

Savings Banks Employees Retirement Association Employer Stock Transfer Form

Employee Name:	SBERA Certificate No.
Employer Name:	SBERA Plan No.
Social Security Number:	Date of Birth:

Choose One of the following options and indicate the appropriate percentage

A. Directions to TRANSFER FROM the Employer Stock Account
Indicate the whole percentage to be transferred out of the Employer Stock Account _____%
Indicate by whole percentage the amount to be transferred into the following accounts.
Total in this section must equal 100%.

- | | | |
|----------------------------------|--------------------------------------|-------------------------------|
| _____ % Money Market Account | _____ % International Equity Account | _____ % LifePath 2020 Account |
| _____ % Equity Account | _____ % Large Cap Value Account | _____ % LifePath 2030 Account |
| _____ % Bond Account | _____ % Small Cap Value Account | _____ % LifePath 2040 Account |
| _____ % Index 500 Account | _____ % Large Cap Growth Account | _____ % LifePath 2050 Account |
| _____ % Small Cap Growth Account | _____ % LifePath Retirement Account | _____ % SBERA Account |
| _____ % All Asset Account | | |

B. Directions to TRANSFER TO the Employer Stock Account
Indicate the whole percentage to be transferred from one or more of the following accounts into the Employer Stock Account.

- | | | |
|----------------------------------|--------------------------------------|-------------------------------|
| _____ % Money Market Account | _____ % International Equity Account | _____ % LifePath 2020 Account |
| _____ % Equity Account | _____ % Large Cap Value Account | _____ % LifePath 2030 Account |
| _____ % Bond Account | _____ % Large Cap Growth Account | _____ % LifePath 2040 Account |
| _____ % Index 500 Account | _____ % Small Cap Value Account | _____ % LifePath 2050 Account |
| _____ % Small Cap Growth Account | _____ % LifePath Retirement Account | _____ % SBERA Account |
| _____ % All Asset Account | | |

Participant Signature: _____ Date: _____

Plan Representative's Signature: _____ Date: _____