Loan Payoff Form

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Questions?
Call
Empower Retirement's
Customer
Service Center
1-800-854-0647

Fax
1-800-220-2913

Online
www.massmutual.com/corp

Use this form if you want to:
• Pay off the remaining balance on your outstanding loan(s).

INFORMATION ON LOAN REPAYMENT *(Please read carefully before proceeding.)*You may repay the outstanding balance of your loan at any time. However, this repayment will only be accepted if it pays off your loan in full. Partial repayments will not be accepted. Personal checks sent to Empower Retirement will not be accepted.

Please note, the maximum amount available for a subsequent loan is the lesser of 50% of your account balance or $50,000 MINUS the highest outstanding loan balance during the prior 12 months.

Please call Empower Retirement's Customer Service Center at 800-854-0647 between 8 a.m. and 9 p.m. Eastern Time to obtain your current outstanding balance, and alert the representative that you will be sending in a loan payoff check. If your payoff is not received within 30 days, any applicable interest will accrue and apply to your loan balance. If the final payment you submit exceeds the loan payoff amount by $10 or less, the excess amount will be credited to your account as interest earnings. Any loan overpayments in excess of $10 will be returned to you via check.

Loan payments must be made in the form of **employer check, a certified or cashier's check, or money order.** Your check should be made payable to "Plan Name FBO Participant Name" (e.g., ABC 401(k) Plan FBO John Smith). Please attach your payment and send along with the completed form to your Employer.

Your loan payoff will be posted to your account upon receipt at Empower Retirement. You may call Empower Retirement's Customer Service Center at 800-854-0647 between 8 a.m. and 8 p.m. Eastern Time to verify that your loan has been paid off.

Empower Retirement will not process this form until it is received in good order. Please see the *Important Information* Section for information on "Good Order" requirements.

Section A - Plan Information (Plan Administrator completes)

Plan ID	Plan Name

Plan Contact	Daytime Phone Number

Section B - Participant Information (Participant completes)

SSN	Participant Name	Date of Birth

*Legal Address

City	State	Zip Code	Daytime Phone Number

*We will change your account information to reflect the Legal Address above and all future mailings will be sent to this address unless changed by you or your Plan Administrator as described under "Stale Address" in the *Important Information* Section.

Section C - Loan Information & Participant Authorization (Participant completes)

Attached with this form is a check in the amount of $____________________ which will repay my loan number ____________________ in full.

______________________________ ____________________

Participant's Signature Date

Return the completed *Loan Payoff Form* and your check to your Employer.

Section D - Plan Representative Signature (required)

I hereby authorize that the loan payment attached be used to prepay the loan for the Participant named above.

______________________________ ____________________ ______________________________

Authorized Plan Representative's Signature Date Authorized Plan Representative's Name (please print)

Regular Mail Address:
Empower Retirement
P.O. Box 1583
Hartford, CT 06144-1583

Overnight Mail Address:
Empower Retirement
100 Bright Meadow Boulevard
Enfield, CT 06082

Section E - Important Information

Good Order - "Good Order" means that all sections of the form are complete, the participant has provided their signature authorizing the transaction (if required) and the Plan Sponsor has provided their signature authorizing Empower Retirement to process the transaction requested on the form.

Stale Address - It is important that you notify us if you change your address. Going forward, your address may change in our records either at your or your employer's direction, or as a result of an address confirmation service provided under our agreement with your employer. Under this service, the addresses in our records are compared against and updated quarterly with addresses received from commercial address update services (e.g., the U.S. Postal Service). If your mail is returned to us or your employer tells us your address is incorrect, we are likely to suspend future mailings until a new address is obtained. Unless preempted by federal law, failure to give us a current address may also result in uncashed distributions from your participant account being considered abandoned property under state law, and remitted to the applicable state. To update your address, contact your Plan Administrator or, if permitted by your Plan, log in to our website at www.massmutual.com/corp and select the change address link under your personal settings.