



**Optional Retirement Plan Salary Reduction Agreement
For Tax-Deferred Retirement Benefits**

Please read the Informational Handout for more information regarding this plan

Identifying Information (Please see back page for assistance in completing this form)

Name:	
Employee Number (or SSN):	

ACCOUNT TYPE	GSRA*available to all RF non student employees	TDA**available only to employees already enrolled
OPTION	<input type="checkbox"/> New <input type="checkbox"/> Change <input type="checkbox"/> Renewal	<input type="checkbox"/> Change Only
DEDUCTION PERCENTAGE	_____ %	_____ %

****TDA-No new enrollment or reenrollment is allowed for this account type**

Deductions will be sent to:

TIAA-CREF - 1.800.842.2252 www.tiaa-cref.org

Deduction will be invested to an age appropriate JPMorgan SmartRetirement Target Date Fund unless further instruction is received

If you determine a retirement target date fund or the default beneficiary of your “estate” is not for you, TIAA-CREF offers on-line enrollment. You can log on to the TIAA-CREF website (tiaa-cref.org/rfsuny) and click **Enroll Now. If you need assistance with enrolling online, call TIAA-CREF at 800 842-2888 or refer to the Informational Handout for more information.**

This agreement will go into effect the payroll following the date signed or submission to your Research Foundation benefit representative, whichever is later.

By signing this agreement the employee acknowledges they have received and read about the plan in the Benefits Handbook as well as the informational handout and that this agreement is subject to terms of the plan. The employee also acknowledges responsibility for assuring the salary reduction amount through the Research Foundation and any other employer’s plan do not exceed the limits defined by the Internal Revenue Code (IRC). The employee further certifies that any retirement plan contributions made by a business in which the employee has a controlling interest have been reported to the RF following the instructions in the Optional Retirement Plan Informational Handout. This agreement can be terminated or changed at any time by completing a new form.

Date signed: _____ Employee Signature: _____

Date signed: _____ Research Foundation
Authorization: _____

Title: _____

In the section...	item...	enter...
Identifying Information	Name Employee Number or SSN	Name Enter your employee number which is found on your paystub. If you are a new employee or cannot locate your employee number then enter your SSN
Account Type	GSRA * TDA**	Available to all RF non student employees Only available to employees who are currently enrolled and have deductions
Option	New Change Renewal	Check if you are signing up for a tax deferred deduction for the first time Check if you have an existing account and are making a change. NOTE- This is the only option for TDA account Check if you previously participated in a GSRA but are not currently and your contracts are still open at TIAA-CREF
Deduction Percentage	% of gross biweekly salary	Percentage for which you want your biweekly salary reduced (up to 2 decimal places) NOTE: If you currently have both a GSRA and TDA enter the percentage for each Although you may reduce up to 100% of your salary net of FICA, the total reduction amount cannot exceed the annual limits stated in the handout. Further, you should allow for enough salary to cover payroll deductions for employee benefits, parking, etc.
Date and Signature		Sign and date the agreement. The agreement will go into effect the payroll following the date signed or submission to your campus Research Foundation benefit representative, whichever is later.