

**IUE-CWA 401(k) Retirement Savings and Security Plan**  
**PARTICIPANT INFORMATION CHANGE FORM (Plan# 651794)**  
**For Internal Use Only**



- Use this form to make changes to your name, address, marital status, contribution rate, future investment elections or transfer of existing balances.
- Your choices on this form may affect your taxes. You may want to consult a tax or financial advisor.
- Please return this completed form (mail or fax to):  
**Mail: IUE-CWA 401(k) Plan, 2001 E. 3<sup>rd</sup> Street, Bloomington, IN 47401,**  
**Fax: 812-671-9696**

Please check all that apply and complete only the sections of this form that you wish to make changes to. Leave all other sections blank.

- Change of address  Name Change  Marital Status change  Future Investment Election  Transfer of Existing Balances

**1. Participant Information**

Please print clearly in CAPITAL LETTERS.

Marital Status:  Married  Not Married

\_\_\_\_\_  
Employer name

\_\_\_\_\_  
Original date employed

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth (MM-DD-YYYY)

\_\_\_\_\_  
Gender

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
MI

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

(\_\_\_\_\_)\_\_\_\_\_  
Daytime Telephone Number

(\_\_\_\_\_)\_\_\_\_\_  
Evening Telephone Number

\_\_\_\_\_  
E-mail Address

**2. Contribution Rate Election (Must be completed in order to initiate/change your payroll deduction. Minimum of \$4.00 per week or 1% of gross wages is required)**

I elect the following contribution rate(s) (check and complete):

- from my pay on a before-tax basis (any whole percentage between 1% - 100%) \_\_\_\_\_% per pay period
- from my pay on a before-tax basis \$\_\_\_\_\_ per pay period
- from my pay on a before-tax basis \$\_\_\_\_\_ per hour

Please note that if you attain age 50 before the close of the Plan Year, you are eligible to make catch-up contributions in accordance with, and subject to the limitations of, Code Section 414(v). Accordingly, if the election you choose above exceeds the 402(g) limit for the plan year contributions will continue until you reach the maximum contribution amount allowable for that plan year.

### 3. Future Contribution and Existing Balance Changes

You may make changes to both your future contributions and your existing balances below (check and complete as applicable).

Indicate below in whole percentages how your future contributions should be invested in each investment fund. Your choices below will establish one set of future contribution elections for all investment types as well as one transfer election for all investment types. You may also go online or call the Plan's toll-free number to elect separate investment elections by investment type and separate transfer elections by fund and investment type.

Fund Code	Name of Investment Fund:	<input type="checkbox"/> Change Future Contributions to:	<input type="checkbox"/> Transfer Existing Balances to:
N301	American Funds American Balanced A	%	%
N377	PIMCO Total Return	%	%
Z624	Prudential Stock Index Fund	%	%
Z189	T. Rowe Price New America Growth	%	%
Y3XA	Invesco Van Kampen Growth and Income Fund	%	%
S890	Northern Trust Mid Cap Index Fund	%	%
N276	Fidelity Advisor Small Cap Fund	%	%
N266	Invesco International Growth	%	%
Y2KP	Prudential Guaranteed Income Fund	%	%
N910	T. Rowe Price Retirement 2005 Adv	%	%
N614	T. Rowe Price Retirement 2010 Adv	%	%
N911	T. Rowe Price Retirement 2015 Adv	%	%
N615	T. Rowe Price Retirement 2020 Adv	%	%
N912	T. Rowe Price Retirement 2025 Adv	%	%
N616	T. Rowe Price Retirement 2030 Adv	%	%
N913	T. Rowe Price Retirement 2035 Adv	%	%
N617	T. Rowe Price Retirement 2040 Adv	%	%
N914	T. Rowe Price Retirement 2045 Adv	%	%
N870	T. Rowe Price Retirement 2050 Adv	%	%
N916	T. Rowe Price Retirement 2055 Adv	%	%
Y297	T. Rowe Price Retirement 2060 Adv	%	%
	<b>Total must equal:</b>	<b>100%</b>	<b>100%</b>

If your elections above do not equal 100%, your form will be considered incomplete.

Investors should consider the investment objectives, risks, charges and expenses of a fund carefully before investing. For a prospectus or an offering statement containing this and other information about any fund, please call your plan's toll-free number. Read the prospectus or offering statement carefully before making any investment decisions.

### 4. Participant Signature

I authorize the IUE-CWA Retirement Savings and Security Plan to carry out the change(s) indicated on both sides of this form, subject to the terms and provisions of the Plan. An authorized copy of this form will be returned to me acknowledging my elections.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Today's Date (MM-DD-YYYY)

### 5. Fund Office Approval

\_\_\_\_\_  
Signature of Authorized Representative  
2116 Information Change Form (Page 2 of 2)

\_\_\_\_\_  
Date (MM-DD-YYYY)  
CVNR(11)TRS 651794-013 6/8/18