

## My Personal Information (please print with black ink)

Name (Last)	(First)	(MI)	Phone Number
_____	_____	_____	(____)____-____
Street Address	Email Address		
_____	_____		
City	State	Zip	Country
_____	_____	_____	_____
Social Security Number	Date of Birth	Gender	
____-____-____	____/____/____	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Expected Retirement Age	Original Date of Employment	Marital Status	
_____	____/____/____	<input type="checkbox"/> Single <input type="checkbox"/> Married	
If you were rehired, complete these dates:		NOTE: The email address you submit will be used for services provided by the Principal Financial Group®, unless otherwise elected. We will not provide your email to third parties. For more information, see your privacy policy at principal.com.	
Date of Termination: ____/____/____		Date of Rehire: ____/____/____	

## My Investment Choices

Please elect **ONE OF THE TWO CHOICES** by checking the box(es) and completing the applicable information for your choice.  
(If you are already enrolled and want to make changes to how future contributions are directed, visit [principal.com](http://principal.com) or call 1-800-547-7754.)

### CHOICE A: Do-it-for-Me — Principal Strategic Asset Management (SAM) Portfolio<sup>1</sup>

I understand contributions will be directed within the Principal Strategic Asset Management (SAM) Portfolio based on the portfolio I elect that most closely matches my risk profile. I have read the applicable information enclosed regarding the SAM Portfolios. *I do not want to make another investment election at this time, and this will be treated as my investment option direction.*

☐ SAM Balanced R3 Portfolio

(Please refer to the Investment Option Summary for more information. Also, be sure to complete the Investor Profile Quiz.)

The SAM Portfolios are diversified across a selection of asset classes, styles, and investment managers to help meet an investor's risk level and investment objectives. Review your individual life situation at least annually or as significant events occur to be sure the portfolio you elect continues to match your risk level.

► If you've completed this section, move ahead to **My Signature!**

### CHOICE B: Do-it-Myself — Choose your own asset allocation

☐ I elect the following investment options (enter percentages below.)

(Please refer to the Investment Option Summary for more information.)

Balanced/Asset Allocation

## My Investment Choices

NEW  
CONTRIBUTIONS

### Multiple Sub-Advisors

SAM Balanced R3 Portfolio

%

TOTAL of all lines:

100 %

Your investment election will be effective when it is received in the Corporate Center of The Principal by the close of market. Forms received after the close of market will be processed on the next open market date. If no investment election is received, or contributions are received prior to your investment election, contributions will be directed according to the plan's default investment option(s). For details on the plan's default, please ask your employer for information prior to enrolling in the plan.

► *If you've completed this section, move ahead to **My Signature!***

## My Signature

Please sign, then give this completed form to your benefits representative.

This agreement applies to amounts earned until changed by me in writing. I understand my plan sponsor may reduce my contributions only when required to meet certain plan limits. I will review all statements regularly and report any discrepancy to The Principal immediately.

Signature

Date

X

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Disclosures

Your plan sponsor has chosen to make available to you all of the investment options listed on this enrollment form.

Insurance products and plan administrative services are provided by Principal Life Insurance Company, a member of the Principal Financial Group® (The Principal®), Des Moines, IA 50392.

- 1 The "Do-It-For-Me" section is designed just to give you a faster way of enrolling in the retirement plan and selecting a professionally managed investment portfolio. For your convenience, the Strategic Asset Management (SAM) Portfolios are available as another way to use an asset allocation strategy that may be right for you. There are other investment options available under the retirement plan, and you should review them all. Reviewing all investment options can help you decide whether you wish to design your own mix of investment options. If you want to elect a SAM Portfolio, please only elect ONE. If you would rather choose your own mix of investment options, you may do so by completing the "Do-It-Myself" section of this form or visiting [principal.com](http://principal.com).

Information in this enrollment form/worksheet should not be construed as investment advice.

This workbook content is current as of the production date noted below. If there are any discrepancies between this information and the legal plan document, the legal plan document will govern. If the production date is older than three months or has passed a quarter end, you should contact your plan sponsor or log in to [principal.com](http://principal.com) for current retirement plan and investment option information. The member companies of the Principal Financial Group® prohibit the manipulation of this workbook content. If your plan sponsor elects to provide this workbook electronically, The Principal® is not responsible for any unauthorized changes.



You may designate your beneficiary either online at [principal.com](http://principal.com) or by completing the below form. Follow these steps to name your beneficiary(ies): 1) Complete the Personal Information section. 2) Select one of the beneficiary choices (Choice A, Choice B, or Choice C). See Page 3 for more detailed instructions and examples. 3) Name your beneficiary(ies) on Page 2. 4) Sign the form at the bottom of Page 2. 5) Return the beneficiary form to your plan sponsor and keep a copy for your records. Do not return this form to Principal Life Insurance Company.

Contract/Plan ID Number 5-24405  
CTD01304

## Personal Information (please print with black ink)

Name (Last)	(First)	(MI)	Phone Number
_____	_____	_____	(____) ____ - _____
Address			Email Address
_____			_____
City	State	Zip	Social Security Number
_____	_____	_____	_____ - ____ - _____

## My Beneficiary Choices (pick one)

### ☐ **Choice A: Single Participant** (includes widowed, divorced or legally separated)

I am not married and designate the individual(s) named on Page 2 of this form to receive death benefits from the plan. I understand if I marry, this designation is void one year after my marriage (some plans specify a shorter period).

### ☐ **Choice B: Married with Spouse as Sole Beneficiary** (spouse's signature is not required)

I am married and designate my spouse named on Page 2 of this form to receive all death benefits from the plan/contract.

### ☐ **Choice C: Married with Spouse Not as Sole Primary Beneficiary** [Spouse's signature REQUIRED — review the Qualified Preretirement Survivor Annuity (QPSA) consent at the end of this form.]

I am married and designate the individual(s) named on Page 2 of this form to receive death benefits in accordance with the plan provisions. Note: If you are married and do not name your spouse as the sole primary beneficiary, your spouse must sign the consent below. The signature must be witnessed by a plan representative or notary public. If you are younger than age 35, your spouse must again consent to this in writing at the start of the plan year in which you reach age 35 for this designation to remain effect.

Notice to spouse: In signing, you are also verifying that you have read the QPSA notice and consent on the last page of this form.

☐ By checking this box, I agree only to the beneficiary designation on this form. My spouse cannot change the beneficiary without my consent.

**Spouse's Signature (must be witnessed by plan representative or notary public)**

**Date**

X \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**The spouse appeared before me and signed the consent on:**

**Plan Representative or Notary Public Signature**

**Date**

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ X \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

☐ (Check if applicable) I certify that my spouse cannot be located to sign this consent. I will notify the plan sponsor if my spouse is located. **Note: If your spouse cannot be located, check this box and have it witnessed by the plan representative. It must be established to the satisfaction of the plan representative that your spouse cannot be located.**

I certify that spousal consent cannot be obtained because spouse cannot be located.

**Plan Representative Signature**

**Date**

X \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

# Beneficiary Form

Contract/Plan ID Number 5-24405

## Naming My Beneficiary(ies)

Before completing, please read the instructions, examples and Qualified Preretirement Survivor Annuity notice information on this form. You may name one or more primary and/or contingent beneficiaries. If you need more space to name beneficiaries or name a Trust, Testamentary Trust, or minor children (custodian for minors), please attach a separate list that you have signed and dated. Note: Unless otherwise provided, if two or more beneficiaries are named, the proceeds shall be paid to the named beneficiaries, or to the survivor or survivors, in equal shares.

Name (primary beneficiary[ies])	Date of Birth	Relationship	Social Security Number	Percent
_____	____/____/____	_____	____-____-____	____
Address _____	City _____	State _____	ZIP _____	

Name (primary beneficiary[ies])	Date of Birth	Relationship	Social Security Number	Percent
_____	____/____/____	_____	____-____-____	____
Address _____	City _____	State _____	ZIP _____	

### If primary beneficiary(ies) is not living, pay death benefits to:

In most circumstances, your contingent beneficiary(ies) will only receive a death benefit if the primary beneficiary predeceases you and the death benefit has not been paid in full.

Name (contingent beneficiary[ies])	Date of Birth	Relationship	Social Security Number	Percent
_____	____/____/____	_____	____-____-____	____
Address _____	City _____	State _____	ZIP _____	

Name (contingent beneficiary[ies])	Date of Birth	Relationship	Social Security Number	Percent
_____	____/____/____	_____	____-____-____	____
Address _____	City _____	State _____	ZIP _____	

## Name Change

Change my name from: \_\_\_\_\_ Change my name to: \_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Reason: ☐ Married ☐ Divorce ☐ Other - provide reason: \_\_\_\_\_

## My Signature

This designation revokes all prior designations made under the retirement plan.

My Signature (Required) \_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**X** \_\_\_\_\_

UNDER THE PENALTIES OF PERJURY, I certify by my signature that all of the information on this beneficiary designation form is true, current and complete.

## Instructions

Read carefully before completing this form. To be sure death benefits are paid as you wish, follow these guidelines:

**Use Choice A** If you are not married.

**Use Choice B** If you are married and want all death benefits from the plan paid to your spouse. Your spouse does not have to sign the form.

**Use Choice C** If you are married and want death benefits paid to someone other than your spouse, in addition to your spouse, or to a trust or estate. Your spouse must sign the spouse's consent on this form. This signature must be witnessed by a plan representative or notary public.

**You may name one or more contingent beneficiaries.** If you need more space to name beneficiaries or name a Trust, Testamentary Trust, or minor children (custodian for minors), please attach a separate list that you have signed and dated.

**Be sure you sign and date the form.** Keep a copy of this form for your records. If you do not date the form, the designation will become effective the day it's received by your plan sponsor or Principal Life Insurance Company depending upon plan provisions.

If your marital status changes, review your beneficiary designation to be sure it meets these requirements. If your name changes, complete the Name Change section of this form.

## Examples of Naming Beneficiaries

Be sure to use given names such as "Mary M. Doe," not "Mrs. John Doe," and include the address and relationship of the beneficiary or beneficiaries to the participant. If you need more space to name beneficiaries or name a Trust, Testamentary Trust, or minor children (custodian for minors), please attach a separate list that you have signed and dated. The following examples may be helpful to you:

	Name	Relationship	Social Security Number	Address	Amount/Percent
<b>One Primary Beneficiary</b>	Mary M. Doe	Sister	###-##-####	XXXXXXXXXXXX	100%
<b>Two Primary Beneficiaries</b>	Jane J. Doe John J. Doe or to the survivor	Mother Father	###-##-#### ###-##-####	XXXXXXXXXXXX XXXXXXXXXXXX	50% 50%
<b>One Primary Beneficiary and One Contingent</b>	Jane J. Doe if living; otherwise to John J. Doe	Spouse Son	###-##-#### ###-##-####	XXXXXXXXXXXX XXXXXXXXXXXX	100% 100%
<b>Estate</b>	My Estate				100%
<b>Trust</b>	ABC Bank and Trust Co.	Trustee or successor in trust under (Trust Name) established (Date of Trust Agreement)		XXXXXXXXXXXX	100%
<b>Testamentary Trust</b> (Trust established within the participant's will)	John J. Doe/ Trust created by the Last Will and ABC Bank Testament of the participant			XXXXXXXXXXXX	100%
<b>Children &amp; Grandchildren</b> (if beneficiary is a minor, use sample wording shown below)	John J. Doe Jane J. Doe William J. Doe If any of my children predecease me, the surviving children of any such child shall receive in equal portions the share their parent would have received, if living. If no child of a deceased child survives, the share of that child of mine shall go to the survivor or survivors of my children, equally.	Son Daughter Son	###-##-#### ###-##-#### ###-##-####	XXXXXXXXXXXX XXXXXXXXXXXX XXXXXXXXXXXX	33.4% 33.3% 33.3%
<b>Minor Children</b> (custodian for minor)	John J. Doe, son, and Jane J. Doe, daughter, equally, or to the survivor. However, if any proceeds become payable to a beneficiary who is a minor as defined in the Iowa Uniform Transfers to Minors Act (UTMA), such proceeds shall be paid to Frank Doe as custodian for John Doe under the Iowa UTMA, and Frank Doe as custodian for Jane Doe under the Iowa UTMA.				

## Qualified Preretirement Survivor Annuity (QPSA) Notice

If your spouse has a vested account in a retirement plan, federal law requires that you receive a special death benefit if your spouse dies before beginning to receive retirement benefits (or, if earlier, before the beginning of the period for which the retirement benefits are paid).

If you have been married to your spouse for at least one year (some plans may specify a shorter time period), you have the right to receive this payment for your life beginning after your spouse dies. The special death benefit is often called a qualified preretirement survivor annuity (QPSA). This death benefit will automatically be paid in a lump sum rather than as a QPSA if the value of the death benefit is \$5,000\* or less.

If the lump-sum value of the death benefit is greater than \$5,000, the death benefit will be paid in the form of a QPSA. Other options may be available. The actual amount of the QPSA benefit will vary depending on the vested account balance, your age and the cost to purchase the benefit.

Your right to the QPSA benefit provided by federal law cannot be taken away unless you agree to give up that benefit. If you agree, your spouse can choose to have all or part of the death benefits paid to someone else. The person your spouse chooses to receive the death benefit is usually called the beneficiary. As an example, if you agree, your spouse can have the death benefit paid to his or her children instead of you.

**Example:** Pat and Robin Doe agree that Robin will not receive the QPSA benefit. Pat and Robin also decide that half of the death benefit that is paid from Pat's vested account will be paid to Robin, and half of the death benefit will be paid to Pat and Robin's child, Chris. The total death benefit is \$200 per month. After Pat dies, the plan will pay \$100 a month to Robin for the rest of Robin's life. Chris will also receive payments from the plan as long as he lives. Chris will receive less than \$100 a month because Chris, being younger than Robin, is expected to receive payments over a longer period.

Your choice to give up the QPSA benefit must be voluntary. It is your personal decision if you want to give up the right. If you sign this agreement, your spouse can choose the beneficiary who will receive the death benefit without telling you and without getting your agreement. Your spouse can change the beneficiary at any time before he or she begins receiving benefits or dies. You have the right to agree to allow your spouse to select only a particular beneficiary. If you want to allow your spouse to select only a particular beneficiary, check the box in Choice C under My Beneficiary Choices section, which will limit the beneficiary choice to the one designated on this form.

You can agree to give up all or part of the QPSA benefit. If you do so, the plan will pay you the part of the benefit you did not give up, and pay the remaining part of the benefit to the person or persons selected by your spouse.

You can change your mind with respect to giving up your right to the QPSA benefit until the date your spouse dies. After that date, you cannot change this agreement. If you change your mind, you must notify the plan administrator in writing that you want to revoke the consent you give on this form.

You may lose your right to the QPSA benefit if your spouse and you become legally separated or divorced even if you do not sign this agreement. However, if you become legally separated or divorced, you might be able to get a special court order called a qualified domestic relations order (QDRO) that specifically protects your rights to receive the QPSA benefit or that gives you other benefits under this plan. If you are thinking about separating or getting a divorce, you should get legal advice on your rights to benefits from the plan.

## QPSA Spousal Consent and Agreement

I understand that I have a right to a QPSA benefit from my spouse's retirement account (see prior section for explanation of QPSA benefit) if my spouse dies prior to receiving retirement benefits — or if earlier, before the beginning of the period for which the retirement benefits are paid. I also understand that if the value of the QPSA benefit is \$5,000\* or less, the plan will pay the benefit to me in one lump-sum payment.

I agree to give up my right to the QPSA death benefit and to allow my spouse to choose another beneficiary to receive some or all of that benefit. I understand that by signing this agreement, my spouse can choose any beneficiary without telling me and without my consent agreement unless I limit my spouse's choice to the particular beneficiary by checking the appropriate box in the My Beneficiary Choices section of this form. If I do not check this box, I understand that my spouse can change the beneficiary at any time before retirement benefits begin without telling me and without getting my approval.

I understand I do not have to sign this agreement. I am signing this agreement voluntarily. If I do not sign this agreement, I will receive the QPSA benefit if my spouse dies before beginning to receive retirement benefits — or, if earlier, before the beginning of the period for which the retirement benefits are paid. I understand that if the value of the QPSA benefit is \$5,000\* or less, the plan will pay the benefit to me in one lump-sum payment.

Insurance products and plan administrative services are provided by Principal Life Insurance Company, a member of the Principal Financial Group®, Des Moines, IA 50392.

\* Your plan can specify a lower dollar amount.



# HELPING HAND OF GOODWILL INDUSTRIES EXTENDED EMPLOYMENT SHELTERED WORKSHOP RETIREMENT PLAN ERISA 404 Retirement Plan and Investment Information

10/30/2014

Contract/Plan ID Number 5-24405

## **This document uses these defined words and phrases:**

**Plan** means **HELPING HAND OF GOODWILL INDUSTRIES EXTENDED EMPLOYMENT SHELTERED WORKSHOP**

**Plan Fiduciary** means the individual(s) holding authority over the operation and administration of the Plan and its retirement funds. The Plan Sponsor is typically the Plan Fiduciary. Contact the Plan Administrator for further details.

**Plan Sponsor** means **HELPING HAND OF GOODWILL INDUSTRIES EXTENDED.**

**You** means the Plan participant or beneficiary.

**Plan Administrator** is a Plan Fiduciary that has authority over operation and administration of the Plan. You should contact the Plan Administrator if you have any questions about the investment options under the Plan or if you would like paper copies of additional investment information that is available online at [principal.com](http://principal.com).

The Plan Administrator is:

HELPING HAND OF GOODWILL INDUSTRIES EXTENDED EMPLOYMENT  
SHELTERED  
1817 CAMPBELL ST  
KANSAS CITY, MO 64108-1739  
816-842-7425

## **How does this affect you?**

The Plan Fiduciary makes certain investment options available under the Plan. You decide which of those options works best for you according to your age and circumstances. This means that you are responsible for directing the investment in the account the Plan holds for your benefit (your account).

## **Directing or Transferring Between Investment Options**

You can direct or transfer retirement funds between the different investment options at least quarterly. The Plan may allow for more frequent transfers. To transfer retirement funds, you can call the automated phone system of the Principal Financial Group® at 1-800-547-7754 or log in to your account at [principal.com](http://principal.com).

A description of the exercise of voting, tender and similar rights for an investment alternative and any restrictions on these rights is located in the relevant plan document or trustee powers section of the trust agreement. Contact the Plan Administrator to obtain the plan document or the trust agreement, if applicable.

## **Fees and Expenses**

An annual Plan administrative expense of 0.75 percent applies to each participant's account balance. One twelfth of this annual amount will be charged on a monthly basis. The dollar amount of the expense can be found by logging in to the secure website at [principal.com](http://principal.com) and on participant statements. Plan administrative expenses typically include items such as recordkeeping, participant website access, participant statements, Plan compliance services and financial professional services.

From time to time, Plan expenses may be incurred in the course of normal Plan operation for Plan services such as legal, auditing, third-party administration, consulting, investment advice to the Plan, etc. If allowed by the Plan document, the Plan Fiduciary may direct that these expenses be paid by the Plan. The Plan Fiduciary determines how these expenses are allocated among participants at the time the expenses are paid. These expenses are typically allocated based on participant account balance but may be allocated by dividing the total expense to be deducted by the total number of participants in the Plan. If such expenses are charged to participant accounts, the dollar amount of such expenses will be disclosed on the secure [principal.com](http://principal.com) website and on participant statements (if applicable) for the quarter in which they are paid.

Please see the Investment Option Summary for fees and expenses that may be charged against your account based on investment-level transactions.

**The Plan Administrator can provide the following additional information in paper form, without charge and upon request:**

- Copies of prospectuses (or any short-form or summary prospectuses) for the investment options
- Copies of any financial statements or reports, such as statements of additional information and shareholder reports, and of any other similar materials relating to the Plan's designated investment options
- A statement of the value of a share or unit of each designated investment option and the date of the valuation
- A list of the assets comprising the portfolio of each investment option which constitute Plan assets and the value of each asset (or the proportion of the investment which it comprises)
- The following information about each investment option (including fixed-return investment options) available under the Plan: issuer name, investment objective, principal strategies and risks, turnover rate, performance, and fee and expense information
- To the extent a group annuity contract under the Plan permits you to select an annuity guaranteed by an insurance company, a statement that the guarantee provided by the insurance company is subject to its long-term financial strength and claims-paying ability

To help you make informed investment choices and for more information about the investment options available to you, including investment objectives, performance and fees, please review the enclosed materials or visit [principal.com](http://principal.com).

This document provides important information to help you compare the investment options available to you under the retirement plan.

*Investment results shown represent historical performance and do not guarantee future results. Investment returns and principal values fluctuate with changes in interest rates and other market conditions so the value, when redeemed, may be worth more or less than original costs. Current performance may be lower or higher than the performance data shown. For additional information on the investment options, including most recent month-end performance, log in to the Principal Financial Group® website at principal.com or call our automated phone system at 1-800-547-7754.*

Additional information available online includes, if applicable, the name of the investment option's issuer; the investment option's objectives or goals; the investment option's principal strategies, including a general description of the types of assets held by the investment option; the portfolio turnover rate; and the investment option's performance data and fee and expense information.

In situations where the net and gross total investment expense figures are different, the mutual fund or the underlying fund in which a Separate Account invests has waived/capped a portion of its management fees through the date displayed in the waiver expiration date or contractual cap expiration date column. Differences may also be shown due to the fund family choosing to pay certain expenses that would normally be payable by the fund. Returns displayed are based on total investment expense net.

Fees and expenses are only one of several factors that participants and beneficiaries should consider when making investment decisions. Some or all of the Plan administrative expenses are paid from the total investment expense of one or more of the Plan's investment options. The cumulative effect of fees and expenses can substantially reduce the growth of a participant's or beneficiary's retirement account. Participants and beneficiaries can visit the Employee Benefit Security Administration's website for an example demonstrating the long-term effect of fees and expenses.

For a glossary of terms to assist you in understanding the designated investment options, log in to your account at principal.com.

Asset Class: Balanced/Asset Allocation											
This asset class is generally composed of a combination of fixed income and equity investment options. These investment options may include balanced, asset allocation, target-date, and target-risk investment options. Although typically lower risk than investment options that invest solely in equities, all investment options in this category have the potential to lose value.											
Investment Category: Moderate Allocation											
Inv Manager or Sub-Advisor : Multiple Sub-Advisors											
Investment Option Name	Average Annual Total Return										
SAM Balanced R3 Portfolio <sup>8,1,2,3,4,5,6,F</sup>	<i>(as of 09/30/2014 quarter end)</i>						<i>(as of 12/31/2013 year end)</i>				
	YTD Ret	1-Year	3-Year	5-Year	10-Year	Since Incept	1-Year	5-Year	10-Year	Since Incept	Incept Date
	3.66	9.57	13.38	9.94	6.45	7.40	16.82	12.93	6.33	7.51	1/2007
<b>Benchmark:</b> SAM Balanced Blended Index	4.61	10.13	13.25	9.94	6.95	-	16.73	12.32	6.76	-	-
<b>Benchmark:</b> Morningstar Moderately Aggressive Target Risk Index	3.71	10.09	15.21	10.84	7.90	-	20.18	14.58	7.95	-	-
<b>Description:</b> The investment seeks to provide a high level of total return (consisting of reinvestment of income and capital appreciation), consistent with a moderate degree of principal risk. The fund operates as a fund of funds. It: (1) Generally invests between 40% and 80% of its assets in fixed-income funds, and less than 40% in any one fixed-income fund; (2) Generally invests between 20% and 60% of its assets in equity funds, and less than 30% in any one equity fund; (3) Generally invests less than 20% of its assets in specialty funds, and less than 20% in any one specialty fund. The fund may temporarily exceed these applicable percentage ranges for short periods.											
Composition (% of Assets) as of 08/31/2014				Fees & Expenses			# of Transfers Allowed/Time Period				
Cash	3.47	U.S. Stocks	49.57	Total Inv Exp Net %			1.57				
Non-U.S. Stocks	15.12	Non-U.S. Bonds	4.56	Contractual Cap Expiration Date			N/A				
Convertibles	0.32	Preferred	0.89	Waiver Expiration Date			N/A				
U.S. Bonds	25.63	Other	0.44	Total Inv Exp Gross %			1.57				
				Total Inv Exp Gross Per \$1,000 Invested			\$15.70				
				Redemption Fee			-				

**Investors should carefully consider a mutual fund's investment objectives, risks, charges, and expenses prior to investing. A prospectus, or summary prospectus if available, containing this and other information can be obtained by contacting a financial professional, visiting [principal.com](http://principal.com), or calling 1-800-547-7754. Read the prospectus carefully before investing.**

**The value of the investment options will fluctuate so that when redeemed, shares or units may be worth more or less than the original cost.**

An investment's past performance is not necessarily an indication of how the investment will perform in the future.

*Since inception benchmark returns are displayed on the Investment Option Summary for investments that are less than 10 years old. The benchmark reflecting the Since Inception return is the Morningstar Category index. For some Sub-Advised investment options, two benchmarks will be displayed on the Investment Option Summary and the secondary index reflecting the Since Inception Return is the Morningstar Category index.*

- <sup>B</sup> Principal Funds mutual funds are part of the Principal Funds, Inc. series. Principal Funds, Inc. is distributed by Principal Funds Distributor, Inc. Certain investment options may not be available in all states or U.S. commonwealths.

Returns shown for periods of less than one year are not annualized. All returns displayed here are after net Total Investment Expense of the investment option.

For a Mutual Fund investment option, Total Investment Expense gross equals the sum of (a) the total fund operating expenses plus (b) if the mutual fund invests in other mutual funds, the weighted-average management fee of those other mutual funds, as listed in the most recent prospectus. The actual Total Investment Expense may change if the mutual fund investment option's allocation of assets to other mutual funds changes.

Insurance products and plan administrative services are provided by Principal Life Insurance Company. Principal mutual funds are part of the Principal Funds, Inc. series. Principal Funds, Inc. is distributed by Principal Funds Distributor, Inc. Securities are offered through Princor Financial Services Corporation, 1-800-547-7754, member SIPC and/or independent broker/dealers. Securities sold by a Princor® Registered Representative are offered through Princor. Principal Funds Distributor, Princor and Principal Life are members of the Principal Financial Group® (The Principal®), Des Moines, IA 50392.

As allowed by their prospectuses several mutual fund companies have decided to impose redemption fees and/or transfer restrictions on certain plan and/or participant transactions. One or more of the investment options in your employer's retirement plan may be impacted. For more information, visit The Principal Web site at [principal.com](http://principal.com).

Any operating expenses of a mutual fund or underlying mutual fund that are part of net Total Investment Expense are obtained from the mutual fund's most recent prospectus. The operating expenses shown as part of net Total Investment Expense include voluntary expense limits and fee credit.

These results are for the investment options available through your Plan Sponsor's retirement plan, and may be different from the results for other retirement plans. Past performance is not a guarantee of future results. Principal values and investment returns will fluctuate so that values upon redemption may be worth more or less than original costs. Total returns illustrated are net of investment expenses and management fees.

Since inception returns are only shown for funds/accounts in existence for less than 10 years.

- <sup>1</sup> These calculated returns reflect the historical performance of the oldest share class of the fund, adjusted to reflect a portion of the fees and expenses of this share class. For time periods prior to inception date of the fund, predecessor performance is reflected. Please see the fund's prospectus for more information on specific expenses, and the fund's most recent shareholder report for actual date of first sale. Expenses are deducted from income earned by the fund. As a result, dividends and investment results will differ for each share class.
- <sup>2</sup> Equity investment options involve greater risk, including heightened volatility, than fixed-income investment options. Fixed-income investment options are subject to interest rate risk, and their value will decline as interest rates rise.
- <sup>3</sup> Fixed-income and asset allocation investment options that invest in mortgage securities are subject to increased risk due to real estate exposure.
- <sup>4</sup> Asset allocation does not guarantee a profit or protect against a loss. Investing in real estate, small-cap, international, and high-yield investment options involves additional risks. Additionally there is no guarantee this investment option will provide adequate income at or through retirement.
- <sup>5</sup> The Investment Advisor will display "Multiple Sub-Advisors" for certain target-date, target-risk and specialty investment options where the assets are directed by the Investment Manager to multiple underlying investment options. These underlying investment options may use multiple sub-advisors who are responsible for the day-to-day management responsibilities.
- <sup>6</sup> This Principal Strategic Asset Management Portfolio (SAM) indirectly bears its pro rata share of the management fees incurred by the underlying Principal Funds in which this portfolio invests. Based on the asset allocation of the SAM Portfolio outlined in the prospectus dated March 1, 2014, the weighted average operating expenses of the underlying funds are: Flexible Income, 0.58%; Conservative Balanced, 0.63%; Balanced, 0.68%; Conservative Growth, 0.72%; Strategic Growth, 0.70%. While the operating expenses of the underlying mutual funds are not part of the SAM Portfolio operating expenses they are included in the Total Investment Expense. Performance results shown for the SAM Portfolios reflect the application of these expenses.
- <sup>F</sup> Investment option limits transfer activity. Once the number of allowed transfers is met, participants are not allowed to transfer back into an investment option which they have transferred out of until the holding period elapses. All participant investment transfers and non-scheduled rebalancing activity are counted toward the number of transfers allowed. Contributions into the investment option are not impacted. Participants may still transfer out to different investment options or to money market or Guaranteed options.

**Benchmark Descriptions**

Morningstar Moderately Aggressive Target Risk Index represents a portfolio of global equities, bonds and traditional inflation hedges such as commodities and TIPS. This portfolio is held in a static allocation appropriate for U.S. investors who seek a slightly above-average exposure to equity market risk and returns.

SAM Balanced Blended Index is composed of 15% MSCI EAFE Index, 45% Russell 3000 Index and 40% Barclays Aggregate Bond Index.



**Am I eligible for Helping Hand of Goodwill Industries Extended Employment Sheltered Workshop Retirement Plan?**

There are no eligibility requirements for the wage rate portion of the plan.

You are eligible to join the plan if you are:

- employed in the following position(s) or classification(s): Only employees covered by this plan are employees covered by Javits, Wagner-O'Day Act and Service Contract Employees

Once you meet the above requirements, you may begin making salary deferral contributions immediately.

**From where do my contributions come from?**

Contributions in general are from total pay from HELPING HAND OF GOODWILL INDUSTRIES EXTENDED EMPLOYMENT SHELTERED.

Your benefits representative can provide more detailed information.

**Employer contributions**

If you are working on a project covered by the State Prevailing Wage Act, Helping Hand of Goodwill Industries Extended Employment Sheltered Workshop will make a prevailing wage contribution.

Employer contributions may change in the future.

**When am I vested in the retirement plan funds?**

You are also 100% vested in the following contribution(s):

- State Prevailing Wage

**Investment options**

You are able to direct the investment of the retirement account balance by choosing among several investment options.

In order for you to make informed investment decisions, it is important that you read the investment material (including prospectuses if applicable) available from your plan sponsor.

You may also obtain this information by calling us at 1-800-547-7754.

You may elect the investment direction of some contributions, and your employer will direct the investment of other contributions to the retirement plan. Please see the Summary Plan Description for details.

For detailed information about your investment options, please visit us at [principal.com](http://principal.com) or contact us at 1-800-547-7754.

## **How often can I make changes to the investment options in the retirement plan?**

- anytime

Note that when transferring existing balances from one investment option to another, redemption fees or restrictions on transfer frequency may apply. Refer to the redemption fee and transfer restriction policy at [principal.com](http://principal.com) or contact your plan administrator.

Changes can be made through our automated system at 1-800-547-7754 or at [principal.com](http://principal.com).

A charge will apply to all paper requests.

## **How can I access my account information?**

You may obtain account information through:

- Participant statement (quarterly)
- Call our automated phone system at 1-800-547-7754.
- Visit [principal.com](http://principal.com) to access the account.

## **How are the fees for the retirement plan paid?**

Plan administrative expenses reduce the credited investment return.

## **When can I begin receiving benefits from the retirement plan?**

Benefits are payable at:

- Retirement (age 62)
- Death
- Disability\*
- Termination of employment



Please refer to the participant notice or Summary Plan Description provided to you by your plan sponsor about withdrawal benefits.

\*You must have ceased employment to receive this benefit.

### **Other Information**

This plan summary includes a brief description of your employer's retirement plan features. While this plan summary outlines many of the major provisions of your employer's retirement plan, this summary does not provide you with every plan detail. The legal plan document, which governs this plan, provides full details. If there are any discrepancies between this plan summary and the legal plan document, the legal plan document will govern.

From time to time, your employer may elect to amend the retirement plan provisions. This plan summary may be updated to reflect proposed amendments to the plan document provisions. Until a plan amendment is adopted, however, the legal plan document will govern. Contact your plan sponsor if you would like more details regarding applicable retirement plan provisions.

Most withdrawals/distributions are subject to taxation and required withholding. Check with your financial/tax advisor on how this may affect you.

The Principal® is required by the IRS to withhold 20% of the portion of a distribution that is eligible for rollover if it is not directly rolled over to another eligible retirement plan, including an IRA, or used to purchase an annuity to be paid over a minimum period of the lesser of 10 years or the participant's life expectancy. This withholding will offset a portion of federal income taxes you owe on the distribution.

The retirement account may be affected differently by individual state taxation rules. Contact your tax advisor with questions.

If you have questions about the retirement plan call 1-800-547-7754 Monday through Friday, 7 a.m. - 9 p.m. (Central time), to speak to a retirement specialist at The Principal®.

To learn more about The Principal®, visit [principal.com](http://principal.com).

Insurance products and plan administrative services are provided by Principal Life Insurance Company, a member of the Principal Financial Group® (The Principal®), Des Moines, IA 50392.

