

**IUE-CWA 401(k) Retirement Savings and Security Plan
ENROLLMENT AND ELECTION FORM (Plan# 651794)**



- Use this form to make your employee contribution rate elections and investment selections under the plan.
- If you have not already done so, please ensure that you designate a beneficiary for your account.
- Your choices on this form may affect your taxes. You may want to consult a tax or financial advisor.
- Please keep a copy of this form for your records and return the original completed form to:

Mail: IUE-CWA 401(k) PLAN, 2001 E. 3rd Street, Bloomington, IN 47401

Fax: 812-671-9696

Phone #: 888-803-7449

1. Participant Information
(To be filled out by Participant)

Please print clearly in **CAPITAL LETTERS**.

Marital Status

Married

Not Married

_____-_____-_____
Social Security Number

_____-_____-_____
Date of Birth (MM-DD-YYYY)

Gender

Last Name

First Name

MI

Address

City

State

Zip Code

(_____)_____
Daytime Telephone Number

(_____)_____
Evening Telephone Number

(_____)_____
Mobile Telephone Number

E-mail Address

Employer Name

_____-_____-_____
Original date employed (MM-DD-YYYY)

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

I elect the following contribution rate(s) (check one 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. Your Investment Selections

Indicate below in whole percentages how your future contributions should be invested in each investment fund. *Please note this election will establish one set of elections for all investment types. You may also go online or call the Plan's toll-free number to make your investment elections. If you choose to make your investment elections online you will have the ability to choose different elections for each investment type.*

You must invest 100% of your contribution from Page 1

Fund Code	Name of Investment Fund:	Invest this percent of my future contributions in the fund:
N301	American Funds American Balanced A	%
Y593	Baird Aggregate Bond Inv	%
Y5XB	Harbor Small Cap Value Investor	%
Y5XC	Harding Loevner International Eq Inv	%
Y2GD	JHancock Disciplined Value R3	%
Z551	Northern Small Cap Index	%
S890	Northern Trust Mid Cap Index Fund	%
S478	Oakmark International Investor	%
N377	PIMCO Total Return	%
Y2KP	Prudential Guaranteed Income Fund	%
Z624	PGIM QMA Stock Index Fund	%
Z189	T. Rowe Price New America Growth	%
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	%
Total must equal:		100 %

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.

If a completed form is not received before contributions are received, your contributions will be invested in the plan QDIA. Upon receipt of your completed form, all future contributions will be allocated according to your investment selection. You must contact Transamerica to transfer any existing funds from the QDIA.

4. Participant Signature

I authorize the IUE-CWA Retirement Savings and Security Plan to implement any withholdings indicated on page 1 of this form and to carry out the investment directive selection above. A confirmation of this form will be sent to me acknowledging my elections.

Signature of Participant

Today's Date (MM-DD-YYYY)