

## DISCLOSURE OF OWNERSHIP/PRINCIPALS

<b>Business Entity Type (Please select one)</b>						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
<b>Business Designation Group (Please select all that apply)</b>						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
<b>Number of Clark County Nevada Residents Employed:</b>				12		
<b>Corporate/Business Entity Name:</b>		Empower Retirement, LLC				
<b>(Include d.b.a., if applicable)</b>						
<b>Street Address:</b>		8515 E. Orchard Road		<b>Website:</b> www.empower-retirement.com		
<b>City, State and Zip Code:</b>		Greenwood Village, Colorado 80111		<b>POC Name:</b> Robert Gleason		
				<b>Email:</b> Robert.Gleason@empower-retirement.com		
<b>Telephone No:</b>		(916) 765-5566		<b>Fax No:</b>		
<b>Nevada Local Street Address:</b>		N/A		<b>Website:</b>		
<b>(If different from above)</b>						
<b>City, State and Zip Code:</b>				<b>Local Fax No:</b>		
<b>Local Telephone No:</b>				<b>Local POC Name:</b>		
				<b>Email:</b>		

All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board.

Publicly-traded entities and non-profit organizations shall list all Corporate Officers and Directors in lieu of disclosing the names of individuals with ownership or financial interest. The disclosure requirement, as applied to land-use applications, extends to the applicant and the landowner(s).

Entities include all business associations organized under or governed by Title 7 of the Nevada Revised Statutes, including but not limited to private corporations, close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations.

Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
None, the Company is 100% owned by its parent		
company, Great-West Life & Annuity Insurance		
Company		

**This section is not required for publicly-traded corporations. Are you a publicly-traded corporation?**

☐ Yes ☒ No

- Are any individual members, partners, owners or principals, involved in the business entity, a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?  
☐ Yes ☒ No (If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.)
- Do any individual members, partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brother/sister, half-brother/half-sister, grandchild, grandparent, related to a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?  
☐ Yes ☒ No (If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)

I certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on land-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form.

Una T. Morabito  
 Signature  
 Head of LMN & Gov't Markets Client Management  
 Title

Una T. Morabito  
 Print Name

4/6/21  
 Date

## DISCLOSURE OF RELATIONSHIP

List any disclosures below:  
(Mark N/A, if not applicable.)

NAME OF BUSINESS OWNER/PRINCIPAL	NAME OF COUNTY* EMPLOYEE/OFFICIAL AND JOB TITLE	RELATIONSHIP TO COUNTY* EMPLOYEE/OFFICIAL	COUNTY* EMPLOYEE'S/OFFICIAL'S DEPARTMENT
N/A			

\* County employee means Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.

"Consanguinity" is a relationship by blood. "Affinity" is a relationship by marriage.

"To the second degree of consanguinity" applies to the candidate's first and second degree of blood relatives as follows:

- Spouse – Registered Domestic Partners – Children – Parents – In-laws (first degree)
- Brothers/Sisters – Half-Brothers/Half-Sisters – Grandchildren – Grandparents – In-laws (second degree)

---

**For County Use Only:**

If any Disclosure of Relationship is noted above, please complete the following:

☐ Yes ☐ No Is the County employee(s) noted above involved in the contracting/selection process for this particular agenda item?

☐ Yes ☐ No Is the County employee(s) noted above involved in any way with the business in performance of the contract?

Notes/Comments:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name  
Authorized Department Representative

## DISCLOSURE OF OWNERSHIP/PRINCIPALS

<b>Business Entity Type (Please select one)</b>						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
<b>Business Designation Group (Please select all that apply)</b>						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
<b>Number of Clark County Nevada Residents Employed:</b>				0		
<b>Corporate/Business Entity Name:</b>		Great-West Life & Annuity Insurance Company				
<b>(Include d.b.a., if applicable)</b>						
<b>Street Address:</b>		8515 E Orchard Rd		<b>Website:</b> www.empower-retirement.com		
<b>City, State and Zip Code:</b>		Greenwood Village, CO 80111		<b>POC Name:</b> Robert Gleason		
				<b>Email:</b> robert.gleason@empower-retirement.com		
<b>Telephone No:</b>		(916) 765-5566		<b>Fax No:</b>		
<b>Nevada Local Street Address:</b>		N/A		<b>Website:</b>		
<b>(If different from above)</b>						
<b>City, State and Zip Code:</b>				<b>Local Fax No:</b>		
<b>Local Telephone No:</b>				<b>Local POC Name:</b>		
				<b>Email:</b>		

All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board.

Publicly-traded entities and non-profit organizations shall list all Corporate Officers and Directors in lieu of disclosing the names of individuals with ownership or financial interest. The disclosure requirement, as applied to land-use applications, extends to the applicant and the landowner(s).

Entities include all business associations organized under or governed by Title 7 of the Nevada Revised Statutes, including but not limited to private corporations, close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations.

Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
None, the company is 100% owned by its indirect parent company Great-West Lifeco Inc.		

**This section is not required for publicly-traded corporations. Are you a publicly-traded corporation?**

☐ Yes ☒ No

1. Are any individual members, partners, owners or principals, involved in the business entity, a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?

☐ Yes ☒ No (If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.)

2. Do any individual members, partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brother/sister, half-brother/half-sister, grandchild, grandparent, related to a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?

☐ Yes ☒ No (If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)

I certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on land-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form.

Una T. Morabito  
Digitally signed by Una T. Morabito  
Date: 2021.04.12 14:51:59 -04'00'  
Signature

Una T. Morabito  
Print Name

Head of LMN & Gov't Markets Client Management  
Title

4/12/21  
Date

## DISCLOSURE OF RELATIONSHIP

List any disclosures below:  
(Mark N/A, if not applicable.)

NAME OF BUSINESS OWNER/PRINCIPAL	NAME OF COUNTY* EMPLOYEE/OFFICIAL AND JOB TITLE	RELATIONSHIP TO COUNTY* EMPLOYEE/OFFICIAL	COUNTY* EMPLOYEE'S/OFFICIAL'S DEPARTMENT
N/A			

\* County employee means Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.

"Consanguinity" is a relationship by blood. "Affinity" is a relationship by marriage.

"To the second degree of consanguinity" applies to the candidate's first and second degree of blood relatives as follows:

- Spouse – Registered Domestic Partners – Children – Parents – In-laws (first degree)
- Brothers/Sisters – Half-Brothers/Half-Sisters – Grandchildren – Grandparents – In-laws (second degree)

---

**For County Use Only:**

If any Disclosure of Relationship is noted above, please complete the following:

☐ Yes ☐ No Is the County employee(s) noted above involved in the contracting/selection process for this particular agenda item?

☐ Yes ☐ No Is the County employee(s) noted above involved in any way with the business in performance of the contract?

Notes/Comments:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name  
Authorized Department Representative

## DISCLOSURE OF OWNERSHIP/PRINCIPALS

<b>Business Entity Type (Please select one)</b>						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
<b>Business Designation Group (Please select all that apply)</b>						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
<b>Number of Clark County Nevada Residents Employed:</b>				0		
<b>Corporate/Business Entity Name:</b>		Great-West Lifeco Inc.				
<b>(Include d.b.a., if applicable)</b>						
<b>Street Address:</b>		100 Osborne Street North		<b>Website:</b> www.greatwestlifeco.com		
<b>City, State and Zip Code:</b>		Winnipeg, Manitoba R3C 1V3		<b>POC Name:</b> Robert Gleason		
				<b>Email:</b> robert.gleason@empower-retirement.com		
<b>Telephone No:</b>		(916) 765-5566		<b>Fax No:</b>		
<b>Nevada Local Street Address:</b>		N/A		<b>Website:</b>		
<b>(If different from above)</b>						
<b>City, State and Zip Code:</b>				<b>Local Fax No:</b>		
<b>Local Telephone No:</b>				<b>Local POC Name:</b>		
				<b>Email:</b>		

All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board.

Publicly-traded entities and non-profit organizations shall list all Corporate Officers and Directors in lieu of disclosing the names of individuals with ownership or financial interest. The disclosure requirement, as applied to land-use applications, extends to the applicant and the landowner(s).

Entities include all business associations organized under or governed by Title 7 of the Nevada Revised Statutes, including but not limited to private corporations, close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations.

Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
N/A - Publicly Traded Company		

**This section is not required for publicly-traded corporations. Are you a publicly-traded corporation?**

☒ Yes ☐ No

1. Are any individual members, partners, owners or principals, involved in the business entity, a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?

☐ Yes

☐ No

(If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.)

2. Do any individual members, partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brother/sister, half-brother/half-sister, grandchild, grandparent, related to a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?

☐ Yes

☐ No

(If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)

I certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on land-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form.

Una T. Morabito

Digitally signed by Una T. Morabito  
Date: 2021.04.12 14:50:45 -04'00'

Signature

Una T. Morabito

Print Name

Head of LMN & Gov't Markets Client Management

Title

4/6/21

Date

## DISCLOSURE OF RELATIONSHIP

List any disclosures below:  
(Mark N/A, if not applicable.)

NAME OF BUSINESS OWNER/PRINCIPAL	NAME OF COUNTY* EMPLOYEE/OFFICIAL AND JOB TITLE	RELATIONSHIP TO COUNTY* EMPLOYEE/OFFICIAL	COUNTY* EMPLOYEE'S/OFFICIAL'S DEPARTMENT
N/A			

\* County employee means Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.

"Consanguinity" is a relationship by blood. "Affinity" is a relationship by marriage.

"To the second degree of consanguinity" applies to the candidate's first and second degree of blood relatives as follows:

- Spouse – Registered Domestic Partners – Children – Parents – In-laws (first degree)
- Brothers/Sisters – Half-Brothers/Half-Sisters – Grandchildren – Grandparents – In-laws (second degree)

---

**For County Use Only:**

If any Disclosure of Relationship is noted above, please complete the following:

☐ Yes ☐ No Is the County employee(s) noted above involved in the contracting/selection process for this particular agenda item?

☐ Yes ☐ No Is the County employee(s) noted above involved in any way with the business in performance of the contract?

Notes/Comments:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name  
Authorized Department Representative

## Directors and Senior Officers

As of February 11, 2021

### Board of Directors

**R. Jeffrey Orr**<sup>3,4,5,7</sup>

Chair of the Board, Lifeco  
President and Chief Executive Officer,  
Power Corporation of Canada

**Michael R. Amend**<sup>6</sup>

President, Online,  
Lowe's Companies, Inc.

**Deborah J. Barrett, CPA, CA, ICD.D**<sup>1,5</sup>

Corporate Director

**Robin A. Bienfait**<sup>1,6</sup>

Chief Executive Officer,  
Emnovate

**Heather E. Conway**<sup>6</sup>

Corporate Director

**Marcel R. Coutu**<sup>3,4,5</sup>

Corporate Director

**André Desmarais, O.C., O.Q.**<sup>3,4,5</sup>

Deputy Chairman,  
Power Corporation of Canada

**Paul Desmarais, Jr., O.C., O.Q.**<sup>3,4,5</sup>

Chairman,  
Power Corporation of Canada

**Gary A. Doer, O.M.**<sup>6</sup>

Senior Business Advisor,  
Dentons Canada LLP

**David G. Fuller**<sup>2,5,7</sup>

Operating Partner,  
Searchlight Capital Partners

**Claude G  n  reux**<sup>4,5</sup>

Executive Vice-President,  
Power Corporation of Canada

**J. David A. Jackson, LL.B.**<sup>3,4,6</sup>

Senior Counsel,  
Blake, Cassels & Graydon LLP

**Elizabeth C. Lempres**<sup>1,2,6,7</sup>

Corporate Director

**Paula B. Madoff**<sup>5,7</sup>

Corporate Director

**Paul A. Mahon**<sup>7</sup>

President and Chief Executive Officer,  
Lifeco

**Susan J. McArthur**<sup>4,5</sup>

Corporate Director

**T. Timothy Ryan**<sup>3,4,6</sup>

Corporate Director

**Jerome J. Selitto**<sup>2,5</sup>

President,  
Better Mortgage Corporation

**James M. Singh, CPA, CMA, FCMA(UK)**<sup>1,2,6</sup>

Chairman of the Advisory Board,  
CSM Bakery Solutions Limited

**Gregory D. Tretiak, FCPA, FCA**<sup>6,7</sup>

Executive Vice-President and  
Chief Financial Officer,  
Power Corporation of Canada

**Siim A. Vanaselja, FCPA, FCA**<sup>1,6</sup>

Corporate Director

**Brian E. Walsh**<sup>3,4,5,7</sup>

Principal and Chief Strategist,  
Titan Advisors, LLC

#### Committees

**1. Audit Committee**

Chair: Siim A. Vanaselja

**2. Conduct Review Committee**

Chair: James M. Singh

**3. Governance and Nominating Committee**

Chair: R. Jeffrey Orr

**4. Human Resources Committee**

Chair: Claude G  n  reux

**5. Investment Committee**

Chair: Paula B. Madoff

**6. Risk Committee**

Chair: Gregory D. Tretiak

**7. Reinsurance Committee**

Chair: Gregory D. Tretiak

### Senior Officers

**Paul A. Mahon**

President and Chief Executive Officer

**Arshil Jamal**

President and Group Head,  
Strategy, Investments, Reinsurance  
and Corporate Development

**David M. Harney**

President and Chief Operating Officer,  
Europe

**Jeffrey F. Macoun**

President and Chief Operating Officer,  
Canada

**Edmund F. Murphy III**

President and Chief Executive Officer,  
Empower Retirement

**Robert L. Reynolds**

Chair,  
Great-West Lifeco U.S. LLC  
President and Chief Executive Officer,  
Putnam Investments, LLC

**Philip Armstrong**

Executive Vice-President and  
Global Chief Information Officer

**Graham R. Bird**

Executive Vice-President and  
Chief Risk Officer

**Sharon C. Geraghty**

Executive Vice-President and  
General Counsel

**Garry MacNicholas**

Executive Vice-President and  
Chief Financial Officer

**Grace M. Palombo**

Executive Vice-President and  
Chief Human Resources Officer

**Nancy D. Russell**

Senior Vice-President and  
Chief Internal Auditor

**Anne C. Sonnen**

Senior Vice-President and  
Chief Compliance Officer

**Raman Srivastava**

Executive Vice-President and  
Global Chief Investment Officer

**Dervla M. Tomlin**

Executive Vice-President and  
Chief Actuary

**Jeremy W. Trickett**

Senior Vice-President and  
Chief Governance Officer