



# 403(b) Retirement Savings Plan

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Attn: SRA Processing Team  
P.O. Box 4037, Fort Walton Beach, FL 32549  
Toll Free: 1-888-796-3786, Option 5  
Toll Free Fax: 1-866-908-7582  
Email: [sraprocessing@tsacg.com](mailto:sraprocessing@tsacg.com)

Questions? Call our Service Center at 1-888-796-3786, Option 5

## Salary Reduction Agreement

Use this form to set up or change contributions to your 403(b) Account. Please type or print your information and fax to 1-866-908-7582

### Employee Data – ALL FIELDS REQUIRED

Employer Name:	
Name:	Social Security #:
Address:	City/State/Zip:
Daytime Phone #:	Date of Birth:
Evening Phone #:	Date of Hire:
Email Address:	Number of Payrolls per Year:

### Contribution Specifications

Complete this section to set up or change contributions to your 403(b) Account. Please note that the contribution amount may not exceed the [Maximum Amount Contributable \(MAC\)](#) as adjusted annually by the Internal Revenue Service .Review your Plan Highlights for the availability of Roth 403(b) contributions and Age 50 Catch-Up Contributions.

- Start new payroll deductions (Account must be established under your current employer's plan prior to submitting SRA, fill in Account Number below).
- Increase existing payroll deductions.  Decrease existing payroll deductions.
- One-time payroll deduction then stop deductions.  One-time payroll deduction then revert to existing deductions.
- Change investment providers. Stop contribution to \_\_\_\_\_ and start contributions to \_\_\_\_\_.
- Please stop my contributions to \_\_\_\_\_.

Make changes effective with payroll date \_\_\_\_\_.

*Please contact your investment provider to ensure that the provider can accept Roth 403(b) Accounts*

**You are responsible for establishing any annuity contract or custodial account with the Investment Provider(s) indicated below prior to submitting your Salary Reduction Agreement. Please provide your account # to avoid delay in processing your changes.**

Investment Provider(s)	Account #	Pre Tax	After Tax (Roth)	Annual Salary Reduction		Salary Reduction Per Pay Period	
				\$	%	\$	%
1.		<input type="checkbox"/>	<input type="checkbox"/>	\$	%	\$	%
2.		<input type="checkbox"/>	<input type="checkbox"/>	\$	%	\$	%
3.		<input type="checkbox"/>	<input type="checkbox"/>	\$	%	\$	%
4.		<input type="checkbox"/>	<input type="checkbox"/>	\$	%	\$	%

**Total deduction each pay period \$ \_\_\_\_\_**

After the initial SRA is submitted and approved by WEBUT P&B SAOO Co{ ] [a] & A'!cA\*, subsequent changes can be made online at <https://sra.tsacg.com>

### Approval Signature

- 403(b) deferrals can start no earlier than the first pay period following the date this agreement is signed.
- This Salary Reduction Agreement is irrevocable with respect to amounts earned while it is in effect and applies only to amounts earned after the agreement becomes effective.
- This Salary Reduction Agreement will continue until amended or terminated. This agreement shall automatically terminate with severance from employment.
- The Employee agrees that the Employer shall have no liability whatsoever for any loss suffered by the Employee with regard to his/her selection of an investment provider, or the solvency of the operation of, or benefits provided by, said investment provider.

Signature of Employee

Date (Please Note: Above date must be within last 90 days to be valid)