

Supplemental Retirement Account Authorization Form

To enroll in a supplemental retirement account (SRA), please contact the vendor (TIAA, VALIC, etc.) to open an account. Once the account is established, please complete this form and return to Benefit Services at Campus Zip: 4332 / Email: benefits@uidaho.edu Fax: 208-885-3330

Employee Name:	Vandal Number:	Phone Number:
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<input type="checkbox"/> Add a New Account	<input type="checkbox"/> Increase Contribution <input type="checkbox"/> Decrease Contribution	<input type="checkbox"/> Terminate Contribution
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Effective Date: (or as soon thereafter)	New or Revised Total Dollar Amount of my Contribution: (per pay period)
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Retirement Vendor:	Account Type:		<i>Please Note: 457(b) changes for Nationwide/must be made by contacting them directly</i>
	<input type="checkbox"/> 403(b) <input type="checkbox"/> 457(b)	<input type="checkbox"/> Roth 403(b)	

Catch up limits are available if you are age 50 or older. Please ask the selected retirement vendor for applicable information.

Yes, I am using catch up provisions

No, catch up contributions are not applicable

It is understood that I assume the liability for any tax deficiency that may result from an improper application of the exclusion as defined in the Technical Amendments Act of 1958 or corresponding rulings for the State of Idaho.

It is also understood that I may be asked to provide the University of Idaho with a calculation computed by my SRA provider which supports my annual contribution limits.

Employee Signature: _____

Date: _____