Baxter

Baxter Incentive Investment Plan (820005)

ROLLOVER CONTRIBUTION FORM

PERSONAL INFORMATION (please print clearly using black or blue ink)

NAME: ____________________ EMPLOYEE ID: ____________

ADDRESS: ____________________ APT: ____________

CITY: ____________________ STATE: ______ ZIP CODE: ____________

DAY PHONE: ____________________ EVENING PHONE: ____________________

E-MAIL: ____________________ DATE OF BIRTH: _____/_____/________

INSTRUCTIONS

1. Contact your former employer, plan administrator, or financial institution to request and receive a rollover distribution check. You will need to provide the correct payee information for your rollover. The rollover check should be mailed directly to you and payable as follows:
   - State Street Bank and Trust Co. for the benefit of (F.B.O.) (Your Name)
2. Obtain required documentation. Your former employer or financial institution should provide you with proof of plan qualification and taxability. Proof of plan qualification status is typically documented in a copy of the plan's IRS Letter of Determination, a signed letter from your employer or prior Plan Administrator and/or your rollover distribution statement. Proof of taxability is typically documented in your rollover distribution statement.
3. Write the last four digits of your Social Security number on the rollover check.
4. Personal checks will not be accepted and will be returned to you.

PLEASE NOTE: AN INCOMPLETE APPLICATION, INSUFFICIENT DOCUMENTATION, A MISSING CHECK OR A CHECK WITH INCORRECT PAYEE INFORMATION MAY RESULT IN A DELAY IN POSTING FUNDS TO YOUR ACCOUNT OR THE RETURN OF YOUR APPLICATION AND/OR CHECK.

PROOF OF PLAN QUALIFICATION AND TAXABILITY

Plan qualification: Your rollover contribution to the Baxter Incentive Investment Plan (820005) must be from another qualified plan or IRA. The Baxter Incentive Investment Plan (820005) accepts rollover contributions from a 401(k) plan, 403(b) plan, 457 deferred compensation plan or Rollover IRA. If you choose to rollover an eligible plan payment that was paid to you, it will be treated as an indirect rollover which must be completed within 60 days after you received the payment.

Important note regarding the 60-day rollovers: If a portion of the rollover is attributable to a qualified plan loan offset amount, then the deadline for rolling over that loan offset amount is the due date (including extensions) for filing the Federal income tax return for the tax year in which the plan loan offset occurs. A "qualified plan loan offset amount" is the amount by which an employee's account balance under the plan is reduced to repay a loan from the plan, and is treated as distributed from a 401(a)-qualified plan, a 403(b) plan, or a governmental 457(b) plan solely by reason of a) the termination of the plan, or b) failure to meet the repayment terms of the loan because of the employee's separation from service (whether due to layoff, cessation of business, termination of employment, or otherwise).

Note: If you are directly rolling over Roth money, we must receive cost basis and the Roth account's start date directly from your prior record keeper. Please include a copy of your rollover distribution statement from your former plan PLUS documentation providing the start date and total amount of your Roth contributions.

Taxability: You must provide documentation that details the taxability of the funds to be rolled over indicating: pre-tax, Roth.

You may need to contact your former employer, plan administrator, or financial institution to provide you with this information which must accompany this application and rollover check.

INVESTMENT FUND ELECTIONS (MUST TOTAL 100%)

I elect to make a rollover contribution to the Baxter Incentive Investment Plan (820005) in the amount of: $_________

If you do not make an election, your contribution will be defaulted to the appropriate Target Retirement Fund based upon your date of birth on file.

Stable Income Fund	________ .00%	**Target Retirement 2020 Fund**	________ .00%
Midcap Equity Index Fund	________ .00%	**Target Retirement 2025 Fund**	________ .00%
S & P 500 Equity Index Fund	________ .00%	**Target Retirement 2030 Fund**	________ .00%
Emerging Markets Equity Fund	________ .00%	**Target Retirement 2035 Fund**	________ .00%
International EAFE Equity Fund	________ .00%	**Target Retirement 2040 Fund**	________ .00%
Small Cap Fund	________ .00%	**Target Retirement 2045 Fund**	________ .00%
Target Retirement Income Fund	________ .00%	**Target Retirement 2050 Fund**	________ .00%
Target Retirement 2015 Fund	________ .00%	**Target Retirement 2055 Fund**	________ .00%
		TOTAL	**100%**

AUTHORIZATION

I certify that the amount of my rollover contribution represents only money that is eligible to be rolled over into the Baxter Incentive Investment Plan (820005). If any of the money is subsequently determined to be ineligible for rollover, I understand that the Plan will distribute the ineligible amount and any attributable earnings, if applicable.

PARTICIPANT SIGNATURE ____ **DATE** ____________________

If you have any questions, please go online at http://BaxterIIP.voya.com or call Baxter Incentive Investment Plan Service Center at 1-844-249-8581 (English Toll-free) or 1-844-249-8803 (Spanish Toll-free). Customer Service Associates are available Monday through Friday, 9:00 A.M. to 6:00 P.M. Eastern Time (excluding stock market holidays).

CHECKLIST

PLEASE REVIEW YOUR APPLICATION CAREFULLY.

- ❒ Completed the Personal Information section, **and**
- ❒ Contacted your former employer or financial institution, **and**
- ❒ Completed the Investment Fund Elections section, **and**
- ❒ Included your Rollover check (made payable to State Street Bank and Trust Co. F.B.O. (your name)), **and**
- ❒ Included proof of plan qualification documenting the source of your rollover contribution such as: 401(k), 403(b), 457 deferred compensation plan or Rollover IRA (IRS Letter of Determination, letter from plan's prior record keeper, or distribution statement), **and**
- ❒ Included proof of taxability detailing the taxability of funds to be rolled over such as: pre-tax, Roth. (Letter from plan's prior record keeper, and/or rollover distribution statement), **and**
- ❒ Signed and dated the Rollover Contribution form

If your rollover check or any of the above required information or documentation is missing from your application, there will be a delay in processing your rollover contribution and your application and/or check may be returned to you.

If your application is complete, please mail the application and any required documentation to:

VIA MAIL
Voya Financial
Attn: Baxter Incentive Investment Plan (820005)
P.O. Box 55772
Boston, MA 02205-5772

VIA OVERNIGHT DELIVERY
Voya Financial
Attn: Baxter Incentive Investment Plan (820005)
30 Braintree Hill Office Park
Braintree, MA 02184-8747