if different from the employer's authorized signer(s) named in section 1. Please attach an additional page if there are additional bank account authorized signers.				
Signature*	Date (mm/dd/yyyy)			
x				
Name (Please print)	Title			

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6 | Mailing Instructions

Please send completed and signed form to one of the addresses detailed below.

(Direct Mail) (Overnight Mail)

Invesco Investment Services, Inc. Invesco Investment Services, Inc.

P.O. Box 219078 801 Pennsylvania Ave

Kansas City, MO 64121-9078 Suite 219078

Kansas City, MO 64105-1307

For additional assistance please contact an Invesco Client Services representative at 866 690 0193, weekdays, 7:30 a.m. to 5 p.m. Central Time.

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