

Enrollment Methods

- Enroll on Paychex Flex® at https://paychexflex.com
- Fill out this form and fax it to: **585-389-7252**

Note: By using the website, you do not need to send this form to Paychex, Inc.

Employee Information (All information	n is required)				
Employee Name	Social Security Number XXX – XX –				
Company Name Kris Oaks Construction In	IC .				
Office/Client Number	<u> </u>				
Date of Birth//	Date of Hire/ Phone Number ()				
E-mail Address					
your deferral election to zero percent in a election for that source will remain as it w	ld is filled in, you will be enrolled in the plan at the stated amount. If you wish to change my source, place 0% on the line provided for that source. If you do not, the current as prior to completing this updated election. Your employee contribution election will all related employers participating in the plan.				
for Participants. I have indicated below	me. I acknowledge that I have received a copy of the plan's Fee Disclosure Statement the percentage that I want to contribute to the plan through payroll deduction. non-whole numbers will be rounded down to the nearest percent).				
Pretax Salary Deferral	_				
Roth 401(k) Deferral*	*Consult with your employer to determine if the Roth 401(k) option is available in your plan. Also, loans will not be issued from your Roth 401(k) balance.				
Pretax Catch-up Deferral**	**For catch-up deferrals, you must be eligible to make elective deferrals under your employer's 401(k) plan and have, or will have, attained age 50 before the close of the calendar year. If you have not met the age requirement you will not be enrolled in catch-up contributions.				
Roth Catch-up Deferral**					
	this section will be invested using the same fund allocation percentages that you select in ionally, if you elect catch-up contributions and will attain age 60-63 during the plan year, you n-up contributions to the plan.				
	at this time. My deferral election percentage for all eligible compensation from the Company oyer(s) is zero (0%), unless I change it as required by the applicable plan.				

Investment Selection

You will need to check the following box or complete the investment election section below.

□ I do not wish to change my current investment election(s) at this time. Please leave my investment election(s) as they currently stand. I understand that if I have not previously made an investment election with respect to the plan (or no longer have a valid investment election on file with the plan), I will be deemed to have selected to be enrolled 100% in the participant investment default fund applicable to me.

In the "Investment Selection" column, I have entered the percentage of my plan contributions that I want to invest in each selected fund. I understand that all contributions elected on this form and any employer contributions made to my plan account will be invested in the manner that I have selected, either affirmatively or by default, as applicable.

Further, I understand the "Investment Selection" and corresponding percentage will remain in effect until I request a change, in accordance with the terms of the plan. I will receive a confirmation of a requested change.

I understand that if this section is not completed, or if the fund percentages that I provide herein total more or less than 100%, that 100% of my contribution will be invested in the participant investment default fund applicable to me. Further, I understand that my investment election will apply for all related participating employers under the plan.

Prior to requesting any movement of funds, you should review the applicable fund prospectus for policies regarding frequent trading and market timing. You should also review the Fee Disclosure Statement for Participants prior to enrollment.

You may select any combination in 1% increments totaling 100% (non-whole numbers will be rounded down to the nearest percent.) You will need to carefully make your selection(s). If your elected fund percentages total more or less than 100% (due to rounding (as described herein) or otherwise) then 100% of your contributions will be invested in the participant investment default fund applicable to you. Any investment selections that you make (directly or by default) will apply for future contributions only and will not impact currently invested funds. To change your investment election(s) relative to currently invested funds (if any), you may log on to https://paychexflex.com.

es		Investment Selection	
	5253	ROYCE SMALL-CAP OPPORTUNITY INSTITUTIONAL	%
	5871	INVESCO DISCOVERY MID CAP GROWTH Y	%

(Funds continued on next page)

	Investment Selection	
11332	VANGUARD MONEY MARKET RESERVES FEDERAL	%
12044	AMERICAN FUNDS 2010 TARGET DATE RETIREMENT R6	%
12045	AMERICAN FUNDS 2015 TARGET DATE RETIREMENT R6	%
12046	AMERICAN FUNDS 2025 TARGET DATE RETIREMENT R6	%
12047	AMERICAN FUNDS 2030 TARGET DATE RETIREMENT R6	%
12048	AMERICAN FUNDS 2035 TARGET DATE RETIREMENT R6	%
12049	AMERICAN FUNDS 2040 TARGET DATE RETIREMENT R6	%
12050	AMERICAN FUNDS 2045 TARGET DATE RETIREMENT R6	%
12051	AMERICAN FUNDS 2050 TARGET DATE RETIREMENT R6	%
12056	AMERICAN FUNDS EUPAC FUND R6	%
12284	AMERICAN FUNDS 2020 TARGET DATE RETIREMENT R6	%
13283	AMERICAN FUNDS 2055 TARGET DATE RETIREMENT R6	%
14987	MFS VALUE R6	%
17699	VANGUARD MID CAP INDEX FUND ADML	%
17711	VANGUARD 500 INDEX ADML	%
17968	VANGUARD GROWTH INDEX ADML	%
17969	VANGUARD SHORT TERM BOND INDEX ADML	%
19743	AMERICAN FUNDS 2060 TARGET DATE RETIREMENT R6	%
36349	FIDELITY SMALL CAP INDEX	%
44560	AMERICAN FUNDS 2065 TRGT DATE RETIRE R6	%
54256	AMERICAN FUNDS 2070 TARGET DATE RETIREMENT R6	%
3453	JOHN HANCOCK BOND I	%
	Totals	100%

Authorization and Signature

Until I elect otherwise as required by the applicable plan, I authorize and direct Paychex to invest my plan contributions (including any default elections that may apply in accordance with the terms of the plan or described herein above) as set forth herein. I understand that the plan administrator may provide (or authorize third parties to provide) my contribution elections, investment elections, and other plan-related information to one or more third parties in connection with the administration of the plan. Further, I authorize and direct the Company and Paychex, as applicable, to deduct the contributions elected in this form (either affirmatively or by default, as applicable) from my eligible compensation and to contribute such amount to a plan account for my benefit. I understand that the various elections that I have made on this form (either affirmatively or by default, as applicable) shall become effective as soon as administratively practicable following the time my elections are received by the plan in good order and shall apply prospectively only.

→	Employee Signature:		Date:	/	/	
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