

**University of Arkansas Retirement Plan**

**“UNMATCHED” RETIREMENT CONTRIBUTION AGREEMENT AND ACKNOWLEDGEMENT**

This form is only for use by employees who are not eligible for matching University contributions to the UARP (including employees in temporary, student, resident or other ineligible positions, and grandfathered participants in APERS or ARTRS).



Employee Name: \_\_\_\_\_ Soc. Sec. # or Employee ID # \_\_\_\_\_

I request that the following be processed as soon as administratively possible or a later effective date of \_\_\_\_\_.

- Start or Change My Voluntary Contribution (fill out A and B)
- Change My Vendor/Record Keeper (fill out B)
- Stop My Voluntary Contribution

**A**

**EMPLOYEE VOLUNTARY CONTRIBUTION-NOT ELIGIBLE FOR EMPLOYER CONTRIBUTIONS UNDER UARP (INCLUDING NON-BENEFITS ELIGIBLE EMPLOYEES AND EMPLOYEES GRANDFATHERED UNDER ARTRS OR APERS)—EMPLOYEES ELIGIBLE FOR UNIVERSITY CONTRIBUTIONS UNDER UARP SHOULD COMPLETE DIFFERENT FORM)**

**You should only complete this form if you are NOT eligible for University contributions under the UARP.**

**\*\*TOTAL is the percent you wish to have deducted from your pay, split between before-tax and Roth after-tax.**

<b>Before-Tax</b>	%	Unless I check the box below, I understand that if I reach the 402(g) deferral limit in effect for the year, my contributions will continue on a before-tax basis under the 457(b) Plan.
<b>Roth 403(b) (After-Tax)</b>	%	
<b>**TOTAL =</b>	%	
<input type="checkbox"/> <u>I do not wish to participate in the 457(b) Plan.</u> Stop my contributions for the remainder of the year when I reach my deferral limit in effect for the 403(b) Plan.		

**B**

**VENDOR/RECORD KEEPER – SELECT ONE**

**Complete this section if you are making an initial election or want to change your vendor/record keeper.**

<input type="checkbox"/> <b>Fidelity</b> or <input type="checkbox"/> <b>TIAA</b>	I authorize the University to direct voluntary contributions to the selected vendor/record keeper as designated. I understand that I change my selection at any time and that this election cancels out any previous election.
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I understand that it is my responsibility to read and agree to the Employee Acknowledgements listed on the back of this page.

The % election above applies to EMPLOYEE PLAN COMPENSATION, which means all compensation other than:

- Overtime
- Terminal Vacation, Sick, Holiday, Compensatory and Severance Pay
- Expense reimbursements and allowances, student loan repayments, fringe benefits (cash and non-cash), moving expenses and welfare benefits
- Deferred Compensation
- Recruiting, Sign-On, Referral, Service and Achievement Awards (not including merit bonuses or career service awards, which are included compensation)
- Compensation funded by a supporting Foundation other than base salary



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

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Human Resources/Benefits use only)

## **EMPLOYEE ACKNOWLEDGEMENTS**

1. I acknowledge that this agreement applies only to compensation not yet paid or made available to me.
2. I acknowledge that this agreement will remain in effect until I change (revoke or modify) it. I may change this agreement by providing a new election form to my campus Human Resources office.
3. I acknowledge that if I elect to make 403(b) before-tax contributions, all distributions from such account are taxable when made.
4. I acknowledge that Roth contributions can only be made only to the 403(b) Plan.
5. I acknowledge that if I elect to make Roth 403(b) contributions, the combination of before-tax and Roth 403(b) employee contributions is limited to the 402(g) tax-deferred limit.
6. I acknowledge that Roth 403(b) contributions are after-tax, but provided certain requirements are met, distribution from the Roth 403(b) account is tax-free.
7. I acknowledge that with respect to 403(b) Plan amounts, I can change my contribution at any time before the payroll processing date, subject to reasonable notice. Changes in 457(b) elections must be made prospectively, before the beginning of the pay period in which the change will be effective.
8. I acknowledge that unless otherwise elected, this agreement will automatically be renewed for the following year(s) unless specifically cancelled or replaced by a new agreement.
9. I acknowledge that separate investment elections and beneficiary designations must be made for the 403(b) Plan and 457(b) Plan.
10. I acknowledge that I can change my vendor/record keeper at any time.
11. I acknowledge that this agreement is legally binding and irrevocable for both the University and me with respect to amounts payable to me while the agreement is in effect.
12. I acknowledge that failure to fully complete the Election Form may cause a delay or failure to reduce my compensation or direct my investment allocations.
13. I acknowledge that I may contact my Human Resources office to find out the current 402(g) deferral limit, and that the 402(g) deferral limit refers to the maximum BEFORE-TAX 403(b) and ROTH 403(b) employee voluntary contributions.