

Agreement for Salary Reduction Under Section 403(b)

BY THIS AGREEMENT, made between the undersigned Drake employee ("Employee") and Drake University ("Institution"), the parties mutually agree as follows:

The Employee's salary will be reduced by the amount indicated by the Employee below. At the same time, the Institution will contribute a corresponding amount to the Employee's annuity contracts, which the Employee will allocate among the funding vehicles approved by the Institution.

This Agreement will replace any prior election on file. This Agreement shall be legally binding and irrevocable for both the Institution and the Employee while employment continues. However, either party may terminate or otherwise modify this Agreement as of the end of any month (or pay period, if applicable) by giving at least thirty (30) days written notice so that this Agreement will not apply to salary subsequently paid.

Drake University Mandatory Tax-Deferred Retirement Plan: If you are an eligible employee, you must, as a condition of employment begin participation in this Plan on the first of the month after you complete one year of service at the University or at any other accredited college or university, without a break in service. The amount of salary reduction under this plan shall be either 3% or 5% as indicated below. Drake University will also contribute 7% of base wages.

Non-exempt (hourly) employees must elect 3% or 5%Exempt (salaried) employees must elect 5%Effective Date: _____ 3%or _____ 5%

Drake University <u>Voluntary</u> **Retirement Plan:** In addition to the mandatory amount described above, if I am eligible, I desire to make an additional voluntary contribution and, therefore, request to further reduce my eligible compensation by the following amounts, effective on this date: ______ (the effective date must be no earlier than the first of the month following the date this agreement was executed).

Voluntary Pre-tax Deferral: The below amounts/percentages will be taken out each year unless/until a new Salary Reduction Agreement is completed. (check one)

____ \$_____ per year

____% of gross annual salary (note: this % will be taken out each calendar year unless a new form is completed)

Voluntary Post-tax Roth Deferral: The below amounts/percentages will be taken out each year unless/until a new Salary Reduction Agreement is completed. (check one)

____ \$_____ per year

____% of gross annual salary (note: this % will be taken out each calendar year unless a new form is completed)

By signing below, I understand and agree that deferrals under any other retirement plan I am participating in aggregate with this plan will not exceed the applicable limits in the Internal Revenue Code.

Employee Name: _____

ID Number: _____

Signature: _____

Today's Date: _____