The University of Georgia 403(b) Deferred Compensation Plan

Enrollment Form

This form may be used for initial allocation elections only. All future changes must be made by either phone or web. Attempted allocation changes using this form, other than your initial allocation, will not be accepted.

STEP 1: Tell us about yourself

Information provided on this form will be used exclusively for the administration of your account and sending financial documents and information related to your plan.

Choose the appropriate title: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ Dr. ☐ Other ____________________

Name: SS#:

Last First Middle

Address:

Street City State Zip

Birth date: Date of hire: Daytime phone: ( ) Evening phone: ( )

☐ Married Occupation:________________________

☐ Not married Work hours:________________________

e-mail address:________________________________

☐ I elect to receive future communications regarding fund data, including prospectus and fund reports, sent to my e-mail address above.

STEP 2: Name your beneficiary(ies)

To name more beneficiaries than this space permits, list them on a separate sheet, sign and date it, then attach it to this form and check this box: ☐ More beneficiaries attached ☐ I'm making changes to my existing beneficiary

Primary beneficiary

Name: SS#: Share: %

Last First Middle

Address:

Street City State Zip

Date of birth: Relationship: *(choose one)* ☐ Spouse ☐ Daughter/Son ☐ Parent ☐ Other

CHECK ONE: ☐ Primary beneficiary ☐ Secondary beneficiary

Name: SS#: Share: %

Last First Middle

Address:

Street City State Zip

Date of birth: Relationship: *(choose one)* ☐ Spouse ☐ Daughter/Son ☐ Parent ☐ Other

CHECK ONE: ☐ Primary beneficiary ☐ Secondary beneficiary

Name: SS#: Share: %

Last First Middle

Address:

Street City State Zip

Date of birth: Relationship: *(choose one)* ☐ Spouse ☐ Daughter/Son ☐ Parent ☐ Other

STEP 3: Choose your investment options

Option 1: Use *LifeSpan*® Asset Allocation Models

Pre-Tax Contributions (Please select only one model.)

Risk-based Models (Pre-tax)		Time-based Models (Pre-tax)					
Conservative Model	☐ 100%						
Moderately Conservative Model	☐ 100%	2010 Model	☐ 100%	2025 Model	☐ 100%	2040 Model	☐ 100%
Moderate Model	☐ 100%	2015 Model	☐ 100%	2030 Model	☐ 100%	2045 Model	☐ 100%
Moderately Aggressive Model	☐ 100%	2020 Model	☐ 100%	2035 Model	☐ 100%	2050 Model	☐ 100%
Aggressive Model	☐ 100%						

Roth Contributions (Please select only one model.)

Risk-based Models (Roth)		Time-based Models (Roth)					
Conservative Model	☐ 100%						
Moderately Conservative Model	☐ 100%	2010 Model	☐ 100%	2025 Model	☐ 100%	2040 Model	☐ 100%
Moderate Model	☐ 100%	2015 Model	☐ 100%	2030 Model	☐ 100%	2045 Model	☐ 100%
Moderately Aggressive Model	☐ 100%	2020 Model	☐ 100%	2035 Model	☐ 100%	2050 Model	☐ 100%
Aggressive Model	☐ 100%						

Periodically, your account balances will be automatically rebalanced according to the LifeSpan® asset allocation model's investment mix; and you have agreed to participate in any changes in the investment mix for the LifeSpan® asset allocation models as the plan sponsor may deem appropriate from time to time keeping with the investment objectives of the selected model. The models will automatically rebalance semi-annually on January 5th & July 5th.

***OR* - (Complete this next section ONLY IF you did not select a LifeSpan® Asset Allocation Model above)**

(Please see reverse side)

Option 2: Determine your own asset allocation percentages.

Fill in your own investment percentages. Your percentages must add up to 100% in increments of 1%.

Investment options	*Pre-tax Contributions*	*Roth Contributions*
Cash and Stable Value Investments		
Lincoln Stable Value Account	%	%
Bonds		
BlackRock Inflation Protected Bond A	%	%
Delaware Diversified Income A	%	%
Principal High Yield A	%	%
Vanguard Interm-Term Bond Index	%	%
Stocks		
Allianz NFJ Small Cap Value A	%	%
American Funds Capital World G/I R5	%	%
American Funds EuroPacific Gr R5	%	%
American Funds Fundamental Invs R5	%	%
American Funds Grth Fund of Amer R5	%	%
Calvert Social Investment Equity A	%	%
Columbia Mid Cap Value A	%	%
MFS Utilities R4	%	%
Vanguard 500 Index Investor	%	%
Vanguard Developed Markets Index	%	%
Vanguard International Value	%	%
Vanguard REIT Index	%	%
Vanguard Small Cap Index	%	%
Vanguard Total Stock Mkt Idx	%	%
Vanguard Windsor II	%	%
Total:	**100%**	**100%**

If you determined your own asset allocation percentages, do you want your assets Automatically Rebalanced?

If **YES**, select a frequency for each source shown below. (For a detailed explanation regarding this feature, please refer to your Enrollment booklet.)

Pre-Tax Account Balance	☐ **Quarterly**	☐ **Semi-annually**	☐ **Annually**	**Start Date:** / /
Roth Account Balance	☐ **Quarterly**	☐ **Semi-annually**	☐ **Annually**	**Start Date:** / /

STEP 4: Sign your name

- By signing below, I certify that:
- I have read, understand and agree to the terms on this form, the disclosures outlined in "Important information about your plan," and the distribution restrictions contained in the enrollment booklet.
- I understand that I have a choice of how I receive prospectuses explaining the underlying investment options. I have received prospectuses in the following format:

  ☐ CD. I acknowledge that I have access to and can operate a computer with a CD drive. Information about how to request a paper prospectus, both now and in the future, is contained on the CD cover or by calling 800-234-3500.

  ☐ Paper prospectus.
- My investment choices are my own, and they were not recommended to me by Lincoln Financial Advisors or any other organization affiliated with the *Lincoln Alliance*® program.
- I understand that I can make changes to the data on this form on the Internet at www.LincolnAlliance.com or by calling the *Lincoln Alliance*® program Customer Service line at 800-234-3500.

Participant's signature **X** Date RC name:

Return this form to: **Jeff Young, CRPC,** c/o Cannon Financial Strategist, Inc., 649-8 S. Milledge Ave, Athens, GA 30605