

AdvanStaff, Inc.

Enrollment Form



For faster processing, you may enroll quickly and easily online at slavic401k.com.

Participant Information

Name: First Middle Last

Address

City State Zip Telephone (Including area code) ()

Date of Birth Social Security Number Date of Hire

Email Address

I hereby affirmatively elect to receive electronically the weekly 401(k) Email Express and the following section 2550.404a-5 disclosures and notices which I direct to be emailed to the address that I have provided:

Eligibility Notice; Qualified Default Investment Alternatives (QDIA) Notice; Safe Harbor Notice (if elected by the Plan Sponsor); Summary Plan Description (SPD), which contains plan benefits and disclosure of fees that affect your account; Auto Enrollment Notice (if elected by the Plan Sponsor); Trade Confirmations; Summary Annual Report (SAR) of the Plan; Summary Prospectus for the mutual funds available in your Plan; Amendments or modifications made to the Plan; Quarterly Statements; Form ADV; Form 1099-R; Routine changes to account information including contact information, verification information and account beneficiaries.

Are you an owner, a relative of an owner, or did you make over \$130,000 last year with your current worksite employer? Yes No

Employer Information

Worksite Employer Telephone (Including area code) ()

Contribution Instructions

I elect to defer Traditional 401(k) ____% or \$ ____ Per pay period. The Total contribution between the Roth and Traditional pre-tax 401(k) may not exceed \$19,500 for 2021.
AND/OR

I elect to defer ROTH 401(k) ____% or \$ ____ Per pay period. The Total contribution between the Roth and Traditional pre-tax 401(k) may not exceed \$19,500 for 2021.

Note

Fractional percentages will be rounded to the nearest whole percentage. The total amount may not exceed 98% of your compensation or \$19,500 per year, whichever is less. This deduction will continue until your employer receives written notice of change. Key and Highly Compensated Employees are limited by a test to their deferral percentage. Participants over age 50 may defer an additional \$6,500 (Max \$26,000 under the catch-up EGTRRA 2001 provision.)

Please select your investment allocation on the following page. If you do not make an investment election, your account will be invested at the direction of the Trustee into the plans default investment option; a managed account or target date fund.

I do not wish to make deferral contributions at this time.

Participant and Employer hereby mutually agree that Employer shall reduce and withhold the above salary reduction amount/percentage from the Participant's Compensation. The Employer shall contribute the amount so withheld to the voluntary 401(k) qualified plan (the Plan, terms and conditions are hereby incorporated by reference). This shall be in effect until Employer receives written notice of change. No distributions will be allowed before age 59 1/2 while still employed by the worksite, and on the plan sponsor's payroll provider.

Signature of Participant

Date

You must select either section (A) Bespoke Automated Investment Allocation Service, (B) Pre-Allocated Portfolio, or (C) Self-Directed. If a selection is made in multiple options, Self-Directed will take precedent. If no investment allocation is selected, you will be invested in the plan's Qualified Default Investment Alternative (QDIA).

A. Bespoke Automated Investment Allocation Service

An individually tailored portfolio will be dynamically allocated according to your personal financial circumstances. Through the Bespoke Automated Investment Allocation Service software, Slavic Mutual Funds Management Corporation (SMF), an ERISA 3(38) management Fiduciary as well as an SEC registered Investment Advisor will allocate your account with equity and fixed income positions according to your age, and then rebalance your account on or about your birthday each year. To further refine your allocations, SMF will include the personal financial data that you submit through the Bespoke portal on our website. Just prior to your birthday, we will send you an email with a link that will allow you to make changes that may have occurred to your profile throughout the year. You may also update your profile at any time by visiting the Bespoke page in your account.

B. Pre-Allocated Portfolio

- Aggressive Allocation** These options allocate your account with equity and fixed income positions according to your target risk profile. These allocations do not automatically adjust to changes in your risk profile. Please take the risk profile test on the website or in the enrollment booklet to determine your current risk profile. All Pre-Allocated Options are managed by Slavic Mutual Funds Management Corp. (SMF), an ERISA 3(38) Fiduciary Advisor. SMF is an affiliate of Slavic401k and charges a 0.25% management fee for this service which is in addition to the plan asset fee.
- Moderate Allocation**
- Conservative Allocation**

C. Self-Directed Fund Options

*Specialty Investment Funds		%	Small/Med. Co. Domestic Stock Funds		%
*FUFRX	Franklin Utilities R6	_____	FSMDX	Fidelity® Mid Cap Index	_____
*OGMIX	Invesco Gold & Special Minerals R6	_____	VIMAX	Vanguard Mid Cap Index Admiral	_____
*PRNEX	T. Rowe Price New Era	_____	VSGAX	Vanguard Small Cap Growth Index Admiral	_____
*VGELX	Vanguard Energy Adm	_____	VSMAX	Vanguard Small Cap Index Adm	_____
*VITAX	Vanguard Information Technology Idx Adm	_____	VSIAX	Vanguard Small Cap Value Index Admiral	_____
*VMIAx	Vanguard Materials Index Admiral	_____	Large Co. Domestic Stock Funds		
*VGSLX	Vanguard Real Estate Index Admiral	_____	BKTSX	iShares Total US Stock Market Idx K	_____
Foreign/Global Company Stock Funds			SVSPX	State Street S&P 500 Index N	_____
REGX	American Funds Europacific Growth R6	_____	PRDGX	T. Rowe Price Dividend Growth	_____
FPADX	Fidelity® Emerging Markets Idx	_____	VTSAX	Vanguard Total Stock Mkt Idx Adm	_____
BTMKX	iShares MSCI EAFE Intl Idx K	_____	VWUAX	Vanguard US Growth Admiral™	_____
PRASX	T. Rowe Price New Asia	_____	VVIAX	Vanguard Value Index Adm	_____
VTIAX	Vanguard Total Intl Stock Index Admiral	_____	Target Date/Asset Allocation		
Bond/Money Market/Stable Value Funds			VITVX	Vanguard Instl Trgt Retire 2015 Instl	_____
FXNAX	Fidelity® US Bond Index	_____	VITWX	Vanguard Instl Trgt Retire 2020 Instl	_____
PHYZX	PGIM High Yield Z	_____	VRIVX	Vanguard Instl Trgt Retire 2025 Instl	_____
VMFXX	Vanguard Federal Money Market Investor	_____	VTTWX	Vanguard Instl Trgt Retire 2030 Instl	_____
VAIPX	Vanguard Inflation-Protected Secs Adm	_____	VITFX	Vanguard Instl Trgt Retire 2035 Instl	_____
VBILX	Vanguard Interm-Term Bond Index Adm	_____	VIRSX	Vanguard Instl Trgt Retire 2040 Instl	_____
VBIRX	Vanguard Short-Term Bond Index Adm	_____	VITLX	Vanguard Instl Trgt Retire 2045 Instl	_____
VSGDX	Vanguard Short-Term Federal Adm	_____	VTRLX	Vanguard Instl Trgt Retire 2050 Instl	_____
VTAPX	Vanguard Shrt-Term Infl-Prot Sec Idx Adm	_____	VIVLX	Vanguard Instl Trgt Retire 2055 Instl	_____
VBTLX	Vanguard Total Bond Market Index Adm	_____	VILVX	Vanguard Instl Trgt Retire 2060 Instl	_____
			VSXFX	Vanguard Instl Trgt Retire 2065 Instl	_____
			VITRX	Vanguard Instl Trgt Retire Inc Instl	_____

Total Must Equal 100%

*Specialty investments are high risk and only suitable as a small portion of your overall portfolio. Do not exceed 10% of your total assets in any one of these funds or 30% in any combination. Conservative investors close to retirement should not invest in these funds without professional guidance.

All funds and portfolios bear some risk and your account could suffer a loss. There is no guarantee of future performance. Prospectuses are also available online at slavic401k.com.

Signature of Participant

Date

Beneficiary Information

Note: If you are married, name your spouse since your spouse is lawfully your primary beneficiary. If you wish to name someone other than your spouse, your spouse must consent with a notarized signature on this form. If you do not include your beneficiary's SS#, it is your responsibility to provide the number to slavic401k. Please do so online under the beneficiary tab after you log into your account.

Primary Beneficiary Social Security Number Date of Birth Percentage Relationship

Contingent Beneficiary Social Security Number Date of Birth Percentage Relationship

Contingent Beneficiary Social Security Number Date of Birth Percentage Relationship

I, spouse of the participant, understand that under the law, I am automatically the beneficiary who will receive 100% of the death benefits payable under the plan. I voluntarily choose to waive these rights, and I agree to the naming of the beneficiaries designated above.

Signature of Spouse (if applicable) Date Notary Public Date
State of: _____ My Commission Expires: _____

Signature of Participant

Date