



**RCAB 401(k) Retirement Savings Plan  
TRADITIONAL 401(k) OR ROTH 401(k) SALARY DEFERRAL FORM**

**Name:** \_\_\_\_\_ **Effective Date of Contribution:** \_\_\_\_\_

Information on the Plan's traditional 401(k) **pre-tax** employee contribution ("Salary Deferral"), and Roth 401(k) **after-tax** employee contribution ("Roth 401(k)") options has been made available to me, including through the Plan's website ([www.catholicbenefits.org/401k](http://www.catholicbenefits.org/401k) and [www.tiaa-cref.org/rcab](http://www.tiaa-cref.org/rcab)) and pursuant to my understanding of such information, I hereby make the following elections:

For each payroll period, I hereby elect to contribute to the Plan the amounts designated below, and I hereby authorize the **Employer** to deduct that amount or percentage from my eligible Compensation as defined by the Plan on a pre-tax or after-tax basis as follows:

- PRE-TAX SALARY DEFERRAL CONTRIBUTION:** A dollar amount per pay period [\$ \_\_\_\_\_] or a percentage of my eligible Compensation [ \_\_\_\_\_ %] deferred on a **pre-tax** basis.
- ROTH 401(K) CONTRIBUTION:** A dollar amount per pay period [\$ \_\_\_\_\_] or a percentage of my eligible Compensation [ \_\_\_\_\_ %] deferred on an **after-tax** basis.
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- CATCH-UP CONTRIBUTION:** *For Employees at least age 50 as of December 31 of the year in which the election is made) and who wish to defer compensation above the legal limit for non-catch up deferrals.* A dollar amount per pay period [\$ \_\_\_\_\_] or a percentage of my Eligible Compensation [ \_\_\_\_\_ %] deferred on a  **pre-tax** OR  a Roth **after-tax** basis.
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- WAIVE:** I have been informed of the option to make contributions to the RCAB 401(k) Plan, and I elect not to make contributions to the Plan at this time.

By my signature below, I acknowledge that I understand that:

1. I can change my election on the date or dates permitted under the Plan;
2. I can suspend or cancel my election effective 30 days after I give written notice to the payroll contact at my location;
3. It may be necessary for the Plan to reduce the percentage or dollar amount I have indicated above if the reduction is necessary for the Plan to comply with certain non-discrimination and/or maximum deduction tests required by the Internal Revenue Code;
4. My total Salary Deferral Contributions and my total Roth 401(k) Contributions cannot exceed 100% of my eligible Compensation, net of all tax withholdings and deductions, or if less, the Internal Revenue Code §402(g) and/or 414(v) limit(s) in effect for the Plan Year.
5. If a distribution of my Roth 401(k) Contributions Account is not in compliance with the requirements for a "qualified distribution," Federal income taxes will apply to the Trust investment return for such Account; and
6. My Roth 401(k) Contributions cannot be subsequently re-characterized as Salary Deferral Contributions.

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

PLEASE RETURN TO YOUR LOCATION'S PAYROLL CONTACT