

PRIVACY POLICY NOTICE
LEGACY SOLUTIONS INSURANCE, LLC

In the course of our business relationship with you, we collect information about you that is necessary to provide you with our products and services. We treat this information as confidential and recognize the importance of protecting it. You trust us with an important part of your financial life, and we value your confidence in us. You are encouraged to review our privacy policies and procedures carefully.

Federal law, and the laws of the State of Kansas, generally prohibit us from sharing nonpublic personal information about you with a third party unless we provide you with this notice of our privacy policies and practices describing the type of information we collect about you and the categories of persons or entities to whom that information may be disclosed. In compliance with such laws, we are providing you with this notice, which notifies you of the privacy policies and practices of Legacy Solutions Insurance, LLC ("Legacy Solutions"). Further, the laws of the State of Kansas also require that we inform you that we may not share your personal information with a non-affiliated third party for any purpose that is not specifically authorized by law unless we obtain your affirmative permission.

INFORMATION WE COLLECT

We collect and maintain information about you to provide you with the coverage, products, or services you request and to service your account.

We collect certain information ("nonpublic personal information") about you and the members of your household ("you") from the following sources:

- Information we receive from you on applications or other forms, such as your social security number, assets, income, and property information;
- Information about your transactions with us, our affiliates or others, such as your policy coverage, premiums, and payment history;
- Information we receive from a consumer reporting agency or insurance support organization, such as motor vehicle records, credit report information, and claims history;
- Information from your visits to www.legacysolutionsks.com or other websites we operate, use of our social media sites, and interactions with our online advertisements; and
- If you obtain a life, long-term care, or disability product, information we receive from you, medical professionals who have provided care to you, and insurance support organizations, regarding your health.

We may collect nonpublic personal information from individuals other than those proposed for coverage.

If you authorize us to do so, we may obtain information about you from credit reports or other investigative consumer reports prepared by third parties at our request. If you authorize us to request such information and we do request such information, you should be aware that:

- You have the right to request to be interviewed in connection with the preparation of such a report.
- Upon request, you are entitled to receive a copy of the report.
- The information obtained from the report prepared by the third party may be retained by the third party and disclosed to other persons.

HOW WE PROTECT YOUR INFORMATION

At Legacy Solutions, our customers are our most valued assets. Protecting your privacy is important to us. We restrict access to personal information about you to those individuals, such as our employees and agents, who provide you with our products and services. We require those individuals to whom we permit access to your information to protect it and keep it confidential. We maintain physical, electronic, and procedural safeguards that comply with applicable regulatory standards to guard your nonpublic personal information.

We do not disclose any nonpublic personal information about you, as our customer or former customer, except as described in this notice.

INFORMATION WE DISCLOSE

In the course of our general business practices, we may disclose the information that we collect (as described above) about you to others without your permission to the following types of institutions for the reasons described:

- To a third party if the disclosure will enable that party to perform a business, professional, or insurance function for us.
- To an insurance institution, agent, or credit reporting agency in order to detect or prevent criminal activity, fraud, or misrepresentation in connection with an insurance transaction.
- To an insurance institution, agent, or credit reporting agency for either this agency or the entity to whom we disclose the information to perform a function in connection with an insurance transaction involving you.
- To a medical care institution or medical professional in order to verify coverage or benefits, inform you of a medical problem of which you may not be aware, or conduct an audit that would enable us to verify treatment.
- To an insurance regulatory authority, law enforcement, or other governmental authority in order to protect our interests in preventing or prosecuting fraud, or if we believe that you have conducted illegal activities.
- To a group policyholder for the purpose of reporting claims experience or conducting an audit of our operations or services.
- To an actuarial or research organization for the purpose of conducting actuarial or research studies.

In addition to those circumstances listed above, and unless you tell us not to by submitting an Opt Out Form, we may disclose certain information about you to third parties whose only use of the information will be for the purpose of marketing a product or service. Under no circumstances will we disclose for marketing purposes: (1) any medical information; (2) information relating to a claim for a benefit or a civil or criminal proceeding involving you; or (3) personal information relating to your character, personal habits, mode of living, or general reputation.

We are permitted to disclose personal health information (1) to process your transaction with us, for instance, to determine eligibility for coverage, to process claims, or to prevent fraud; (2) with your written authorization; and (3) otherwise as permitted by law.

YOUR RIGHTS

You have the right to request access to the personal information that we have record about you. Your right includes the right to know the source of the information and the identity of the persons, institutions, or types of institutions to whom we have disclosed such information within two (2) years prior to your request. Your right includes the right to view such information and copy it in person, or request that a copy of it be sent to you by mail (for which we may charge you a reasonable fee to cover our costs). Your right also includes the right to request corrections, amendments or deletions of any information in our possession. The procedures that you must follow to request access to or an amendment of your information are as follows:

To obtain access to your information: You should submit a request in writing to Legacy Solutions Insurance, LLC, 2401 N Seth Child Rd, Ste 140, Manhattan, KS 66503. The request should include your name, address, social security number, telephone number, and the recorded information to which you would like access. The request should state whether you would like access in person or a copy of the information sent to you by mail. Upon receipt of your request, we will contact you within thirty (30) business days to arrange providing you with access in person or the copies that you have requested.

To correct, amend, or delete any of your information: You should submit a request in writing to Legacy Solutions Insurance, LLC, 2401 N Seth Child Rd, Ste 140, Manhattan, KS 66503. The request should include your name, address, social security number, telephone number, and the specific information in dispute, and the identity of the document or record that contains the disputed information. Upon receipt of your request, we will contact you within thirty (30) business days to notify you either that we have made the correction, amendment, or deletion, or that we refuse to do so and the reasons for the refusal, which you will have an opportunity to challenge.

SHARING INFORMATION WITH AFFILIATES

Legacy Solutions is affiliated with various organizations that offer a variety of financial products and services in addition to insurance. Sharing information enables our affiliates to offer you a more complete range of products and services.

We may disclose nonpublic personal information, as described above in Information We Collect, to our affiliates, which include: Big Mac Bancshares, Inc., Hoxie, Kansas; Financial Shares, Inc., Morland, Kansas; and Peoples State Bank, Colby, Kansas, Goodland, Kansas, Hill City, Kansas, Hoxie, Kansas, Leonardville, Kansas, Manhattan, Kansas, McDonald, Kansas, Morland, Kansas, Oakley, Kansas, and WaKeeney, Kansas.

We are permitted by law to share with our affiliates our transaction and experience information with you.

In addition, we may share with our affiliates consumer report information, such as information from credit reports and certain application information that we have received from you and from third parties, such as consumer reporting agencies and insurance support organizations.

YOUR CHOICE

If it is your decision not to opt out and to allow sharing of your information with our affiliates, you do not need to request an Opt Out Form or respond to us in any way.

If you have previously submitted a request to opt-out on each of your policies, no further action is required.

You may opt out only by completing an Opt Out Form. You may request additional copies by sending us a request at the address shown on the form. An additional Opt Out Form will be mailed to you shortly after receipt of your request.

If you prefer that we not share consumer report information with our affiliates, except as otherwise permitted by law, you may request an Opt Out Form by calling (785) 789-3441 or emailing info@legacysolutionsks.com (please have all of your policy numbers available when requesting Opt Out Forms). A form will be mailed to your attention. Please verify that all of your policy numbers are listed. If not, please add the policy numbers on the form and mail to the return address printed on the form. We will implement your request within a reasonable time after we receive the form.

MODIFICATIONS TO OUR PRIVACY POLICY

We reserve the right to change our privacy practices in the future, which may include sharing nonpublic personal information about you with nonaffiliated third parties. Before we do that, we will provide you with a revised privacy notice and give you the opportunity to opt out of that type of information sharing.

RECIPIENTS OF THIS NOTICE

We are providing this notice to the named policyholder residing at the mailing address to which we send your policy information. If there is more than one policyholder on a policy, only the named policyholder on that policy will receive this notice, though any policyholder may request a copy of this notice. You may receive more than one copy of this notice if you have more than one policy with Legacy Solutions. You also may receive notices from affiliates, other than those listed above. Please read those notices carefully to determine your rights with respect to those affiliates' privacy practices.

MORE INFORMATION ABOUT THE FEDERAL LAWS?

This notice is required by federal law. If you would like additional information about these federal laws, please view the links on the Federal Trade Commission's website.

QUESTIONS?

If you have questions about this notice or your rights as explained herein, call (785) 789-3441 or email info@legacysolutions.com.