

# Enrollment form

Name \_\_\_\_\_  
first middle initial last

Social Security number \_\_\_\_\_ Email \_\_\_\_\_

Plan ID 134947

## Join the plan—you have options for enrolling.

- Online: <https://myaccount.ascensus.com/rplink>
- Phone: 866-809-8146
- Paper: Complete this form and return it to your employer.

## My savings

Choose how much you would like to save. Your elections must be made in increments of 1%. Additional information on tax benefits is provided under "Your deferral contributions" in the **Plan Highlights** section of this guide. You may choose more than one option.

- Pretax Savings**  
\$\_\_\_\_\_ or \_\_\_\_\_% of my compensation each pay period will be deposited into my pretax retirement account.
- Roth savings**  
\$\_\_\_\_\_ or \_\_\_\_\_% of my compensation each pay period will be deposited into my Roth retirement account.
- I decline to participate in the plan.**  
I understand I can change this decision at any time.

**Know your limits:** The total amount you save in the plan cannot exceed the lesser of either 100% of your annual pay or \$20,500 for the 2022 calendar year.

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# Enrollment form

Name \_\_\_\_\_

first

middle initial

last

Social Security number \_\_\_\_\_ Email \_\_\_\_\_

Plan ID 134947

## My investments

You have a choice when it comes to investing your retirement account assets. You can select a target risk allocation model portfolio OR create a custom mix. Helpful information on choosing investments is available in the **What ways can you invest?** section of this guide and on your plan's retirement website.

**Important:** If you don't make any investment elections but complete the rest of this form, you will be invested in American Funds U.S. Government Money Market Fund Class R-6.

**Option 1:** Select only one; your contribution will be automatically set to 100%, and you cannot select a custom mix below. More information on these models is available in the **What ways can you invest?** section of this guide and on your plan's retirement website.

**Choose a target risk allocation model portfolio, as created and maintained by your plan's fiduciaries.**

- HIGH GROWTH MODEL
  BALANCED APPROACH MODEL
  CAPITAL PRESERVATION MODEL  
 MODERATE GROWTH MODEL
  CONSERVATIVE APPROACH MODEL

**Note:** If you were defaulted into your current investment and select a target risk allocation model portfolio on this form, any current investment balances and future contributions will be allocated based on your target risk allocation model portfolio selection.

**Or**

### Option 2: Create a custom mix

Choose one or more investments as long as the total amounts to 100%. Your elections must be made in increments of 1%. Information on each investment's performance is available on your plan's retirement website and in the **Investment options** section of this guide.

Investment name	Investment %	Investment name	Investment %
<b>Target risk allocation</b>		<b>Bond</b>	
American Funds American Balanced Fund® Class R-6	_____ %	American Funds The Bond Fund of America® Class R-6	_____ %
<b>Equity</b>		American Funds U.S. Government Securities Fund® Class R-6	_____ %
American Funds AMCAP Fund® Class R-6	_____ %	<b>Money market/Stable value</b>	
American Funds EuroPacific Growth Fund® Class R-6	_____ %	American Funds U.S. Government Money Market Fund Class R-6	_____ %
American Funds Fundamental Investors® Class R-6	_____ %	<b>Other</b>	
American Funds SMALLCAP World Fund® Class R-6	_____ %	American Funds Capital World Growth and Income Fund® Class R-6	_____ %
American Funds The Growth Fund of America® Class R-6	_____ %	American Funds New Perspective Fund® Class R-6	_____ %
Artisan Mid Cap Value Fund Investor Class	_____ %	Cohen & Steers Realty Shares Fund Class L	_____ %



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# Beneficiary designation form

This form is used to select primary and contingent beneficiary(ies).

Name \_\_\_\_\_  
first middle initial last

Social Security number \_\_\_\_\_ Email \_\_\_\_\_

Plan ID 134947

- I am not married – I understand that if I become married in the future, my spouse will be my primary beneficiary unless I complete a new beneficiary designation form and my spouse consents to my designation.
- I am married – I understand that my spouse will be my primary beneficiary, unless I designate a primary beneficiary other than my spouse on this form and my spouse signs the section entitled "Consent of spouse."

## Beneficiary designation

The following individual(s) will be your beneficiary(ies). Please check primary or contingent for each individual beneficiary. If neither is checked, the individual will be deemed to be a primary beneficiary.

If any primary or contingent beneficiary dies before you, his or her interest and the interest of his or her heirs will terminate completely, and the percentage share of any remaining beneficiary(ies) will be increased on a pro rata basis. If no primary beneficiary(ies) survives you, the contingent beneficiary(ies) will acquire the designated share of your retirement account balance.

Primary     Contingent  
Beneficiary name \_\_\_\_\_ Percentage \_\_\_\_\_  
Address \_\_\_\_\_  
Tax ID (SSN/EIN) \_\_\_\_\_ Date of birth \_\_\_\_\_  
Beneficiary type:  Spouse     Individual (Relationship \_\_\_\_\_)     Entity     Estate     Trust

Primary     Contingent  
Beneficiary name \_\_\_\_\_ Percentage \_\_\_\_\_  
Address \_\_\_\_\_  
Tax ID (SSN/EIN) \_\_\_\_\_ Date of birth \_\_\_\_\_  
Beneficiary type:  Spouse     Individual (Relationship \_\_\_\_\_)     Entity     Estate     Trust

Primary     Contingent  
Beneficiary name \_\_\_\_\_ Percentage \_\_\_\_\_  
Address \_\_\_\_\_  
Tax ID (SSN/EIN) \_\_\_\_\_ Date of birth \_\_\_\_\_  
Beneficiary type:  Spouse     Individual (Relationship \_\_\_\_\_)     Entity     Estate     Trust

Primary     Contingent  
Beneficiary name \_\_\_\_\_ Percentage \_\_\_\_\_  
Address \_\_\_\_\_  
Tax ID (SSN/EIN) \_\_\_\_\_ Date of birth \_\_\_\_\_  
Beneficiary type:  Spouse     Individual (Relationship \_\_\_\_\_)     Entity     Estate     Trust

Check here if you are designating additional beneficiaries. Please attach a list that includes the information requested for the additional beneficiaries.

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