For questions on this form please call Vanguard Participant Services at 800-523-1188.

U.A. Local No. 159
Defined Contribution Plan

Plan # 093668

Enrollment/Change

Account Information

Check one: ☐ New Enrollment ☐ Name or Address Change

Social Security # ___ – ___ – ____

Name (Last, First, MI)

Address

City **State** **Zip**

Date of Birth (mm/dd/yyyy) ___ – ___ – ____

Daytime Phone # ___ – ___ – ____ **Evening Phone #** ___ – ___ – ____

Investment Directions

I hereby direct that all future amounts of my plan contributions be invested in the following manner. Contributions must be in increments of 1% and the total must equal 100%.

Fund Code	Fund Name	Allocation
00008H	Vanguard Retirement Savings Trust	
00003D	Vanguard Intermediate-Term Bond Index Fund	
000084	Vanguard Total Bond Market Index Fund	
000002	Vanguard Balanced Index Fund	
000093	Vanguard Growth and Income Fund	
000027	Vanguard Wellesley Income Fund	
000048	Vanguard Small-Cap Index Fund	
00001C	Vanguard Total International Stock Index Fund	
00007L	Vanguard LifeStrategy Income Fund	
00009D	Vanguard LifeStrategy Moderate Growth Fund	
00001K	Vanguard LifeStrategy Growth Fund	
00001L	Vanguard Real Estate Index Fund	
000040	Vanguard 500 Index Fund	
000011	Vanguard Treasury Money Market Fund	
0000XT	Vanguard Inflation-Protected Securities Fund	
0000X9	Vanguard Mid-Cap Index Fund	
003111	MainStay High Yield Corporate Bond Fund	

Your allocations must total 100%. 1 0 0

Note: If you fail to complete the investment elections above, your contribution will automatically be invested in the Vanguard Wellesley Income Fund (000027). If you are an existing participant and you would like to make an exchange, change future contributions, or rebalance your account, please log onto Vanguard.com or call Vanguard Participant Services at 800-523-1188. Existing participants may also change future investment directions by calling Vanguard Participant Services.

Authorization

Signature of Participant Date

To Be Completed By Plan Sponsor

Vanguard Processing Only - Plan Entry Date/DOH = Today's date

Signature of HSBA Plan Representative Date

Please make a copy for your records.

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(01/31/2018)

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