

RAPID RIVER PUBLIC SCHOOLS – Approved 403(b) Vendors

Great American Financial Resources

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Thrivent Financial for Lutherans

Contact: Craig Etelamaki (800)847-4836
Dannette Viau (906)789-9751
4321 North Ballard Road
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Transamerica

Contact: Mike Perry (906)786-5930
PO Box 219945
Kansas City MO 64121-9945



Salary Reduction/Deduction Agreement

TPA Program

In order to comply with Section 403(b) of the Internal Revenue Code of 1986 and to qualify for benefits there under, it is hereby agreed that the employment agreement between the Employer and the Employee is amended in the following manner:

Please check all that apply:

- New 403(b) 457 or Roth 403(b) Account (Attach Account Verification)
- Change in current contribution amount and/or Investment Provider allocation (Supersedes any prior agreement)
- Employer Contribution
- Terminate Agreement (Complete Sections 1 & 4 only)

1. EMPLOYEE INFORMATION

Employee Name	SSN	Date of Birth
Address	City, State, Zip	
Phone	District Name & Title	

2. SALARY REDUCTION ALLOCATION ELECTION (allow for at least one pay cycle to be effective)

Effective _____, 20____, I elect to reduce my salary by \$_____ or _____% per pay period.

Investment Provider(s)	Contract/Account Number	Allocation Amount

2 a.) \$ _____ X _____ = \$ _____
TOTAL PER PAY PERIOD (PRE-TAX & POST-TAX) NUMBER OF PAY PERIODS TOTAL PER YEAR (PRE-TAX & POST-TAX)

Eligible for 50+ Catch-up

Eligible for 15-Year Catch-Up - Date of Employment: _____ (Attach 15-Year Catch-Up Form with calculations)

(1) The stated reductions/deductions shall not exceed the current 402(g) limit on total elective contributions to all 403(b) programs or the overall contribution limits of applicable law. (2) These reductions/deductions shall not be retroactive, but shall be applicable to each future payroll or specific compensation period during which this Salary Reduction/Deduction Agreement (the "Agreement") remains on file with the Employer. (3) This agreement shall be effective for the remainder of the taxable year of the Employee, commencing on the date the stated reductions/deductions begin, and shall be effective from year to year thereafter until a new Agreement is executed or this Agreement is amended or revoked by the Employee. (4) This Agreement applies only to amounts earned by the Employee after the effective date of the Agreement, and is legally binding and irrevocable with respect to amounts earned while the Agreement is in effect. (5) The Employee retains the right to terminate the Agreement in its entirety for amounts not yet earned. (6) If the Employee terminates employment with the Employer, this Agreement shall automatically terminate. (7) Other terms and conditions of employment between the Employee and the Employer shall not be affected by this Agreement.

3. TERMINAL PAY AT RETIREMENT OR TERMINATION—Employee Deferral Only

One-time reduction from terminal pay \$ _____
Total from Terminal Pay

Maximum Amount Available

The Employee expressly understands that this contribution is made in lieu of cash for the amount listed above. This form should not be used for Employer Non-Elective contributions

4. AUTHORIZATION

The Employee understands that the Company will rely on the accuracy of the data provided by the Employee when giving the Employee any assistance in determining the Employee's pre-tax and post-tax contribution limits under Code Sections 403(b) and 415. The Employee agrees that all computations done in connection with the salary reduction/deduction authorized above, including eligible compensation, years of service, and prior contributions, pursuant to Code Sections 403(b) and 415 shall remain the sole responsibility of the Employee.

DATE _____ EMPLOYEE SIGNATURE _____ DATE _____ REPRESENTATIVE SIGNATURE _____

Submit Completed Form To:
 1480 Kendale Blvd, East Lansing, MI 48823
 Fax: 517-337-5594

DATE _____ PLAN ADMINISTRATOR SIGNATURE _____