## Vanguard Retirement Plan **Enrollment and Change Form**

# Vanguard®

Plan # 093962

### **International Agricultural Research Centers** 403(b) Retirement Plan

IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT. Vanguard is required by federal law to obtain from each person who opens an account, certain personal information--including name, street address, citizenship, and date of birth among other information--that will be used to verify identity. If you do not provide us with this information, we will not be able to open the account. If we are unable to verify your identity, Vanguard reserves the right to close your account or take other steps we deem reasonable.

Check one: 🗌 No	lew Enrollment 🦳 Re-Enrollment 📄 Change	
		Location Code (if applicable)
First Name	Middle Initial Last Name	
Social Security Number	Date of Birth (mm/dd/yyyy)         Date of Hire (mm/dd/yyyy)	Plan Entry Date (mm/dd/yyyy)
Mailing Address	Street Address (no P.O. box)	
address. No P.O. Box address will be accepted.	City State	e Zip Code
International Mailing Address	Street Address (no P.O. box)	
Must provide a complete street address. No P.O. Box address		atay Country Codo
will be accepted.	City Cour Check here if address listed above is a new address.	ntry Country Code
If the international address Day Time Phone Number	s is not safe, please use AIARC's address and mail will be forwarded to participant	L.
		L.
Day Time Phone Number Marital Status	E-mail AddressMarriedSingle	L.
Day Time Phone Number Marital Status Gender	E-mail Address Married Single Male Female	<u>.</u>
Day Time Phone Number Marital Status Gender	E-mail AddressMarriedSingleMaleFemale U.S. Citizen	
Day Time Phone Number Marital Status Gender	MarriedSingle MaleFemale U.S. Citizen Resident Alien	
Day Time Phone Number Marital Status Gender	MarriedSingle MaleFemale U.S. Citizen Resident Alien	
Day Time Phone Number Marital Status Gender Citizenship	E-mail Address  MarriedSingleMaleFemale U.S. Citizen Resident Alien Non-Resident Alien ( <i>if you are a non-resident, please indicate country</i>	y of residence):

#### 2. Investment of Contributions

Specify individual Vanguard fund(s) and allocations percentage(s) below. Your total fund allocation percentage must equal 100%.

**Target Retirement Funds** If you choose this investment approach, you may want to consider investing 100% of your contributions in one Vanguard Target Retirement Fund.

Fund Code	Fund Name	Allocation	Fund Code	Fund Name	Allocation
00V009	Vanguard Target Retirement 2070 Fund		000696	Vanguard Target Retirement 2040 Fund	
001791	Vanguard Target Retirement 2065 Fund		000305	Vanguard Target Retirement 2035 Fund	
001691	Vanguard Target Retirement 2060 Fund		000695	Vanguard Target Retirement 2030 Fund	
001487	Vanguard Target Retirement 2055 Fund		000304	Vanguard Target Retirement 2025 Fund	
000699	Vanguard Target Retirement 2050 Fund		000682	Vanguard Target Retirement 2020 Fund	
000306	Vanguard Target Retirement 2045 Fund		000308	Vanguard Target Retirement Income Fund	
Core Fun	ds Or for the following list of funds, specify	percentage:	s in 1% increm	ients.	
	Fund Name		Fund Code		Allocation
					Allocation
Fund Code	Fund Name		Fund Code	Fund Name	Allocation
Fund Code 000084	Fund Name Vanguard Total Bond Market Index Fund		Fund Code 000024	Fund Name Vanguard Explorer Fund	Allocation
Fund Code 000084 000040	Fund Name Vanguard Total Bond Market Index Fund Vanguard 500 Index Fund		Fund Code 000024 00001C	<b>Fund Name</b> Vanguard Explorer Fund Vanguard Total International Stock Index Fund	Allocation
Fund Code 000084 000040 000073	Fund Name Vanguard Total Bond Market Index Fund Vanguard 500 Index Fund Vanguard Windsor II Fund		Fund Code 000024 00001C 000029	Fund Name Vanguard Explorer Fund Vanguard Total International Stock Index Fund Vanguard High-Yield Corporate Fund	Allocation
Fund Code 000084 000040 000073 00009U	Fund Name Vanguard Total Bond Market Index Fund Vanguard 500 Index Fund Vanguard Windsor II Fund Vanguard Selected Value Fund		Fund Code 000024 00001C 000029 0000XT	Fund Name Vanguard Explorer Fund Vanguard Total International Stock Index Fund Vanguard High-Yield Corporate Fund Vanguard Inflation-Protected Securities Fund	Allocation

Your allocations must total 100%

DFA International Sustainability Core 1 Portfolio

**Note:** If you fail to complete the investment elections above, your contribution will automatically be invested in the appropriate Vanguard Target Retirement Fund based on your age.

007331

#### 3. Beneficiary Designation

Vanguard U.S. Growth Fund

000080

The percentage of distribution upon your death for all primary beneficiaries must equal 100%; likewise, for contingent beneficiaries. If you need more space to list additional beneficiaries, photocopy the applicable pages or provide all the information requested on a separate sheet.

If any of your primary beneficiaries is deceased at the time of your death, his or her portion of your assets will be divided proportionately among your surviving primary beneficiaries, if any. Your contingent beneficiary(ies) will inherit your assets only if you have no surviving primary beneficiaries at the time of your death.

Pri	mary Beneficiar	ies					
Cho	neficiary Type	Spouse Requires last 4 digits of SSN or address	Individual(s) Requires last 4 digits of SSN or address	Trust(s) To the trustee of an existin trust created under agreen To the trustee of a trust created under my last will Section of Wil	nent required	Number (T	ax Identification
1)							%
	Full Name (First, Middle	e, Last), Trust or C	harity/Entity Name Street or P.O. Box	Relationship to me	Birth or Trust Date (MM/DD/YYYY)	Percent	
	Last 4 Digits of SSN or 9 Digit Tax Identificatio Number required		City, State, Zip		Country (if not U.S.)		
2)	Full Name (First, Middle	e, Last), Trust or C	Charity/Entity Name	Relationship to me	Birth or Trust Date	Percent	%
			Street or P.O. Box				
	Last 4 Digits of SSN or 9 Digit Tax Identification Number required		City, State, Zip		Country (if not U.S.)		2 of 3

#### 3. Beneficiary Designation (continued)

	Full Name (First, Middle, Last), Trust or Charity/Entity Name			Relationship to me	Birth or Trust Date	Percent	%
			Street or P.O. Box		(MM/DD/YYYY)	]	
	Last 4 Digits of SSN or		City State Zin		Country (if not U.S.)	Total	
	9 Digit Tax Identification Number required		City, State, Zip			100%	Percentages < must total 100%.
	•	aries Cont	tingent beneficiaries re	ceive distributions only if no	primary beneficiaries survi	ve you.	
		Spouse	Individual(s)	Trust(s)	My Estate	Charity	/Entity
Cho		Requires last 4 digits of SSN or address	Requires last 4 digits of SSN or address	To the trustee of an existrust created under agree		Number (T	Tax Identificatior TN) tity Address
				To the trustee of a trust created under my last w	ill	is optional	
Со	mplete all applicable fields	below.		Section of W	/ill		
1)							%
	Full Name (First, Middle, La	ast), Trust or C		Relationship to me	Birth or Trust Date (MM/DD/YYYY)	Percent	
			Street or P.O. Box				
	Last 4 Digits of SSN or 9 Digit Tax Identification Number required	_	City, State, Zip		Country (if not U.S.)		
2)							%
	Full Name (First, Middle, La	ast), Trust or C	Charity/Entity Name	Relationship to me	Birth or Trust Date (MM/DD/YYYY)	Percent	
			Street or P.O. Box				
	Last 4 Digits of SSN or 9 Digit Tax Identification Number required	_	City, State, Zip		Country (if not U.S.)		
3)							%
	Full Name (First, Middle, La	ast), Trust or 0	Charity/Entity Name	Relationship to me	Birth or Trust Date	Percent	/0
		]	Street or P.O. Box				
	Last 4 Digits of SSN or 9 Digit Tax Identification Number required	_	City, State, Zip		Country (if not U.S.)	Total <b>100%</b>	Percentag < must total
							100%.
21/	gnatures and A	oconton					

Signature: \_\_\_\_

4.

\_\_\_\_\_ Date: \_\_\_\_\_ Please confirm your SSN \_\_\_\_\_ - \_\_\_ - \_\_\_ - \_\_\_\_

(B) Custodian Acceptance: Vanguard Fiduciary Trust Company hereby accepts its appointment as Custodian under the Vanguard Section 403(b)(7) Custodial Account Agreement for the benefit of the Employee named above, and hereby agrees to the terms and conditions of such Agreement. When J. Bunkley

Authorized Signature:

Title: President