

**COLLEGE FOR CREATIVE STUDIES 403(b) RETIREMENT PLAN  
ELECTION FORM**

**PART I – GENERAL INFORMATION****A. Participant Information:**

Name: \_\_\_\_\_ Soc. Sec. No.: \_\_\_\_\_

Address: \_\_\_\_\_

**B. TIAA-CREF Information:** TIAA-CREF is the 403(b) Plan's record keeper. In order to for TIAA-CREF to keep track of your 403(b) Plan contributions and investments, you must contact TIAA-CREF to create an account by visiting [www.tiaa-cref.org/ccs](http://www.tiaa-cref.org/ccs) or calling TIAA-CREF at (800) 842-2252. The CCS 403(b) Plan number is #500234. TIAA-CREF will provide you with a confirmation number when you have successfully created an account. Please enter your TIAA-CREF confirmation number here: \_\_\_\_\_.

**PART II - CONTRIBUTION INFORMATION****A. Please check one of the following:**

I do not wish to make contributions to the 403(b) Plan from my prospective paycheck. If I later decide to make future deferrals to the 403(b) Plan from my prospective paycheck, I understand that I can complete a new election form that will supersede this election form. I also understand that CCS will still make a discretionary contribution to my 403(b) Plan account, provided that I meet the 403(b) Plan's eligibility provisions for discretionary contributions.

I wish to make contributions to the 403(b) Plan from my prospective paycheck. I understand that CCS will also make a discretionary contribution to my 403(b) Plan account, provided that I meet the 403(b) Plan's eligibility provisions for discretionary contributions.

**B. Pre-Tax Elective Deferrals.** I hereby elect to defer from my paycheck as a pre-tax Elective Deferral contribution (check one):

- \$ \_\_\_\_\_  
 \_\_\_\_\_ %

**C. Roth Elective Deferrals.** I hereby elect to defer from my paycheck as a Roth after-tax Elective Deferral contribution (check one):

- \$ \_\_\_\_\_  
 \_\_\_\_\_ %

*Please note that the combination of Pre-Tax Elective Deferrals and Roth After-Tax Elective Deferrals in Sections B and C above cannot exceed the maximum deferral contribution limit for the calendar year or the maximum deferral contribution limit under the 403(b) Plan (50% of your Plan Year Compensation).*

**D. Catch-Up Contributions.** If I am at least 50 years (or will be this year), and if I cannot make any additional Elective Deferrals for the year due to 403(b) Plan limits, I elect, subject to the maximum annual limit (adjusted each year in accordance with the Internal Revenue Code), to continue to defer from my paycheck as a Catch-Up Contribution (check one):

- \$ \_\_\_\_\_  
 \_\_\_\_\_ %

**PART III – SIGNATURE****I understand that:**

- (i) This election is subject to all of the terms and restrictions under the 403(b) Plan.
- (ii) The amounts contributed on my behalf under the 403(b) Plan are subject to limitations under the Internal Revenue Code and that to the extent that I might elect an amount greater than the maximum deferral permitted under the Code, the amounts elected to be paid-over to the 403(b) Plan shall not be paid-over, or if they inadvertently are paid-over, shall be returned to me subject to earnings thereon, which will be fully taxable.
- (iii) Changes are generally effective as soon as administratively possible following the execution of this form; provided cessation of deferrals may occur immediately.
- (iv) This form amends and supersedes any election form previously submitted, and remains in effect for this year and subsequent years until a new form is timely submitted and accepted.

Participant Signature \_\_\_\_\_ Date: \_\_\_\_\_