


Please see next page for the Adobe Fillable Form

Directions for Completing & Submitting:

If the form opens in a web browser users need to download and save the file. Do not fill it out or print from the browser.

- Download the form to your computer 
- Choose to save the form to your desktop or a specific file folder
- Click "Save"
- Locate the saved form and right click
- From the menu, choose "Open With >", then select "Adobe Acrobat DC or Adobe Acrobat Reader"
- Complete the form with your information and click "Save"
- Send an email to hr@svsu.edu with the form attached

*To download adobe or if you need additional assistance, please visit the Knowledge Article - [Completing Fillable Forms](#) section.

Saginaw Valley State University

403(b) Compensation Reduction Agreement

- A/P
 Faculty
 Support

Employee Name: _____

Last Four
of SSN #: _____

(*Required)

This is a: New Agreement Increase Decrease Cancellation Company Change

Effective with the Payday of: _____

CHECK WHICH AGE APPLIES

Total Annual Reduction (between all carriers listed below) not to exceed:

<age 50

>age 50

SECTION I

Voluntary Salary Reduction:

Total New Bi-weekly Deduction

TIAA/CREF*	(800)842-2776	\$_____ or _____% per pay
American Funds	(800)421-0180, ext. 23	\$_____ or _____% per pay
Fidelity	(800)343-0860	\$_____ or _____% per pay
American Century Investors	(800) 345-3533	\$_____ or _____% per pay

*If this is a new account, log into the TIAA-CREF website to set up the account at www.tiaa-cref.org/svsu click "ENROLL NOW" and follow the "Enroll Online" instructions.

SECTION II

Voluntary Contribution Towards Retirement: \$_____ or _____% per pay

This option is only available to those contributing to the Retirement Annuity prior to September 1, 2006 (grandfathered participants only).

Note: Voluntary contributions invested in the Retirement Annuity (RA) are subject to the same distribution rules of SVSU's retirement program, which are more restrictive than the Supplemental Retirement Annuity (SRA) rules.

This agreement shall be legally binding and irrevocable as to both parties while employment continues; provided that either party may terminate this Agreement as of the end of any period so that it will not apply to compensation subsequently earned. THE TAX CONSEQUENCES OF THIS AGREEMENT AND THE PERFORMANCE OF SELECTED INVESTMENTS ARE NOT THE RESPONSIBILITY OF THE UNIVERSITY.

This agreement shall supersede any prior 403(b) Salary Reduction Agreement. Employee consents that the University may provide copies of this form and/or compensation information to any of the vendors to whom employee has allocated funds in the paragraph above.

Employee Signature: _____

Date: _____

Approved: Saginaw Valley State University (Complete and return to Human Resources)

By: _____

Date: _____