



403(b) Supplemental Retirement 457(b) Deferred Compensation Agreement

The University of Wyoming sponsors a 403(b) Supplemental Retirement Plan, and a 457(b) Deferred Compensation Plan. To participate in either or both plans, complete the information below. This agreement will replace any prior salary reduction and/or salary deferral agreement. Participants in Wyoming Deferred Compensation should not use this form, visit <https://retirement.wyo.gov/dc/>.

Check one:

New Enrollment Change

Please indicate which plan this agreement applies to:

403(b) 457(b) Both

EMPLOYEE INFORMATION

Name: _____ Employee HCM # _____ Date of Birth _____

Address: _____ City: _____ State: _____ Zip: _____

Effective with amounts paid on or after _____ 20____. This date is subsequent to the execution of this Agreement, the EMPLOYEE’S salary will be reduced/deferred by the amount(s) indicated below. The EMPLOYER will contribute the amount identified below to the EMPLOYEE’S retirement contract, which the EMPLOYEE will allocate among the funding vehicles approved by the EMPLOYER.

An account with the company of your choice must be opened prior to turning this form in the Payroll office, with the exception of TIAA.

Email completed forms to payroll1@uwyo.edu.

Employees must select only one of the four ‘\$20 MATCH’ boxes below to determine where their \$20 match will be applied.

403(b) Supplemental Retirement

Employee agrees to salary reduction contributions to the 403(b) plan in the following amount(s) per pay period:

\$20 MATCH

\$ _____ Pre-tax

\$ _____ After-tax Roth

COMPANY NAME: _____

Companies available for the 403(b) are TIAA, VALIC, Ameriprise, AXA, Fidelity and VOYA.

The frequency with which a 403(b) salary reduction agreement may be entered into or amended, the compensation as to which such agreement shall be determined under the federal income tax rules applicable to qualified cash or deferred arrangements.

457(b) Deferred Compensation

Employee agrees to defer the right to receive compensation per pay period as follows:

\$20 MATCH

\$ _____ Pre-tax

\$ _____ After-tax Roth

COMPANY NAME: _____

Companies available for the 457(b) are TIAA, VALIC and Security Benefit.

Participants in Wyoming Deferred Compensation should NOT use this form. Visit <https://retirement.wyo.gov/dc/> for more information.

This agreement is legally binding for both the EMPLOYER and the EMPLOYEE with respect to amounts earned while employment continues. This agreement shall terminate any prior Supplemental Retirement and Deferred Compensation Agreement executed between the Employer and Employee under the 403(b) and 457(b) programs. This agreement shall continue indefinitely until amended or terminated by either party by giving at least thirty (30) days written notice prior to the date of such amendment or termination. Unless the Employer’s plan or arrangement with you provides otherwise, this agreement shall automatically terminate upon EMPLOYEE’S separation from service with the EMPLOYER.

Employee may only contribute amounts that have not already been paid or made available. Employee agrees and acknowledges that contributions shall not exceed applicable limits under the plan or federal law and that institution may limit contributions in order to comply with federal law and the plan document if any. Employee hereby directs that any contribution in excess of such limits be returned to Employee in accordance with governing legal requirements.

Employee Signature: _____ **Date:** _____

UW Payroll use only	Date received by Payroll Office:	Processed by:
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