Use this form to enroll in the 403(b) or to change/discontinue your current 403(b) election. **A. Employee Information** Name (Last, First, Initial) Social Security Number (Required) Day Phone / Email Date of Birth University ID Number (Required) O I am a Post-Doctoral Scholar. Hire Date: C. Enter your contribution percentage(s): **B. Select ONE Provider:** AND Total Roth (after-tax) = Pre-tax +403(b): Fidelity % +% = % 403(b): TIAA % % +% =

Total must be a whole percentage between 1 and 85, and Roth contributions cannot exceed 60%. **TO STOP CONTRIBUTIONS: Enter "0" percent in Section C.**

D. Acknowledgement, authorization and signature:

Initial Investments (for new participants): If you do not select specific investments with your provider they will be allocated to a default investment depending on the 403(b) Provider that you select. The default investment is a lifecycle investment that most closely corresponds to your projected retirement date. You can find additional information about these investments, select specific investments for future contributions or change your current account allocations at any time by contacting your selected 403(b) Provider.

Effective Date of Elections: Forms received by your university's benefits department on or before the 10th of the month will be effective during the current month. Forms received after the 10th will become effective starting in the next pay month.

Information Transfer Authorization: Your signature below serves as authorization for the university to provide your 403(b) Provider (see section B) with your personal information necessary for the establishment of a 403(b) account.

Deferral Authorization: I authorize the actions requested above by signing and dating this form. I acknowledge these elections supersede all prior elections. The maximum calendar year salary deferral amount is determined by the IRS via the General Limit (IRC 402(g) - \$23,000 in 2024) and additionally, if applicable, the Age 50 Catch-Up Limit (IRC 414(v) - \$7,500 in 2024). Your annual maximum will change to stay synchronized with any future adjustments to the IRS limit, but your contributions will not exceed the percentage authorized on this form.

Acknowledgement of Responsibilities: The instructions and information on this form, as well as the information in the 403(b) Retirement Plan Decision-Making Guide are an integral part of this agreement and provide essential information for understanding the Oregon Public Universities Tax-Deferred Investment 403(b) Plan. I will ensure that contributions are limited so as not to cause a maximum limits violation if other outside 403(b) plans are aggregated.

Employee Signature		Date	University
Human Resources Use Only	Date Received:	Entered By:	Entered Date:

403(b) Voluntary Savings Form

Calculate your contribution percentage or amount:

Q: I know how much I want to contribute, but what percentage of my pay would that be? A: Desired Annual Contribution / Gross Annual Pay = Contribution Percentage:

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\$

\$

%

=

Q: I know the percentage of pay that I would like to contribute, but how much will that be annually? A: Contribution Percentage X Gross Annual Pay = Annual Contribution Dollar Amount:

 $\% \times \$ = \$$

Need a monthly amount? Divide by the number of months in your appointment (usually 9 or 12)

*This quick calculator is provided as a general tool for your use while planning your contributions. If you have any questions about what contribution level is best for your situation, please contact one of our providers (below) or speak with your financial advisor.

Other Enrollment Actions: When you complete and return this form to your university (see locations below) you will have taken all of the actions necessary to establish a basic 403(b) account, but there are other important actions to strongly consider:

Additional Action	Vendor	What's the First Step?
Select Specific Investments	Fidelity	Log into your account online or contact your provider at the
	& TIAA	number listed below.
Establish your beneficiaries	Fidelity	Log into your account online or contact your provider at the
	& TIAA	number listed below.
Meet with your Provider	Fidelity:	www.netbenefits.com/opurp/
	TIAA:	www.tiaa.org/moc

Additional 403(b) Information:

For Information On	Call	Visit Online
403(b): Fidelity 403(b): TIAA General 403(b) Information	800-343-0860 800-842-2252	www.netbenefits.com/opurp www.tiaa.org/opurp www.opurp.org/tdi

Form Return Addresses: Return this form to the locations indicated below.

Institution	Drop-Off Location	Mailing Address	City, State, Zip	FAX
EOU	Inlow Hall, Rm 209	One University Blvd	La Grande, OR 97850	541-962-3023
OIT	Snell Hall 111	3201 Campus Dr. Mail Stop: HR	Klamath Falls, OR 97601	541-851-5200
OSU	236 Kerr Admin Bldg Electronic Form Available	236 Kerr Admin Bldg	Corvallis, OR 97331-2132	541-737-0541
PSU	Electronic Submission Only PSU HR Benefits Website	n/a	n/a	
SOU	Churchill 159	1250 Siskiyou Blvd	Ashland, OR 97520	541-552-8508
UO	Payroll Dept, 720 E. 13th	UO Payroll, PO Box 3237	Eugene, OR 97403	541-346-1109
WOU	Admin. Bldg. 306	345 N Monmouth Ave.	Monmouth, OR 97361	503-838-8522