

Use this form to direct Whitman College to defer part of your compensation to your 403(b) plan.

IMPORTANT: This form replaces and cancels all previous salary reduction agreements on file.

Click [HERE](#) for instructions or copy and paste the URL in the address bar:

<https://drive.google.com/file/d/1Wzd6O6OxYN-FgCDDDeUGuV31vzBgdmRjX/view?usp=sharing>

I. Employee Information

First Name _____ Last Name _____

Department _____

Subject to the requirements of the Whitman College 403(b) plan, I authorize the percentage(s) listed below be withheld from my pay each pay period and contributed to my retirement annuity contracts with TIAA as a salary reduction contribution. I will allocate these contributions among the fund options available in the plan.

My salary reduction contributions will be effective the first day of the payroll period following the Plan Administrator's receipt of the completed form and will be for amounts earned on or after the **first day of (month)** _____, 2024.

2. (*MUST BE ELIGIBLE) Salary Reduction 2% Election for Matching Plan

An eligible employee has 1 year of service and worked at least 1,000 hours per year. Eligible employees may begin participation in this plan on a voluntary basis on or after the first day of the month after completing one year of service at Whitman College. An employee who has met the 1 year of service requirement at another institution of higher education during the 12 months immediately preceding their date of employment at Whitman College will be considered to have met the service requirements for Whitman and can join the plan immediately.

- I wish to contribute 2% of my salary to receive a College match of 10%; and I authorize
- Pre-tax deduction of 2% of gross salary; or (TIA2)
- After-tax deduction (ROTH) of 2 % of gross salary; or (TIR2)
- 1% Pre-tax deduction and 1% after-tax deduction totaling 2 % of gross salary (TIR1 & TI1P)

3. Salary Reduction for Voluntary Plan

You may contribute additional amounts in addition to the 2% employee contribution. Please indicate if you wish to participate.

- Pre-tax deduction _____ % of gross salary (TIA3) or \$ _____ amount per month (TIA5)
- After-tax deduction (ROTH) _____ % of gross salary (TIRP) or \$ _____ amount per month (TIAR)
- I am electing to use the Age 50 Catch-up provision.

4. Maximum Salary Reduction

I understand that the total amount of my salary reduction contribution for the matching plan and voluntary plan in any calendar year cannot exceed the applicable amounts listed below.

Tax Year	Annual Deferral amount	Annual Catch-up Amount*
2024	\$23,000	\$7,500

Employee Signature

Date

Director of Human Resources Signature

Date

Return this form to Human Resources, Memorial Building, Room 104 or email to HR@Whitman.edu *ELIGIBILITY REQUIREMENTS can be found on the HR website at <https://www.whitman.edu/human-resources/benefits/retirement>

*Employees age 50 or older by the end of the calendar year may make additional elective deferral contributions annually. The amount must not exceed the statutory limitation under IRC Section 414(v).