

Plan A

Case Western Reserve University Faculty and Executive Staff Salary Reduction Agreement (SRA) and Investment Election Form

Name _____

Empl ID _____

Campus Address _____

Campus Phone _____

Plan A Participation – Investment Carrier Selection: I elect the following investment carrier for my Non-Contributory Retirement Account. Subject to a one year waiting period unless requirements are met to waive the waiting period. Newly appointed visiting faculty and full-time lecturers have a mandatory one year waiting period – contact Benefits Administration for details. (On-line enrollment with investment carrier must be completed when establishing a new account.)

☐ TIAA-CREF Annuity Contract (Plan #101685)

☐ Vanguard Custodial Account (Plan #090272)

Selection effective date: _____

Employee Signature _____

Date _____

SRA Participation

☐ I elect to establish/continue a Supplemental Retirement Account. **Complete the remainder of this form and sign the Salary Reduction Agreement below.**

☐ I elect NOT to continue a Supplemental Retirement Account. **Complete and sign the SRA Waiver below.**

Investment Election: I elect the following account type and investment carrier for my Supplemental Retirement Account contributions. (*Investment carrier on-line enrollment must be completed when establishing new account.*)

Tax-Deferred 403(b) Contributions

Roth 403(b) After-Tax Contributions

☐ TIAA-CREF Annuity Contract (Plan #101686)

☐ TIAA-CREF Annuity Contract (Plan #101686)

☐ Vanguard Custodial Account (Plan #090272)

☐ Vanguard Custodial Account (Plan #090272)

Amount of Tax-Deferred Salary Reduction:

I direct this amount be contributed on my behalf to the investment of my choice (indicated above).

\$ _____ / Effective date: _____

Amount of After-Tax Salary Reduction:

I direct that this amount be contributed on my behalf to the investment of my choice (indicated above).

\$ _____ / Effective date: _____

Salary Reduction Agreement: (Please read additional acknowledgement on back of form)

I authorize Case Western Reserve University to reduce my basic salary, effective as of the first day of the month following the month in which this agreement is executed. Such salary reduction amount will be applied by CWRU to purchase one or more annuity contracts and/or mutual funds for me, as set forth on this form. I understand that both my pre-tax and after-tax contributions are part of my allowable maximum contribution through CWRU. I acknowledge that this Agreement is subject to the conditions on the reverse side of this form, and that contributions to other tax-deferred plans can affect my allowable maximum contribution through CWRU. I understand that this Agreement will continue in force unless changed in writing by me.

Employee Signature _____

Date _____

SRA Waiver: I elect to stop participation in my:

☐ Tax-Deferred 403(b) Supplemental Retirement Account

☐ Roth 403(b) After-Tax Supplemental Retirement Account

End date _____ Employee Signature _____ Date _____

Benefits Administration Use Only

Date Received: _____ By: _____

Effective Date _____ Entered by _____ Date _____

Date Audited: _____ By: _____

Salary Reduction Agreement

I acknowledge that this Agreement is subject to the following conditions:

- It remains in effect unless terminated by me upon 30 days' written notice, I die, or my CWRU employment terminates.
- The amount of reduction may be changed only once each quarter of the calendar year effective for compensation earned from and after the first day of the month following the month in which a revised salary reduction agreement is executed provided it is received by CWRU at least five business days before the end of the month of execution.
- The amount of salary reduction is limited under the Internal Revenue Code to the lesser of:
 - maximum contribution limit under Section 415;
 - maximum contribution limit under Section 402(g)

15-Year Special Election

You may be eligible to make an election to exceed the 403(b) contribution limit if you have at least 15 years of service at CWRU and have not maxed out your contributions in the previous 15 years. There are no restrictions on the number of times you may use the 15-year rule; however, a lifetime maximum limits your contribution under this rule to \$15,000. If you qualify for this election, you will need to provide the Maximum Exclusion Allowance calculation and supporting documents that show your eligibility (if you need assistance, contact your personal advisor). Eligibility for the 15-year special election is based both on years of service and prior contributions to your supplemental retirement account.

Age 50 Catch-up

You can make an election to exceed the 403(b) maximum contribution limit if you will be age 50 or older in the current calendar year.

Age 60-63 Catch-up

You can make an election to exceed the 403(b) maximum contribution limit if you will be age 60, 61, 62 or 63 in the current calendar year.

Secure Act 2.0 Retirement Catch-Up Contributions

Effective January 1, 2026, under the Secure Act 2.0, this federal requirement impacts employees who will be age 50 or older during the calendar year, and who had FICA wages from the University exceeding \$150,000 (indexed) in the prior calendar year. Individuals who meet these criteria will be required to make catch-up contributions on an after-tax Roth basis; no action is required. To avoid making Roth catch-up contributions, submit a Salary Reduction Agreement form to waive participation. Contributions up to the 402g limit may still be made as either pre-tax or Roth, based on your election.