

Change Deferral Form

Township of Plainsboro NJ 457(b) Plan

Township of Plainsboro NJ

62775-1-1

1 Enter your personal information (Please print clearly)

Employee Surviving Beneficiary (attach notice of death form) Alternate Payee (attach a QDRO form)

Participant's Name (First, Middle Initial, Last)

Participant's Social Security Number (SSN)

Street Address

Apt. No.

Birthdate: mm - dd - yyyy

City

State

Zip

()

()

Daytime Phone

Evening Phone

Email Address

Marital Status: Married Single or Legally Separated

Check here to sign up for email notification*

Plan Administrator Use Only (Form cannot be processed without this required information and signature)

Hire Date ____ / ____ / ____ Plan Entry Date ____ / ____ / ____

Payroll Frequency: Monthly (12/Yr) Semi-Monthly (24/Yr) Bi-Weekly (26/Yr) Weekly (52/Yr)

Years of credited services as of last plan year end: _____ (if this information is NOT provided, MassMutual will assume the employee has completed a year of service for each year since hire date.)

As Plan Administrator, I acknowledge receipt, accuracy, completeness including participant's signature.

Plan Administrator Signature

Date

2 Choose your payroll deduction method

Payroll Deduction Change: I authorize this election to supersede any prior election, and I understand I may revoke this election at any time or change this election as allowed by the Plan. The most recently dated activity will prevail.

Before-Tax Contribution Change: Change my contribution percentage for Before-Tax account contributions to ____ %. Each before-tax contribution amount cannot exceed any applicable limit set by the Plan. In addition, total before-tax contributions to all qualified retirement plan(s) you participate in cannot exceed \$18,500 for the 2018 calendar year.

Keep my percentage for Before-Tax account contributions.

Roth Contribution Change: ____ % of my compensation each pay period for deposit to my Roth account (not to exceed any Roth contribution limits set by the plan; read your summary plan description for more details).

Decline Plan Participation: I elect to make no contributions (0%) at this time. I understand I may revoke this election at any time or I may change this election as allowed by the Plan.

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Investment Options	All Contributions	Short Term	Conservative	Moderate	Aggressive	Ultra Aggressive
Federated MDT Small Cap Grw Fd	%	-	-	-	1%	1%
Virtus KAR Small-Cap Gwth Fd	%	-	1%	1%	-	-
DFA International Core Eq Fd	%	-	5%	10%	15%	17%
Premier Global Fund (OFT)	%	-	-	1%	2%	3%
Oppenheimer Global Opport Fund	%	-	-	-	-	-
Vanguard REIT Index Fund	%	-	2%	3%	4%	4%
Vanguard Materials Index Fund	%	-	-	-	-	-

4 Sign, date and return your forms

Please provide your signature and return to your Plan Administrator. After receipt of this form, MassMutual will send you written confirmation once your account is established. I understand I may revoke this election at any time or I may change this election as allowed by the Plan. I understand that the maximum annual limit on contributions is determined under the Plan document and the Internal Revenue Code. Any amounts contributed may be reduced or returned to me as required by these limitations.

X

Participant's Signature

Date

IMPORTANT NOTE: IF YOU ENROLL BY MAILING THIS FORM TO MASSMUTUAL, BUT THEN SUBSEQUENTLY CHANGE YOUR ELECTIONS THROUGH THE AUTOMATED PHONE LINE OR THE PARTICIPANT WEBSITE, THE MOST RECENTLY DATED ACTIVITY WILL PREVAIL. FOR YOUR MAILING ADDRESS, PROVIDE EITHER A STREET ADDRESS OR P.O. BOX, NOT BOTH. IF YOU PROVIDE BOTH, MASSMUTUAL WILL FOLLOW USPS GUIDELINES AND USE THE P.O. BOX AS YOUR MAILING ADDRESS.

If you have selected an investment strategy and one or more of the strategy's component investments listed on your form has been replaced, any contributions that would have been invested in that component investment will be invested according to the investment allocation in effect at the time the strategy is implemented and the new component will be listed on your confirmation form.

Investors should consider an investment's objectives, risks, charges and expenses carefully before investing. For this and other information, see the prospectus available from your plan sponsor, on the participant website at www.retiresmart.com or by contacting our Participant Information Center at 1-800-743-5274 between 8:00 a.m. and 8:00 p.m. ET, Monday through Friday. Read it carefully before investing.

**By selecting 'Email Notification' in Section 1 above, you are consenting to receive electronic notices regarding materials for your retirement plan. You will receive an email notification that will contain a link to our secure participant website log-in page. Once you log-in to your account, you will be able to view all available plan-related documents referenced in the electronic notice. You may view the documents online, save them to your personal computer, or print them for your records. Documents will be posted either in HTML or PDF format. By electing 'Email Notification,' you are verifying that you possess the ability to view and download HTML and PDF documents. These documents are required under Title I of ERISA and may include, for example, a Summary Plan Description, a Summary of Material Modification, individual benefit statements, investment related information, as well as any notice or communication required under the Internal Revenue Code (IRC) including but not limited to, loan notes, notices of interest parties, and notices of available distribution options. If an or cancellation the event of an invalid email address, full mailbox, or spam settings, MassMutual will send printed material via U.S. mail. The election or cancellation date of the email notification program may result in notifications remaining in their existing delivery method for a short period of time. Adobe Acrobat Reader version 7.0 or higher is required to view retirement statements. Visit www.adobe.com for a free download.*

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