

**UFCW LO. 1776 & PART. EMPLOYERS RETIREMENT AND SAVINGS PLAN**

**525079-01**

Use black or blue ink when completing this form. For questions regarding this form, visit the Web site at [empowermyretirement.com](http://empowermyretirement.com) or contact Service Provider at 1-800-338-4015.

**A Participant Information**

Account extension, if applicable, identifies funds transferred to a beneficiary due to participant's death, alternate payee due to divorce or a participant with multiple accounts.

Account Extension \_\_\_\_\_

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Social Security Number (Must provide all 9 digits)

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

M.I. \_\_\_\_\_

(The name provided MUST match the name on file with Service Provider.)

Division/Payroll Center \_\_\_\_\_

**B Payroll Election(s)**

**Paycheck Contribution Election (Payroll Deductions)**

Select One: ☐ Start ☐ Restart ☐ Change ☐ Stop

I elect to contribute to the Plan the following of my eligible compensation indicated below (per pay period):

☐ Before-Tax Contributions \$ \_\_\_\_\_ or \_\_\_\_\_ % (do not complete both) (up to \$23,000.00 or 1% - 20%)

☐ Roth Election Contributions \$ \_\_\_\_\_ or \_\_\_\_\_ % (do not complete both) (up to \$23,000.00 or 1% - 20%)

The total annual before-tax and Roth contributions cannot exceed \$23,000.00 of my eligible compensation in the 2024 tax year.

**Age 50 Catch-Up Election**

I elect to contribute to the Plan additional Age 50 Catch-Up amounts of my eligible compensation as indicated below (per pay period):

Payroll Effective Date (mm/dd/yyyy) \_\_\_\_ / \_\_\_\_ / \_\_\_\_

The total before-tax Age 50 Catch-Up amount cannot exceed \$7,500.00 of my eligible compensation in the 2024 tax year. I must be age 50 or older during this calendar year and I must be currently deferring the maximum amount allowable under the Internal Revenue Code and applicable regulations and/or my Plan. If I stop my deferrals and/or do not defer the maximum amount during this calendar year, the Age 50 Catch-Up amount I have elected to contribute will not be considered a Catch-Up deferral. The Catch-Up contributions will be allocated in the same manner as my regular contributions.

☐ I elect to cancel my Catch-Up contribution election.

**C Participant Consent (Please sign on the 'Participant Signature' line below.)**

My signature acknowledges that I have read, understand and agree to all pages of this form and affirms that all information that I have provided is true and correct. I also understand that:

- Until cancelled, superseded or I cease to be an eligible participant, all election(s) shall apply to all eligible compensation allowed by the Plan paid from the effective date specified unless a different effective date is required under the terms of the Plan and cancels all previous elections.
- I may change the amount of compensation contributed as allowed under the terms of the Plan.
- It is my responsibility to comply with any Internal Revenue Code deferral limits and that I may be responsible for any costs, including taxes and penalties that I may incur as a result of excess contributions.
- My Plan Administrator may take any action that may be necessary to ensure that my participation is in compliance with any applicable requirement of the Plan Document and the Internal Revenue Code.
- I authorize the payroll deduction as indicated on this form.

Any person who presents false or fraudulent information is subject to criminal and civil penalties.

**Participant Signature** \_\_\_\_\_

**Date (Required)** \_\_\_\_\_

A handwritten signature is required on this form. An electronic signature will not be accepted and will result in a significant delay.

D

Mailing Instructions

After all signatures have been obtained, this form can be

Uploaded Electronically:

Login to account at

**empowermyretirement.com**

Click on Upload Documents to submit

OR

Sent Regular Mail to:

Empower

PO Box 56025

Boston, MA 02205-6025

OR

Sent Express Mail to:

Empower

8515 E. Orchard Road

Greenwood Village, CO 80111

We will not accept hand delivered forms at Express Mail addresses.

The group variable annuity insurance products are issued through Empower Annuity Insurance Company, Hartford, CT and distributed through Empower Financial Services, Inc., (EFSI). Both are Empower companies and each organization is solely responsible for its financial condition and contractual obligations. Annuity contracts contain exclusions, limitations, reductions of benefits and terms for keeping them in force. The annuity or certain of its investment options or features may not be available in all states. Policy forms currently available include DC- 08-TGWB-2011, ALC-408-TGWB-2011-NR, ALC-408-TGWB-2011-ROTH, IND-IFX-TGWB-2013-NR, IND-IFX-TGWB-2013-ROTH or state variation thereof.

You could lose money by investing in money market investments. Although they seek to preserve the value of your investment at \$1 or \$10.00 per share (see the prospectus), there is no guarantee they will. An investment in a money market investment is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. The money market investment's sponsor has no legal obligation to provide financial support to the portfolio, and you should not expect that the sponsor will provide financial support to the portfolio at any time. The yield quotation more closely reflects the current earnings of the portfolio than the total return quotation.