



Free Church Ministers' & Missionaries' Retirement Plan  
 901 East 78<sup>th</sup> Street | Minneapolis, MN 55420  
 (800) 995-5357 | Fax (952) 853-8474

**04 - PARTICIPANT INVESTMENT SELECTION: AMERICAN FUNDS**

Complete this form to invest funds into the Self-Selected Mutual Fund – American Funds (Option F).

**STEP 1: Personal Information**

(Please print)

Employee Name: \_\_\_\_\_ Employee Social Security Number: \_\_\_\_\_  
 Employee Date of Birth: \_\_\_\_\_ Date of Hire: \_\_\_\_\_  
 Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 Please enter an email to use for correspondence regarding your account information: \_\_\_\_\_  
 Spouse Name: \_\_\_\_\_ Spouse Date of Birth: \_\_\_\_\_  
 Spouse SSN: \_\_\_\_\_

**STEP 2: Contribution Designation**

Your contributions to this Self Selected Mutual Fund (Option F) as declared on your Participant Enrollment Form and/or your Salary Deferral Agreement will be combined and invested per your instructions below. Information about specific mutual funds is available at [www.americanfunds.com](http://www.americanfunds.com).

**STEP 3: Investment Selection**

First Election     Election Change

I understand that the FCMM Retirement Plan permits me to invest employer contributions and salary deferral contributions in various American Funds each with a different investment strategy. The risks and rewards associated with each available American Fund have been explained to me, and I understand that FCMM selects the various Funds available for this option. I understand that I may invest contributions as I choose or I may select one of the model portfolios listed below. I acknowledge that I am solely responsible for the investment of all contributions made to this option among the Funds available to me. FCMM has not offered or given me investment advice regarding my selection nor will FCMM be responsible for any gain or loss that may result from my investment selection. Accordingly, I hereby elect all future contributions made on my behalf to Option F be invested as follows (*in whole % and totaling 100%*):

Choose either (A), (B) or (C)

Option (A)				
FUND NAME	TICKER	I/C	ALLOCATION	
American Funds U.S. Government Money Market R6	RAFXX	1A		%
American Funds Bond Fund of Amer R4	RBFEX	BF		%
American Funds US Government Sec R4	RGVEX	TB		%
American Funds American Hi-Inc Tr R4	RITEX	BO		%
American Funds Capital World Bond R4	RCWEX	4F		%
American Funds Income Fund of Amer R4	RIDEX	EO		%
American Funds American Balanced R4	RLBEX	BC		%
American Funds American Mutual R4	RMFEX	3Q		%
American Funds Washington Mutual R4	RWMEX	BR		%
American Funds Fundamental Invs R4	RFNEX	BX		%
American Funds Invmt Co of Amer R4	RICEX	BV		%
American Funds Growth Fund of Amer R4	RGAXX	BL		%
American Funds AMCAP R4	RAFEX	NJ		%
American Funds New Economy R4	RNGEX	BY		%
American Funds Capital Income Bldr R4	RIREX	EQ		%
American Funds New Perspective R4	RNPEX	BW		%
American Funds SMALLCAP World R4	RSLEX	CA		%
American Funds Capital World Gr&Inc R4	RWIEX	DY		%
American Funds Europacific Growth R4	RESEX	BI		%
American Funds New World R4	RNWEX	RC		%
<i>Use whole percents only. Percentages must total 100%.</i>				100%

Option (B)		
PORTFOLIO NAME	I/C	Select ONE
Capital Preservation Portfolio	0E	<input type="checkbox"/>
Income & Growth Portfolio	0F	<input type="checkbox"/>
Moderate Growth Portfolio	0J	<input type="checkbox"/>
Growth Portfolio	0L	<input type="checkbox"/>
Aggressive Growth Portfolio	0M	<input type="checkbox"/>

Option (C)			
FUND NAME	TICKER	I/C	Select ONE
American Funds 2015 Trgt Date Retire R4	RDBTX	4M	<input type="checkbox"/>
American Funds 2020 Trgt Date Retire R4	RDCTX	8I	<input type="checkbox"/>
American Funds 2025 Trgt Date Retire R4	RDDTX	3M	<input type="checkbox"/>
American Funds 2030 Trgt Date Retire R4	RDETX	0K	<input type="checkbox"/>
American Funds 2035 Trgt Date Retire R4	RDFTX	2M	<input type="checkbox"/>
American Funds 2040 Trgt Date Retire R4	RDGTX	2K	<input type="checkbox"/>
American Funds 2045 Trgt Date Retire R4	RDHTX	5M	<input type="checkbox"/>
American Funds 2050 Trgt Date Retire R4	RDITX	8K	<input type="checkbox"/>

**STEP 4: Signature**

This Investment Selection authorizes FCMM to invest on my behalf future employer and salary deferral contributions in the various American Funds according to the above investment selections. I understand I have a duty to review my pay records to confirm that my employer has properly implemented my Salary Deferral Agreement and that I will inform my employer and FCMM if I discover any discrepancies. I further understand that if I choose one of the pre-determined model portfolios that my contributions will continue to be allocated to those specific American Funds until I either formally change my allocation for future contributions or until such time that such Funds are no longer made available within this option. I also understand that this election applies only to future contributions and that my account balance will not at any time automatically rebalance to my selected allocation. I understand this election shall remain in effect until I revoke it, change my contribution percentage, or change my investment selection in accordance with the policy established by FCMM. I verify that I have received or have been made available a prospectus for each investment choice within this Option F and that I accept the provisions thereof.

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness Signature \_\_\_\_\_ Date \_\_\_\_\_

\*For questions regarding this form, please contact the FCMM office at (800) 995-5357 or [fcmm@fcmmbenefits.org](mailto:fcmm@fcmmbenefits.org).