

## 1. ENROLLMENT AND EMPLOYEE ELECTIVE CONTRIBUTION FORM

Use this form to choose the amount you wish to contribute to the plan. If this is your initial enrollment, complete Section 2 to select your investments and fill out the Beneficiary Designation form.

### COMPLETE YOUR PERSONAL INFORMATION

Participant Name

Social Security Number

Address

Date of Birth

City, State ZIP

Date of Hire

### CHOOSE YOUR CONTRIBUTION AMOUNT

#### Elective Contributions

Choose **one** of the following options.

I elect to contribute \$\_\_\_\_\_ or \_\_\_\_\_% of my compensation per pay period on a **pre-tax basis**. (Maximum: \$18,500)

I elect **not to make elective deferrals** until further notice. Although I elect not to save through payroll deduction, I understand my employer may elect to contribute a discretionary contribution to the plan, and I authorize such a contribution to be invested as indicated in Section 2 of this form.

The IRS limit for all elective salary contributions made to the plan is \$18,500 for 2018.

#### Catch-up Contributions

I will be at least 50 years of age or older by year-end and elect to make catch-up contributions to the plan. I elect to contribute \$\_\_\_\_\_ or \_\_\_\_\_% of my compensation per pay period as catch-up contributions once my maximum contribution limits are met.

The IRS limit for any catch-up contributions made to the plan is \$6,000 for 2018.

This election authorizes G.W. Automotive, Inc. to withhold this amount from my paycheck, and shall remain in effect until I revoke or modify this election.

This is  my first election  a change to an existing election.

### SIGN AND DATE

Signature of Participant

Date

Plan Sponsor/Administrator Signature

Date

Years of Service

## 2. INVESTMENT ELECTION

Complete Section 2 **only** if you are enrolling in the plan for the first time.

### SELECT YOUR INVESTMENTS

Select from the plan investment options below. Your investment elections must be made in a whole percentage and total must equal 100%.

I elect to invest as follows:

Fund Name	Ticker	Percent*	Fund Name	Ticker	Percent*
Morley Capital Stable Value Fund (25)	N/A	_____%	Oakmark Fund (I)	OANMX	_____%
Dodge & Cox Income Fund	DODIX	_____%	T. Rowe Price Retirement I 2005 Fund (I)	TRPFX	_____%
Vanguard Intermed. Term Treasury Fund (Adm)	VFIUX	_____%	T. Rowe Price Retirement I 2015 Fund (I)	TRFGX	_____%
DFA World ex US Govt. Fix. Inc. Portfolio (I)	DWFIX	_____%	T. Rowe Price Retirement I 2020 Fund (I)	TRBRX	_____%
American Funds American Balanced Fund (R6)	RLBGX	_____%	T. Rowe Price Retirement I 2025 Fund (I)	TRPHX	_____%
Vanguard Equity Income Fund (Adm)	VEIRX	_____%	T. Rowe Price Retirement I 2030 Fund (I)	TRPCX	_____%
Ivy International Core Equity Fund (N)	IINCX	_____%	T. Rowe Price Retirement I 2035 Fund (I)	TRPJX	_____%
T. Rowe Price Blue Chip Growth Fund (I)	TBCIX	_____%	T. Rowe Price Retirement I 2040 Fund (I)	TRPDX	_____%
Fidelity Real Estate Investment Portfolio	FRESX	_____%	T. Rowe Price Retirement I 2045 Fund (I)	TRPKX	_____%
JPMorgan US Small Company Fund (R6)	JUSMX	_____%	T. Rowe Price Retirement I 2050 Fund (I)	TRPMX	_____%
Hartford MidCap Fund (R6)	HFMVX	_____%	T. Rowe Price Retirement I 2055 Fund (I)	TRPNX	_____%
JPMorgan Intrepid Mid Cap Fund (R6)	WOOSX	_____%	T. Rowe Price Retirement I 2060 Fund (I)	TRPLX	_____%
MFS Mid Cap Value Fund (R6)	MVCKX	_____%	<b>*1% increments only</b>	<b>TOTAL :</b>	<b>100%</b>

### SIGN AND DATE

I hereby authorize BB&T to act on telephonic and/or Internet instructions with respect to the investment of assets held in my account under this plan from any person representing himself or herself to be me and furnishing proper identifying information to BB&T, including a Personal Identification Number agreed to by me. I acknowledge that all telephonic and/or Internet instructions to BB&T may be recorded and retained by BB&T. I further indemnify and hold harmless BB&T from liability for any loss, legal obligations, court or other expense for acting upon such telephonic and/or Internet instructions as are believed to be genuine by BB&T, even if such instructions in fact are not given by me, or for failing to act on such instructions due to failure of the electronic/telecommunications systems on either the transmitting or receiving point, or any other circumstances beyond its control which prevents any exchanges, transfers, or other transactions despite reasonable precautions taken to avoid such failures. I have received or had access to fees associated with the plan and to prospectuses regarding the funds applicable to the plan in which the above-referenced contributions and investment account balances shall be invested. I acknowledge BB&T has not provided me investment advice. If an investment election is not selected above, BB&T is hereby directed to invest all monies in the default investment option.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Plan Sponsor/Administrator Signature

\_\_\_\_\_  
Date