

# Unitarian Universalist Organizations Retirement Plan 2018 Employee Contributions Agreement

**The requested action will be effective as soon as administratively practicable following submission of this form.**

Use this form in order to elect to make Employee Contributions to the UU Organizations Retirement Plan (the Plan); TIAA is the recordkeeper to which funds are remitted. If your Employer elects to be an "auto-enroll" Employer, they will ensure that you become or remain enrolled in the Plan, and a percentage of your compensation will be deferred unless you elect otherwise.

**EMPLOYERS MUST CHECK ONE OF THE TWO BOXES BELOW:**

Employees are automatically enrolled in the Plan at an employee contribution rate of \_\_\_\_\_% of their compensation each pay period.

Under the Plan's automatic enrollment feature, if you do not elect to make salary reduction contributions, your Employer may elect in advance to automatically withhold a portion of your eligible compensation from your pay each pay period and contribute that amount to the Plan. If your Employer checked the box above, the automatic contribution rate, a fixed percentage of your compensation for each pay period, is also noted above.

If you agree to the automatic deferral amount selected by your Employer (above), you do not need to complete this form. Your Employer may request that you sign your acknowledgement and consent to the deferral of the amount the Employer has selected.

This "auto-enroll" feature of the Plan will not apply to you if you either already elected to make contributions to the Plan or you already opted out of making your own contributions to the Plan.

You are in charge of the amount that you contribute. You may decide to do nothing and become or remain automatically enrolled, or you may increase or decrease your salary reduction percentage (or decline to make any salary reduction) at any time. If you wish to elect a different deferral amount than the automatic deferral amount selected by your Employer, check the second box under Section 2 below and complete Section 3. If you do not want to defer any of your compensation, check the third box under Section 2 below.

Employees are not automatically enrolled in the Plan.

Even if your Employer is not an "auto-enroll" Employer you may enroll and complete this form to direct your Employer to start, stop, or change the amount of your elective salary reduction contributions, whether or not you have met the Year of Eligibility Service criteria (which makes you eligible for Employer contributions).

<b>1. Employee Information:</b>
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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_

**2. Action Requested**

- Start Salary Reductions – Choose percentage or dollar amount below in Section 3.**
- Change the amount of Salary Reductions– Choose percentage below in Section 3.**
- Decline to make or stop current Salary Reductions – Do not complete Section 3.**

**3. Salary Reduction Amount**

Subject to the annual contribution limits and other requirements of the Plan as described on the attachment to this Agreement, I authorize my Employer to reduce my cash compensation by:

\_\_\_\_\_ % of my gross cash compensation or \$ \_\_\_\_\_ for each pay period.  
(Percentage) (Dollar Amount)

I am age 50 or older and elect to make additional catch-up contributions to the Plan subject to the annual limits on catch-up contributions. I authorize my Employer to reduce my cash compensation by:

\_\_\_\_\_ % of my gross cash compensation or \$ \_\_\_\_\_ for each pay period.  
(Percentage) (Dollar Amount)

**4. Signature**

- I understand that I may change the amount of my salary reduction or terminate the Agreement at any time by filing a written notice of termination with my Employer 30 days prior to the date that I wish to change the amount or terminate this Agreement.
- I understand that I am responsible for determining that the amount of my salary reduction listed above does not exceed the legal limits on such contributions shown on the attachment to this form, entitled Requirements of the Internal Revenue Service and the Unitarian Universalist Organizations Retirement Plan.
- I understand that, upon my request, my Employer will provide any available information from the Employer’s records that is necessary to enable me to make these determinations.

\_\_\_\_\_  
**Employee Signature**

\_\_\_\_\_  
**Date**

**EMPLOYER** is to keep this signed, dated original in their files and provide the employee with a copy.

*Neither UUA nor TIAA require a copy of this Agreement; you, the Employer, are responsible for proper administration of the Plan, including proper calculation of contributions and timely remittance to TIAA, the Plan’s recordkeeper.*

Questions? Email the UUA Retirement Plan Director at [Retirementplan@uua.org](mailto:Retirementplan@uua.org); be sure to include your name, title, UUA Member Congregation ID, and specific questions.

Information: Employee Pre-tax Deferral

### **Requirements of the Internal Revenue Service and the Unitarian Universalist Organizations Retirement Plan**

Your Employer may elect to automatically enroll you in the Plan to make salary reduction contributions at a specified percentage of your compensation, unless you elect otherwise. Your Employer will provide you with separate information if you are subject to automatic enrollment.

All contributions made to the Plan on behalf of enrolled participants, whether Employer Contributions or Employee Contributions (salary reduction contributions and catch-up contributions), and all earnings on those contributions, are, at all times, fully vested. Upon separation from service, you may receive the assets in your account as a lump sum payment, as a rollover into an Individual Retirement Account (IRA), or in systematic withdrawal payments. Individuals with accounts exceeding \$5,000 may also retain their account in the Plan after separation from service.

Contributions into a qualified retirement plan such as this Plan are governed by the Internal Revenue Code (IRC). IRC Section 415 requires that the sum of the Employer Contributions and Employee Contributions into the Plan in any limitation year (in this case, the calendar year) not exceed an amount equal to 100 percent of your taxable income or \$55,000 (for 2018), whichever is less.

In addition, the total Salary Reduction Contributions you may make to all savings plans (such as 401(k) and 403(b) plans) in a calendar year cannot exceed the 2018 limit under IRC Section 402(g) of \$18,500. If you are age 50 or older, you may make additional catch-up contributions to the Plan. In 2018, the maximum catch-up contribution you may make is \$6,000.