

WASHTENAW COMMUNITY COLLEGE
Office of Human Resource Management

403b Salary Reduction Agreement

By this agreement, made between _____ (employee's name),
Employee ID number @ _____, and Washtenaw Community College, the parties
hereto agree as follows:

Effective with respect to amounts earned after (**calendar date**) _____, 20 _____ (which
date is subsequent to the execution of this agreement), the employee's gross earnings will be reduced by
the amount indicated below and allocated as designated below by the employee.

The amount of salary reduction shall be either \$ _____ per pay * **OR** _____ %* of the
employee's gross earnings, which will produce a total retirement contribution that does not exceed the
employee's statutory exclusion allowance under Section 403(b) of the limitations of Section 415 of the
Internal Revenue Code, (**\$19,000 or 100%**) **whichever is less**. It is understood that amounts specified
below will be paid to the tax deferred plan or annuity indicated.

\$ _____ per pay to **VALIC Retirement**

\$ _____ per pay to **AXA Equitable** (existing accounts only)

\$ _____ per pay to **Lincoln Financial Group**

\$ _____ per pay to **TIAA/CREF**

The maximum contribution allowable for the calendar year 2020 is \$19,500

For employees age 50 and over, the maximum contribution allowable is \$26,000

exception* as follows: max contribution must be confirmed by 403b plan provider for processing.

****For 15 year employees, the maximum contribution allowable is \$22,000***

****For 15 year employees, age 50 and over, the maximum contribution allowable is \$28,000***

I would like my maximum contribution amount to be \$ _____ .

**Note: Your contribution election and maximum contribution will stay in effect from one year to
the next until you submit another Salary Reduction Agreement.**

* The amount of the employee's exclusion allowance is a mathematical computation for which the employee assumes full
responsibility for the tax reporting on his/her individual income tax return in connection with his/her tax deferred account(s).
Washtenaw Community College shall have no obligation to verify the correctness of the computation of the employee's
exclusion allowance or Section 415 limitations unless such obligation is explicitly undertaken by separate written agreement.

Date: _____

Employee Signature: _____

For Human Resource Management Use Only

Date: _____ HRM Signature: _____ Effective (pay date): _____