Valley Schools Management Group, AZ Participation Agreement for ROTH 457(b) Deferred Compensation Program

Name of Company:

Deferred Compensation Program			
Employee's Name	Social Security Number		
Position			
Original ROTH Agreement			
With respect to services rendered by the Employee hereafter, the Employe services shall be reduced by:	er and the Employee hereby agree the Employee's compensation for such		
Equal amounts of \$ per pay periods	iod beginning the, 20 pay period.		
The amount elected above shall result in a total ANNUAL DEDUCTIC Employer agrees that it will remit the amount of such deduction for the F above.			
Amendment ROTH Agreement - Type of Change Desir	red		
Increase from \$ per pay period to \$	beginning the, 20 pay period.		
Decrease from \$ per pay period to \$	beginning the, 20 pay period.		
\Box For TERMINAL LEAVE PAYOUT, deduct \Box \$ or	☐ Maximum Amount possible up to \$		
Suspend—Name of Company			
Effective Date of Change or Suspension	, 20		
I have read the above and understand the proposed change. I hereby redecrease or elimination of deduction under the ROTH 457(b) program, the falls within the guidelines established by the Internal Revenue Code of 198	at this deduction or elimination cannot be "made up" in the future unless it		
NO-LOAD ROTH INVESTMENT OPTIONS ONLY:			
I acknowledge receipt of the appropriate disclosure materials (pros Maximum Allowable Contribution limits for the current calendar year	pectus, etc.), and I am aware of the ar. (Product Disclosure Form not required) Employee's initials		
The undersigned hereby agrees to the terms and conditions of the Valley Schools Management Group, A the Plan has been made available to them. This election shall continue until the undersigned makes a su issue an annuity contract or custodial arrangement for the benefit of the participant without the signature of the employer's 457 Deferred Compensation Plan.	Z Deferred Compensation Plan ("Plan") as such Plan now exists or is hereinafter amended and a copy of ibsequent election as provided by the Plan. The employer hereby authorizes on the provider company to find the employer provided that the owner of the annuity contract or custodial arrangement is designated as		
I (the Employee) understand and agree to the following:			
My deferrals cannot begin sooner than the month following Participation Agreement approval. My accubenefit of participants and their beneficiaries until paid to me under the rules of the Plan. I realize I may not be plan be plan between the rules of the the r	Imulated deferrals will be held in trust by the Valley Schools Management Group, AZ for the exclusive ot assign or transfer my rights under the Plan.		
I am responsible for the accuracy of the excludable amounts stated in this Agreement. Any overstatement of the amounts excludable as a salary reduction in this agreement, or any other violation of the requirement of IRS Code Section 457 could result in additional taxes, interest, and penalties to the Employee.			
I hereby authorize my Employer to reduce or suspend any deferrals established by this agreement, if in its opinion, the total annual deferral would exceed the maximum allowable limit in any calendar year. Should my deferral exceed the maximum limit, I authorize my Employer to disallow deferral of the excess amount and direct these amounts to be refunded to me.			
Release of Liability - The Employee agrees that the Employer and its agents shall have no liability wha account, its terms, the selection of the insurance company, custodian, or regulated investment companied investment companied investment companies of shares of regulated investment companies.	stsoever for any and all losses suffered by me with regard to my selection of the annuity and/or custodia ny, the financial condition, operation of or benefits provided by said insurance company, custodian, or ss.		
The employer hereby authorizes on the provider company to issue an annuity contract or custodial arrangement is designated as the employer's 457 Deferred Compensation	gement for the benefit of the participant without the signature of the employer provided that the owner on Plan.		
Earnings, if any, will be applied to my accumulated deferrals in accordance with the Company and product performance of the Companies or products selected by the Employee.	t I have selected. Neither the Employer, nor Trustees, nor agencies of the Employer shall be liable for the		
Any change to this Agreement must be in writing to the Employer and becomes effective upon the	execution of this Agreement by Employee and Employer.		
This Agreement may be terminated by either the Employer or Employee upon thirty (30) days notice to	o the Company and to the Employer or Employee as applicable.		
Designation of Beneficiary - The beneficiary for each annuity contract or certified account to which caccount.	contributions are allocated shall be determined in accordance with the terms of that specific contract or		
Effective Date of this Agreement, 20	Valley Schools Management Group, AZ		
AGENT / REPRESENTATIVE NAME AGENT'S PHONE			
EMPLOYEE SIGNATURE	EMPLOYER SIGNATURE		
DATED , 20	DATED, 20		