## 401(A) Enrollment Form



If you have any questions about this form, please speak with your Human Resources representative. After completing this form, please submit it to your Human Resources representative.

SECTION I – PLAN PARTICIPANT INFORMATION					
Participant Name			Social Security No		
Mailing Address			Date of Birth		
City	State	ZIP	Date of Hire		
Email Address			Phone Number		
Employer Name					

## SECTION II - INVESTMENT DIRECTION

This list is for informational purposes only. You may not select investments on this form. Once you enroll in the Plan, you will be able to make initial investment selections and changes to your investment allocations by visiting <a href="https://www.gacities.com/retirement-and-insurance/defined-contribution-program">https://www.gacities.com/retirement-and-insurance/defined-contribution-program</a> and clicking on "Login for Plan Participants."

The money in your account will automatically be invested into the age appropriate T. <u>Rowe Price Target Date</u> fund, unless you choose otherwise by calling the number or visiting the website listed above. You can find information on each investment fund online at <a href="https://www.gacities.com/retirement-and-insurance/defined-contribution-program-funds">https://www.gacities.com/retirement-and-insurance/defined-contribution-program-funds</a>.

## **Listing of Investment Funds by Type**

## **Target Date Fund**

- T. Rowe Price Retirement 2010 Fund I
- T. Rowe Price Retirement 2015 Fund I
- T. Rowe Price Retirement 2020 Fund I
- T. Rowe Price Retirement 2025 Fund I
- T. Rowe Price Retirement 2030 Fund I
- T. Rowe Price Retirement 2035 Fund I
- T. Rowe Price Retirement 2040 Fund I
- T. Rowe Price Retirement 2045 Fund I
- T. Rowe Price Retirement 2050 Fund I
- T. Rowe Price Retirement 2055 Fund I
- T. Rowe Price Retirement 2060 Fund I
- T. Rowe Price Retirement 2065 Fund I
- T. Rowe Price Retirement 2070 Fund I

## Stable Value

Invesco Stable Value

## General Bond

Prudential Total Return Bond Fund

Vanguard Total Bond Market Index Adm

## Large Company

Vanguard Windsor II Fund Admiral Shares

Vanguard Institutional Index Instl

T. Rowe Price Large Cap Core Growth

#### **Real Asset**

Principal Diversified Real Asset Fund

#### Small-Mid Company

Eaton Vance Atlanta Capital Smid-Cap

Vanguard Extended Market Idx Adm

## <u>International</u>

Vanguard Total Intl Stock Index Instl Hartford International Opportunities

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GEORGIA MUNICIPAL ASSOCIATION, INC. 401(a) DEFINED CONTRIBUTION PLAN

# 401(A) Enrollment Form



## **SECTION III – EXPLANATION**

Under the terms of the Plan, you may designate a beneficiary (an individual) to receive amounts remaining in your Plan account at the time of your death.

You can change your beneficiary designation at any time by going online to <a href="https://www.gacities.com/retirement-and-insurance/defined-contribution-program">https://www.gacities.com/retirement-and-insurance/defined-contribution-program</a> and click on "Login for Plan Participants," or completing a new beneficiary designation form on paper. If you choose to change your beneficiary designation on a paper form rather than online, you must submit the form to the Plan Administrator prior to your death or it will not be effective.

If you do not designate a beneficiary, or your designated beneficiary and any alternate beneficiary predecease you, the terms of the Plan will determine who will receive payment of your Plan account.

	TION OF BENEFICIARY (Attach Ad hereby designate the following as my primary		
Name	Spouse/Non-Spouse	Date of Birth	Percentage
Name	Spouse/Non-Spouse	Date of Birth	Percentage
B. Alternate Beneficiary(ies). I beneficiary(ies) under the Pla	If my primary beneficiary(ies) predecease me lan (total must equal 100%):	∍, I hereby designate the followin	ıg as my alternate
Name	Spouse/Non-Spouse	Date of Birth	Percentage
Name	Spouse/Non-Spouse	Date of Birth	Percentage
Name	Spouse/Non-Spouse	Date of Birth	Percentage
SECTION V - SIGNATU	IRE		
Participant's Signature		/ 	_/
Employer Use Only			
Authorized Signature		// Date	

In the event of a conflict between this form and Federal law or the Plan Documents, Federal law or the Plan Documents will control.

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## GEORGIA MUNICIPAL ASSOCIATION, INC. 401(a) DEFINED CONTRIBUTION PLAN

# 401(A) Enrollment Form



## SECTION VI – ADDITIONAL INFORMATION REGARDING DEFFERALS

**Investment Elections.** Investment elections for contributions will default to your applicable Target Date Fund unless you make an investment election online. To make an initial investment election or change a previous investment election or allocation, visit <a href="https://www.gacities.com/retirement-and-insurance/defined-contribution-program">https://www.gacities.com/retirement-and-insurance/defined-contribution-program</a> and click on "Login for Plan Participants."

**Effective date/term/changes.** This Form is effective on the date the Plan Administrator accepts it and remains in effect until I change (revoke or modify) it. I may change this Form only by providing to the Plan Administrator a new Form or by updating the applicable information online at <a href="https://www.gacities.com/retirement-and-insurance/defined-contribution-program">https://www.gacities.com/retirement-and-insurance/defined-contribution-program</a> and click on "Login for Plan Participants."

**Investment.** My 401(a) defined contribution account(s) will be subject to Trust investment gain or loss in accordance with my investment direction.

**Duty to review pay records.** I understand I have a duty to review my pay records (pay stub, etc.) to confirm the Employer has properly implemented my contributions under the 401(a) defined contribution plan. Furthermore, I have a duty to inform the Plan Administrator if I discover any discrepancy between my pay records and the Plan. I understand that my failure to report any discrepancy may result in a loss of or reduction in my Plan assets.