

Questions? Call our National Service Center at 1-800-888-2461.

Instructions

Use this form to modify your future investment allocations. You must complete sections 1, 2, 5 and any of the following that apply:

- Exchange of Investment Value – Section 3
- Future Allocation Change – Section 4

Restrictions may apply; refer to the fund prospectus. Please type or print.

1. Provide General Account Information

Account Number _____

Owner Name _____
First MI Last

Mailing Address _____
Street Address City State ZIP Code

Owner's Social Security Number _____

Daytime Phone Number _____ Home Phone Number _____

Joint Owner's Name _____
First MI Last

Joint Owner's Social Security Number _____

2. Select the Effective Date

Effective Date _____ If no date is indicated, or date indicated is prior to the date of receipt, the transaction will occur on the date the request is received in proper form.
Date (mm/dd/yyyy)

3. Exchange of Investment Value

Complete this section if you wish to exchange funds within your account.

Please select one option:

- Exchange Dollars (the 'From' and 'To' amounts must equal)
- Exchange Percents (indicate whole percentages and the 'To' column must total 100%)

Transfer From:

- ____ Security Alpha Opportunity
- ____ Security Cash
- ____ Security Equity
- ____ Security Global¹
- ____ Security High Yield
- ____ Security Large Cap Value
- ____ Security Mid Cap Growth
- ____ Security Mid Cap Value
- ____ Security Select 25
- ____ Security Small Cap Growth
- ____ Security Small Cap Value
- ____ Security US Intermediate Bond

Transfer To:

- ____ Security Alpha Opportunity
- ____ Security Cash
- ____ Security Equity
- ____ Security Global¹
- ____ Security High Yield
- ____ Security Large Cap Value
- ____ Security Mid Cap Growth
- ____ Security Mid Cap Value
- ____ Security Select 25
- ____ Security Small Cap Growth
- ____ Security Small Cap Value
- ____ Security US Intermediate Bond

Must Total 100%

¹Investments in this fund that are withdrawn or exchanged may be assessed a redemption fee, which is retained by the fund. Please consult with your financial representative.

4. Change Future Investment Allocations

Complete this section if you wish to change your future allocations. Indicate whole percentages totaling 100%.

____% Security Alpha Opportunity

____% Security Mid Cap Value

____% Security Cash

____% Security Select 25

____% Security Equity

____% Security Small Cap Growth

____% Security Global¹

____% Security Small Cap Value

____% Security High Yield

____% Security US Intermediate Bond

____% Security Large Cap Value

Must Total 100%

____% Security Mid Cap Growth

¹Investments in this fund that are withdrawn or exchanged may be assessed a redemption fee, which is retained by the fund. Please consult with your financial representative.

5. Provide Signatures

I understand and authorize the transaction requested on this form.

<input checked="" type="checkbox"/>	_____	<input checked="" type="checkbox"/>	_____
	Signature of Owner		Signature of Joint Owner
			(Date (mm/dd/yyyy))
<input checked="" type="checkbox"/>	_____	<input checked="" type="checkbox"/>	_____
	Signature of Representative (optional)		Print Name of Representative
			(Date (mm/dd/yyyy))

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