



Participant Enrollment Worksheet On-Line Systems, Inc. 401(k) Plan

Please complete all sections of this form and return it to your Plan Administrator.

Section A: Enrollment Instructions

Please complete this worksheet and enroll in the Plan by logging into your account through www.RiversEdgeRet.com, or by calling the Voice Response System at (888) 440-1463 (888-4-401-INF). Follow the instructions in either system and they will guide you through the steps necessary to complete your enrollment.

Section B: Deferral Amount

Enter the amount you would like to contribute from each paycheck. Note that electing to contribute either a pre-tax contribution or a Roth 401(k) after-tax contribution is a selection of your own options, and you are thus opting out of the Automatic Contribution Arrangement.

- Your plan provides for an Automatic Contribution Arrangement (3% deferral) unless you choose to select your own options or opt out. Check here if you will keep the Plan's default Automatic Contribution Arrangement.
- I intend to select my own options. I will instruct the Payroll Department to defer from each paycheck the following **whole percentage** as a **pre-tax contribution** toward my retirement: _____% (up to 100%) of my salary.
- I intend to select my own options. I will instruct the Payroll Department to defer from each paycheck the following **specific dollar amount** as a **pre-tax contribution** toward my retirement: \$_____ of my salary.
- I intend to opt out of the Automatic Contribution Arrangement, and I will elect not to contribute at this time.

Section C: Roth 401(k) Amount

Enter the amount you would like to contribute from each paycheck. Note that electing to contribute either a pre-tax contribution or a Roth 401(k) after-tax contribution is a selection of your own options, and you are thus opting out of the Automatic Contribution Arrangement.

- I intend to select my own options. I will instruct the Payroll Department to defer from each paycheck the following **whole percentage** as an **after-tax Roth 401(k) contribution** toward my retirement: _____% (up to 100%) of my salary.
- I intend to select my own options. I will instruct the Payroll Department to defer from each paycheck the following **specific dollar amount** as an **after-tax Roth 401(k) contribution** toward my retirement: \$_____ of my salary.
- I will elect not to contribute a Roth 401(k) contribution amount at this time.

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Section D: Investment Elections (Choose your investment elections by entering your desired allocation in each fund in the % column.)

Ticker	Fund Name	Style	% (minimum of 4%)
-----	MORLEY STABLE VALUE FUND 50	STABLE VAUE	_____ %
LSBDX	LOOMIS SAYLES BOND FUND I	MULTISECTOR BOND	_____ %
TWEIX	AMERICAN CENTURY EQUITY INCOME INV	LARGE VALUE	_____ %
VDIGX	VANGUARD DIVIDEND GROWTH INV	LARGE BLEND	_____ %
VFIAX	VANGUARD 500 INDEX ADMIRAL	LARGE BLEND	_____ %
JENSX	JENSEN QUALITY GROWTH J	LARGE GROWTH	_____ %
JMCVX	JANUS HENDERSON MID CAP VALUE T	MID-CAP VALUE	_____ %
VSIAX	VANGUARD SMALL CAP VALUE INDEX ADMIRAL	SMALL VALUE	_____ %
BPTRX	BARON PARTNERS RETAIL	MID-CAP GROWTH	_____ %
JAVTX	JANUS HENDERSON VENTURE T	SMALL GROWTH	_____ %
FMIJX	FMI INTERNATIONAL	FOREIGN LARGE BLEND	_____ %
OAKGX	OAKMARK GLOBAL INVESTOR	WORLD LARGE STOCK	_____ %
OAKBX	OAKMARK EQUITY AND INCOME INVESTOR	ALLOCATION--50% TO 70% EQ	_____ %
VTINX	VANGUARD TARGET RETIREMENT INCOME INV	TARGET-DATE RETIREMENT	_____ %
VTXVX	VANGUARD TARGET RETIREMENT 2015 INV	TARGET-DATE 2015	_____ %
VTWNX	VANGUARD TARGET RETIREMENT 2020 INV	TARGET-DATE 2020	_____ %
VTTVX	VANGUARD TARGET RETIREMENT 2025 INV	TARGET-DATE 2025	_____ %
VTHRX	VANGUARD TARGET RETIREMENT 2030 INV	TARGET-DATE 2030	_____ %
VTHHX	VANGUARD TARGET RETIREMENT 2035 INV	TARGET-DATE 2035	_____ %
VFORX	VANGUARD TARGET RETIREMENT 2040 INV	TARGET-DATE 2040	_____ %
VTIVX	VANGUARD TARGET RETIREMENT 2045 INV	TARGET-DATE 2045	_____ %
VFIFX	VANGUARD TARGET RETIREMENT 2050 INV	TARGET-DATE 2050	_____ %
VFFVX	VANGUARD TARGET RETIREMENT 2055 INV	TARGET-DATE 2055	_____ %
VTTSX	VANGUARD TARGET RETIREMENT 2060 INV	TARGET-DATE 2060+	_____ %
-----	SCHWAB PCRA *	SELF-DIRECTED BROKERAGE WINDOW	_____ %
TOTAL			100%

*Schwab Personal Choice Retirement Account Option - There are additional risks and costs associated with a self directed brokerage account. By selecting this option, I acknowledge these risks and costs and agree to submit a completed LPOA Participant Form to open a Schwab PCRA. I understand that my election will not be effective until the LPOA has been submitted. When the Schwab PCRA account is open, I will have access to transfer funds from the plan's core investment funds to the PCRA via www.RiversEdgeRet.com or the IVR 888-440-1463. In addition, once the Schwab PCRA is open, the account holder can contact Schwab's PCRA Hotline at, **888-393-7272** to speak with a Schwab PCRA Registered Representative (Weekdays, 9:00 a.m.-7:30 p.m. ET) for specific questions on managing your account.

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Section E: Beneficiary Designation

If you are single, or if you are married and your primary beneficiary is singularly your spouse, you can add, modify, or delete the beneficiaries in your account through www.RiversEdgeRet.com. In these cases, you will not need to submit a paper Participant Beneficiary Form.

Note that designating your beneficiaries is an important step in setting up and managing your account. The designation of a beneficiary can have important tax consequences. You are encouraged to consult with your tax advisor. In addition, you should periodically review and update your beneficiary designations as appropriate.

A primary beneficiary is the first person or organization to receive the proceeds of a retirement account upon the death of the plan participant. If you have more than one primary beneficiary, your death benefit will be divided according to the percentages you specify. Should a beneficiary predecease you, his/her share of the death benefit will be reallocated proportionately to surviving primary beneficiaries.

If you are married, your primary beneficiary will be your spouse, by law, unless you elect another primary beneficiary AND your spouse consents in writing. If you want to take this action, when you enroll through www.RiversEdgeRet.com, please enter your beneficiary designations online as part of your enrollment AND ALSO complete a hard-copy Participant Beneficiary Form (DO NOT SUBMIT THIS ENROLLMENT WORKSHEET). The form is available on this site or through your Plan Administrator. If you elect to enroll through the Voice Response System, you will need to complete and submit a paper Participant Beneficiary Form, regardless of your beneficiary designations.

Contingent beneficiaries receive benefits only if there is no surviving primary beneficiary. Should a contingent beneficiary predecease you, their share of the death benefit will be reallocated proportionately to surviving contingent beneficiaries.

Primary Beneficiary (ies)

Note that Share % amounts must total 100%

Relationship	Name	Share %	Social Security Number	Birth Date
Phone Number:		Address:		

Relationship	Name	Share %	Social Security Number	Birth Date
Phone Number:		Address:		

Contingent Beneficiary (ies)

Note that Share % amounts must total 100%

Relationship	Name	Share %	Social Security Number	Birth Date
Phone Number:		Address:		

Contingent Beneficiary (ies) (continued)

Relationship	Name	Share %	Social Security Number	Birth Date
Phone Number:		Address:		