



# State Senior Management Service Employees Retirement Plan Enrollment Form

<b>1</b>	<b>Enter Your Info</b> PLEASE PRINT	LAST NAME	FIRST NAME	MIDDLE INITIAL
		LAST 4 DIGITS OF SOCIAL SECURITY NUMBER		DATE OF BIRTH (MM/DD/YYYY)
		<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	<input type="text"/>

<b>2</b>	<b>Select Your Plan</b>	<p>The enrollment deadline for options 1, 2, and 3 is 4:00 p.m. ET on the last business day of the 5<sup>th</sup> month following your month of hire.</p> <p><input type="checkbox"/> 1. FRS Pension Plan for Senior Management Service Class</p> <p><input type="checkbox"/> 2. FRS Investment Plan for Senior Management Service Class</p> <p><input type="checkbox"/> 3. FRS Hybrid Option <i>See special eligibility requirements on page 5.</i></p>	<p>The enrollment deadline for option 4 is 4:00 p.m. ET on the 90<sup>th</sup> day following your date of hire.</p> <p><input type="checkbox"/> 4. Senior Management Service Optional Annuity Program (SMSOAP)</p> <p><b>If you select option 4, you MUST also submit the Employment Certification form on page 4.</b></p>
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<b>3</b>	<b>Choose Your Funds</b>	<p><b>If you selected the FRS Investment Plan or the FRS Hybrid Option:</b></p> <p><input type="checkbox"/> <b>Choose a Retirement Date Fund for me.</b> Your Plan assets will be invested initially in an age-appropriate Retirement Date Fund.</p> <p><input type="checkbox"/> <b>I have indicated my choices in the "Choose Your FRS Funds" section of this form.</b> <i>See next page.</i></p>	<p><b>If you selected the SMSOAP:</b></p> <p><input type="checkbox"/> <b>I have indicated my choices in the "Choose Your SMSOAP Funds" section of this form.</b> <i>See page 3.</i></p>
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<b>4</b>	<b>Sign Here</b>	By signing below, I acknowledge that I have read and understand the information on pages 5 and 6 of this Enrollment Form, and I certify all supplied information to be true and correct. I understand that this form cannot be processed without the last four digits of my Social Security number, my date of birth, my plan choice, and my signature.	
		SIGNATURE	DATE
		EMPLOYER NAME	
		PERSONAL EMAIL	
		PHONE NUMBER WITH AREA CODE	
		<input type="checkbox"/> MOBILE (RECOMMENDED) <input type="checkbox"/> OTHER	<input type="text"/>

<b>5</b>	<b>Submit Your Form</b>	<p><b>By Fax:</b>  <b>1-888-310-5559</b>          Do not include a cover sheet.</p>	— OR —	<p><b>By Mail:</b>  <b>Plan Choice Administrator</b>  <b>P.O. Box 785027</b>  <b>Orlando, FL 32878-5027</b></p>
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# Choose Your FRS Funds

**Complete and submit this section only if you selected the FRS Investment Plan or the FRS Hybrid Option.**

## Choosing Your Investment Plan Funds

- You can allocate your contributions to any combination of funds below, but your total allocation must add up to 100%.
- You can change your selections at any time after your account is activated by calling the MyFRS Financial Guidance Line, Option 4, or by logging in to *MyFRS.com*. Transfer restrictions may apply.
- For more information about each Investment Plan fund, review the fund profiles, Investment Fund Summary, and the Annual Fee Disclosure Statement available on *MyFRS.com*, or call the MyFRS Financial Guidance Line, Option 2, to speak with an experienced, unbiased financial planner.

## An Important Note About Fees

Each investment fund charges an annual fee based on a percentage of the balance invested in that fund. Fees vary by fund and are automatically deducted from your account. These are the only fees you will pay as an active member of the Investment Plan.

## About Retirement Date Funds

Retirement Date Funds are professionally managed funds that are designed to offer you a single solution for maintaining a diversified portfolio based on the amount of time you have until retirement. As your retirement gets nearer, the fund's investment mix gradually shifts from growth to preservation.

## About the Other Funds

The other funds listed below allow you to create your own customized portfolio. "(B)" identifies a fund that will automatically block trades under certain circumstances.

<b>RETIREMENT DATE FUNDS</b>		<b>Enter % for Each Fund</b>
<i>Fees as of October 1, 2016 shown below as (\$).</i>		
<i>If you are this age ...</i>	<i>You might consider this Retirement Date Fund ...</i>	
<b>Regular Class</b>	<b>Special Risk or Special Risk Admin.</b>	
Age 26 or younger	N/A	FRS 2055 Retirement Date Fund (\$0.70) _____ %
Age 27 to 31	Age 26 or younger	FRS 2050 Retirement Date Fund (\$0.70) _____ %
Age 32 to 36	Age 27 to 31	FRS 2045 Retirement Date Fund (\$0.70) _____ %
Age 37 to 41	Age 32 to 36	FRS 2040 Retirement Date Fund (\$0.70) _____ %
Age 42 to 46	Age 37 to 41	FRS 2035 Retirement Date Fund (\$0.80) _____ %
Age 47 to 51	Age 42 to 46	FRS 2030 Retirement Date Fund (\$1.00) _____ %
Age 52 to 56	Age 47 to 51	FRS 2025 Retirement Date Fund (\$1.20) _____ %
Age 57 to 61	Age 52 to 56	FRS 2020 Retirement Date Fund (\$1.30) _____ %
Age 62 to 66	Age 57 to 61	FRS 2015 Retirement Date Fund (\$1.50) _____ %
Age 67 or older	Age 62 or older	FRS Retirement Fund (\$1.50) _____ %
<b>OTHER FUNDS</b>		
<b>MONEY MARKET FUND</b>		FRS Money Market Fund (\$0.60) _____ %
<b>REAL ASSETS FUND</b>		FRS Real Assets Fund (\$4.50) _____ %
<b>BOND FUNDS</b>		FRS U.S. Bond Enhanced Index Fund (\$0.50) _____ %
		FIAM Intermediate Duration Pool Fund (\$1.22) _____ %
		FRS Core Plus Fixed Income Fund (\$2.40) _____ %
<b>U.S. STOCK FUNDS</b>		FRS U.S. Large Cap Equity Fund (\$3.30) _____ %
		FRS U.S. Stock Market Index Fund (\$0.20) _____ %
		FRS U.S. Small/Mid Cap Equity Fund (\$6.60) _____ %
<b>FOREIGN AND GLOBAL STOCK FUNDS</b>		FRS Foreign Stock Index Fund (\$0.30) (B) _____ %
		American Funds EuroPacific Growth Fund (\$5.00) (B) _____ %
		American Funds New Perspective Fund (\$4.90) (B) _____ %
<b>TOTAL MUST EQUAL 100%</b>		<input style="width: 100px; height: 20px;" type="text"/>

## Choose Your SMSOAP Funds

**Complete and submit this section only if you selected the Senior Management Service Optional Annuity Program.**

Designate the company(ies) in which you wish to participate and indicate the portion of the mandatory contribution you wish to allocate to each. You should also indicate any voluntary after-tax contributions you wish to make to each fund. Be sure to contact the marketing companies for the SMSOAP investment funds to get your questions answered.

### About Mandatory Contributions

Your employer will contribute 6.27% of your salary to this plan. Below, indicate how you would like that percentage allocated to each investment provider. Your total must equal 6.27%. You also will make a mandatory contribution of 3% of your salary to this plan. Your contributions will automatically be allocated to the investment providers below in the same ratio as the employer contributions. You only need to enter ONE percentage under Mandatory Contributions for each provider below.

### About Voluntary Contributions

You may choose to make after-tax contributions to the plan, if you like. Your total voluntary after-tax contributions cannot exceed 6.27% of your salary.

Provider Company	MANDATORY CONTRIBUTIONS	VOLUNTARY AFTER-TAX CONTRIBUTIONS
VOYA	_____ %	_____ %
TIAA-CREF	_____ %	_____ %
VALIC	_____ %	_____ %
AXA	_____ %	_____ %
<b>TOTAL</b>	<b>6.27%</b>	_____ %

**CANNOT EXCEED 6.27% OF YOUR SALARY**

I have reviewed the investment fund options offered by the above marketing companies and have signed the necessary contract(s) with the company(ies) for the deposit of my contributions as noted above.

**State Senior Management Service Employees  
Retirement Plan Enrollment Form  
Employment Certification**

*Complete and submit this section only if you selected option 4.*

*The information below MUST be completed by the employer.*

**Employing Agency**

EMPLOYING AGENCY NAME

AGENCY NUMBER

POSITION TITLE

POSITION NUMBER

DATE OF EMPLOYMENT (MM/DD/YYYY)

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**Authorized Signature**

By signing below, I certify that the above information is correct and the member is employed in an SMSOAP-eligible position and has executed a contract(s) with the SMSOAP providers(s) elected in the "Choose Your SMSOAP Funds" section on page 3.

AUTHORIZED SIGNATURE

TITLE

DATE (MM/DD/YYYY)

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PHONE NUMBER WITH AREA CODE

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**Questions?**

**MyFRS Financial Guidance Line**  
1-866-446-9377, Option 2 (TRS 711)

Get free, unbiased guidance from experienced financial planners about the plans or the election process.

**MyFRS.com**

Visit anytime for tools and information about the FRS Investment Plan and Pension Plan.

# Review the Following Important Information Carefully

*Do not submit this page with your Enrollment Form.*

- **Hybrid Option Special Eligibility Requirements**—The Hybrid Option is available if you have 8 years of previous Pension Plan service and were initially enrolled in the FRS on or after July 1, 2011 (5 years if hired prior to July 1, 2011). This option is designed to freeze your accrued Pension Plan benefit and establish an Investment Plan account for all future employer and employee contributions. For more information, call the MyFRS Financial Guidance Line and select Option 2.
- **Incomplete Form**—You will be notified if your form is incomplete and was not processed. You must submit a new completed form by your deadline in order for your choice to be processed. Keep a copy for your records.
- **Plan Choice Deadline**—You are responsible for ensuring your election is received by the Plan Choice Administrator according to the deadline indicated for the option you choose.
- **Eligibility**—You must be actively employed and earning salary and service credit when your form is received by the Plan Choice Administrator. If it is determined that you were not eligible, your election will be invalid and reversed.
- **Default Enrollment**—If you do not submit a choice, the Pension Plan will be considered your initial election by default.
- **Reversing an Election Made in Error**—If you make your choice in error or change your mind, you have until 4:00 p.m. ET on the last business day of the month following your election month to cancel your election. To do so, call the MyFRS Financial Guidance Line and select Option 2.
- **Confirmation Statement**—You will receive a confirmation statement once your Enrollment Form has been processed. The confirmation statement will be mailed to your address on file as supplied by your employer. Allow 2 to 3 weeks to receive it. Notify your employer of any address changes.
- **Beneficiary Designation**—Designate a beneficiary by submitting a Beneficiary Designation Form (BEN-001 Pension Plan or IPBEN-1 Investment Plan). Forms are available online at *MyFRS.com* or by calling the MyFRS Financial Guidance Line and selecting Option 1. If you do not designate a beneficiary, in the event of your death, your benefits, if any, will be distributed in accordance with Section 121.091(8) or Section 121.4501(20), Florida Statutes, as applicable.
- **2<sup>nd</sup> Election**—You have a one-time opportunity during your FRS career to switch from the FRS plan you initially chose to the other plan. There may be a cost for doing so. You cannot file a 2<sup>nd</sup> Election using this form. Call the MyFRS Financial Guidance Line and select Option 1, or use the online resources on *MyFRS.com* for further information.
- **If You Elected the Pension Plan**—You understand that the Pension Plan is a defined benefit plan, which will provide you with benefit payments at retirement if you meet certain criteria. As of the most recent actuarial valuation date, the FRS actuarial liability exceeded the actuarial value of its assets, yielding an unfunded actuarial liability. This liability may increase or decrease in the future. The Florida Legislature may increase or decrease the amount that you and your employer contribute to this Plan to keep it actuarially funded.
- **If You Elected the Investment Plan**—You understand, acknowledge, and authorize that any accrued value you may have in the Pension Plan will be transferred to your Investment Plan account as your opening balance and is subject to the vesting requirements of the Pension Plan. The initial transfer amount is an estimate and your account will be reconciled within 60 days of the transfer using your actual FRS membership record pursuant to Florida law. You direct that all future employer and employee contributions be deposited in your Investment Plan account.
- **If You Elected the Investment Plan or the Hybrid Option**—You understand, acknowledge, and authorize the following:
  - You reviewed the fund profiles, the Investment Fund Summary, and the Annual Fee Disclosure Statement at *MyFRS.com* before submitting your Enrollment Form and before selecting any investment funds.
  - The Annual Fee Disclosure Statement for the FRS Investment Plan provides information concerning the Investment Plan's structure, administrative and individual expenses, and investment funds, including performance, benchmarks, fees, and expenses. This statement is designed to set forth relevant information in simple terms to help you make better investment decisions. The statement is available online in the "Investment Funds" section on *MyFRS.com*, or you can request a printed copy be mailed at no cost to you by calling the MyFRS Financial Guidance Line and selecting Option 4.
  - If you do not select any investment funds, your Plan assets will initially be invested in an age-appropriate Retirement Date Fund as provided under Plan provisions.
  - At any time after your account is activated, you can change your fund allocations to any of the Plan's investment options by logging in to *MyFRS.com* or by calling the MyFRS Financial Guidance Line and selecting Option 4.
  - Your Investment Plan account will be accessible at the end of the month following the effective date of this election.
  - You understand a Self-Directed Brokerage Account is offered by the Plan and enrollment will be available to you after you meet the required Plan provisions.
  - Sections 121.4501(8)(b)4 and 121.4501(15)(b), Florida Statutes, incorporate the federal law concept of participant control, established by regulations of the U.S. Department of Labor under Section 404(c) of the Employee Retirement Income Security Act of 1974. If you exercise control over the assets in your Investment Plan account, pursuant to Section 404(c) regulations and all applicable laws governing the operation of the Investment Plan, no program fiduciary shall be liable for any loss to your account which results from your exercise of control.
  - The Investment Plan is a defined contribution plan. The Florida Legislature can increase or decrease the amount that you and your employer contribute to your account.
  - The Investment Plan is not designed to facilitate short-term excessive fund trading. Foreign and global investment funds are subject to a minimum holding period of 7 calendar days following any non-exempt transfers into such funds. You may be subject to trading controls on the funds in the event that you trade excessively.
  - Investment management fees are deducted from your Investment Plan account. These fees may change in the future, and funds may be added or terminated. If any of the funds you select are terminated in the future, you will be able to move your assets into other investment funds prior to fund termination. If you do not move your assets out of a terminated fund, those assets will automatically be moved into a replacement fund designated at that time.
  - If you terminate employment and are vested in your account balance, you may be subject to a mandatory payout of your account if the balance is \$1,000 or less, or an account maintenance fee of \$6 per quarter if your account balance is more than \$1,000.
  - You consent to electronic delivery of documents through the *MyFRS.com* website, including but not limited to prospectuses, quarterly account statements, account transaction confirmation statements, privacy notices, fee disclosures, and other documents. Anytime one of these documents is available, an email notice will be sent to the email address you provided. You will need to log in to *MyFRS.com* to view these documents and to make any updates to your email address. Receipt of documents through *MyFRS.com* will continue until you revoke your consent by calling the MyFRS Financial Guidance Line and selecting Option 4. Your internet service or cellphone provider may charge you a fee for the time required to view your documents online or for other services.

- **If you Elected the Senior Management Service Optional Annuity Program (SMSOAP):** You understand, acknowledge, and authorize the following:
  - You must execute a contract with an SMSOAP provider during your first 90 days of employment or you will default into the Pension Plan.
  - Your membership in any other state-administered retirement plan will terminate on the effective date of your enrollment in the SMSOAP.
  - As a member of the SMSOAP, you are not eligible for disability retirement benefits under any FRS-administered retirement plan.
  - The State of Florida does not guarantee nor insure the benefits paid under this program.
- Your payroll-deducted contributions are pretax and it is mandatory to contribute 3% of your salary to the Plan.
- The 3% mandatory contributions will be sent to the same provider company(ies) as receives the employer contributions.
- You have the option to make additional post-tax contributions of up to 6.27% of your eligible compensation.
- **Rights and Responsibilities**—A description of your rights and responsibilities under the Pension Plan and the Investment Plan is in the respective Summary Plan Description, the Florida Statutes, and the Administrative Rules and can be obtained by calling the MyFRS Financial Guidance Line and selecting Option 2, or by visiting *MyFRS.com*.