## HOTEL UNION AND HOTEL INDUSTRY OF HAWAII 401(k) RETIREMENT SAVINGS PLAN c/o GROUP PLAN ADMINISTRATORS, INC. 222 SOUTH VINEYARD ST., PH4 HONOLULU, HI 96813

PHONE (808) 523-9411 FAX (808) 533-6789

## EMPLOYEE 401(k) INVESTMENT OPTION CHANGE FORM

LAST NAME  MAILING ADDRESS			FIF	FIRST NAME  CITY		S.S. NUMBER  ZIP CODE	
	COMPANY			TMENT	DATE OF BIRTH	PHONE NO.	
1. PLEAS		CATE WHICI	H PORTION OF YOU	R INVESTMEN	TS THIS OPTION C	HANGE SHOULD	
(SELECT	ALL OF T	HE FOLLOWING	DESIGNATIONS THAT AP	PLY)			
1	NEW CONTR	IBUTIONS	EXISTING DEFERRAL BALANCE		TING ROLLOVER	EXISTING MATCHING BALANCE	
			PLEASE SELECT Y			<u> </u>	
(PLEASE	NOTE THA	AT YOU MAY SE	ELECT MORE THAN ONE OI	PTION, HOWEVER,	THE TOTAL PERCENTA	GE MUST EQUAL 100%)	
	%	OPTION 1	VANGUARD RETIREM	MENT SAVINGS	TRUST		
	%	OPTION 2	T. ROWE PRICE RETIR	REMENT BALAN	CED FUND		
	%	OPTION 3	T. ROWE PRICE RETII	REMENT 2020 FU	ND		
	%	OPTION 4	T. ROWE PRICE RETII	REMENT 2030 FU	ND		
	%	OPTION 5	T. ROWE PRICE RETI	ROWE PRICE RETIREMENT 2040 FUND			
	%	OPTION 6	VANGUARD TOTAL N	MARKET INDEX	FUND		
	%	OPTION 7	VANGUARD TOTAL I	NTERNATIONAL	STOCK FUND		
		OPTION 8	PARTICIPANT DIREC	TED (PLEASE CA	LL THE ADMINISTRA	TOR FOR DETAILS	
10	<u>0</u> %	TOTAL – TH	E SUM OF YOUR INVES	TMENT ELECTION	ON(S) MUST EQUAL 10	0%	
			WITH THE TRUST F				
	•						
CHANGE	IN INVE	STMENT OPT	TIONS:				
PLAN, AN	D AUTH	ORIZE THE I	NVESTMENT ELECTIC	ON AS INDICAT	ED ABOVE. I UNDE	OF THE INVESTMENT RSTAND THAT I MAY TH 15 DAYS ADVANCE	
		EMPI OVE	F'S SIGNATURE			DATE	

## INSTRUCTIONS FOR COMPLETING INVESTMENT OPTION CHANGE FORM

- 1) Clearly complete the top section with your personal information and employer information as indicated.
- 2) Select which portion of your account you wish to change as follows (check <u>all</u> options that apply):

• New contributions: this option changes the investment allocation for your

401(k) contributions received as of the start of the effective quarter, and does not affect the investment

allocation of your existing balance.

• Existing **Deferral** balance: this option changes the investment allocation of your

existing Deferral account balance as of the start of the effective quarter, and does not affect the investment allocation of your 401(k) contributions, your existing

rollover account and/or matching account if applicable.

• Existing **Rollover** balance: this option changes the investment allocation of your

Rollover account existing balance as of the start of the

effective quarter.

• Existing **Matching** balance: this option changes the investment allocation of your

Matching account existing balance as of the start of the

effective quarter.

Note: if you wish to designate different investment allocation changes for both your existing balance and your new contributions, you must complete a separate form for each.

- 3) Select your new investment election(s). Please note that if you select more than one option, then the total percentage allocated to each investment must total 100%.
- 4) Read the Employee Authorization, and if accepted, sign and date where indicated.
- 5) Mail or fax the form directly to the address/number shown on the top of the form.

If you have any questions, please call our office at (808) 523-9411 and ask for Enrique.