



NC Plans Processing Center
PO Box 5340
Scranton, PA 18505

Questions?
Call 1-866-627-5267
for assistance.

What Department do you work in?

(Please print entire department name)

Investment Allocation

(Please fill out Part I, II or Part III. Do not fill out more than one section.)

OR

OR

Fill out Part I, II or Part III. Please complete only one section.

By completing one of these sections, you enroll in GoalMaker®, Prudential's asset allocation program, and you direct Prudential to invest your contribution(s) according to a GoalMaker model portfolio that is based on your risk tolerance and time horizon. You also direct Prudential to automatically rebalance your account according to the model portfolio chosen upon enrollment and on a quarterly basis. Enrollment in GoalMaker can be canceled or changed at anytime.

Part I GoalMaker with Automatic Age Adjustment:

Choose Your Risk Tolerance ☐ Conservative ☐ Moderate ☐ Aggressive

GoalMaker also automatically adjusts your allocations over time based on your current age and the expected retirement age. To ensure that your allocations are updated correctly please confirm your expected retirement age below. If an Expected Retirement Age is not provided, age 65 will be used.

Expected Retirement Age: _____

Part II GoalMaker without Automatic Age Adjustment

By completing this section, I confirm that I do not want to take advantage of GoalMaker's Age-Adjustment Feature. Please invest my contributions according to the model portfolios selected below.

Please refer to the Retirement Planning Guide for more information.

GoalMaker without Automatic Age Adjustment:

GoalMaker Model Portfolio (check one box only)

Time Horizon	Conservative	Moderate	Aggressive
0 to 5 Years to retirement	<input type="checkbox"/> C01	<input type="checkbox"/> M01	<input type="checkbox"/> R01
6 to 10 Years to retirement	<input type="checkbox"/> C02	<input type="checkbox"/> M02	<input type="checkbox"/> R02
11 to 15 Years to retirement	<input type="checkbox"/> C03	<input type="checkbox"/> M03	<input type="checkbox"/> R03
16 Plus Years to retirement	<input type="checkbox"/> C04	<input type="checkbox"/> M04	<input type="checkbox"/> R04

Part III Design your own investment allocation

Please designate the percentage of your contribution to be invested in each of the available investment options. (Please use whole percentages. The total must equal 100%.)

I wish to allocate my contributions to the Plan as follows:

Percent Allocated	Codes	Investment Options
_____%	NM	North Carolina Stable Value Fund - 401K Plan
_____%	YA	NC Fixed Income Fund
_____%	YG	NC Large Cap Value
_____%	YH	NC Large Cap Index
_____%	YF	NC Large Cap Growth
_____%	YE	NC Small Mid Cap Value
_____%	YD	NC Small Mid Cap Index
_____%	YB	NC Small Mid Cap Growth
_____%	YI	NC International Index
_____%	YC	NC International
_____%	YJ	NC Global Equity
1 0 0 %	Total	

This form must be completed accurately and received by Prudential Retirement **before** Prudential Retirement receives contributions on your behalf. If a completed form is not received, Prudential will invest contributions in the Plan's default investment option. Upon receipt of your completed enrollment form, **all future** contributions will be allocated according to your investment selection. You may contact Prudential Retirement to transfer any **existing** funds from the default investment option to any other fund(s) in the plan.

Your Authorization

I direct my employer to make payroll deductions as I have indicated. I understand that upon enrollment, I will have telephone and/or internet privileges to perform transactions via Prudential's Interactive Voice Response service and Online Retirement Center.

This section must be completed in order to process your enrollment.

I agree that Prudential Retirement, the Plan's trustees or the state of North Carolina will not be liable for any loss, liability, cost or expense for implementing my instructions via the Internet or by telephone. I understand that Prudential Retirement will execute on my instructions only when proper identification is simultaneously provided. This identification may consist of information that Prudential Retirement may reasonably deem necessary to establish my identity. I hereby give Prudential Retirement the right to tape record the telephone conversation of any telephone instructions received by Prudential Retirement.

X

Participant's signature

Date _____

Social Security Number _____