

**Electrical Workers Local No. 292 Defined Contribution and 401(k) Plan
 401(k) Salary Deferral Enrollment & Change Agreement**

*Employees: Return Completed Form to Your Employer and the Plan Administrator AND Keep a Copy For Your Personal Records
 Employers: Return a Copy of This Election Form to the Fund Office*

Participant Name _____	Social Security No. _____
Address _____	Phone # _____
City, State, Zip _____	Date of Birth _____
Employer Name _____	<input type="checkbox"/> New Enrollment
Employment Date _____	<input type="checkbox"/> Increase/Decrease Contributions
	<input type="checkbox"/> Terminate Contributions

PLEASE NOTE: Participants may contribute up to the lesser of (i) 100% of compensation under the Plan, or (ii) the annual maximum permitted by law. Participants may also make catch-up contributions if they will be age 50 or older during a calendar year. Please contact the Plan Administrator, IBEW 292 Benefits, at the address or phone number shown above, to confirm current annual maximum amounts. The contribution limits (including the catch-up contribution limit) apply to the combined total of 401(k) salary deferrals and Roth 401(k) salary deferrals.

It is your responsibility to monitor your salary deferrals throughout the year (including deferrals made to any other retirement plan). If your contributions to this Plan exceed the IRS deferral limit for the calendar year, the excess amount and any earnings will be returned to you and will be taxable income for the year.

1. DEFERRAL ELECTION

A. Catch-Up Contribution

I will be 50 years of age or older during this calendar year and elect to make catch-up contributions.

B. 401(k) Pre-Tax Contribution

I elect to defer receipt of \$_____ per hour (in \$0.50 increments) from each of my paychecks and to have that amount contributed to the Plan beginning with the first pay period after my employer receives this completed and signed deferral agreement.

C. Roth 401(k) Contribution

I elect to have \$_____ per hour (in \$0.50 increments) **of the deferrals elected above** treated as after-tax Roth 401(k) contributions. I understand that this amount of my deferral contributions will be subject to income tax withholding.

If you have participated in any other plan during this year that permits employee contributions or salary deferrals, you must notify the Receiving Agency by email at recibew292@ibew292benefits.com. **Other than this Plan, I CERTIFY that I am not eligible for or have contributed to any other 401(k) or similar type of retirement plan that accepts employee contributions or salary deferrals, EXCEPT:** _____.

I understand that my elections will remain in effect until I terminate employment with my current employer, or revoke or change my election at any time by executing and returning a signed copy of a new salary deferral agreement to my employer and to the Plan Administrator, IBEW 292 Benefits, at the address shown above.

_____	_____
Date	Participant's Signature

2. TERMINATE 401(k) SALARY DEFERRAL

I elect to terminate the following salary deferral contributions to this Plan, beginning with the first pay period after my employer and the Plan Administrator receive this completed and signed deferral agreement. I understand that I may reinstate my salary deferral elections at any time by submitting a new salary deferral agreement to my employer and the Plan Administrator.

- 401(k) Pre-Tax
- Roth 401(k)

_____	_____
Date	Participant's Signature