

## 2024 Supplemental Retirement Annuity Reduction Agreement

Employee Printed Name:	Banner ID#:
Effective Date: specify the date in which you would like you  ASAP (will be effective the start date of the pay period  Please make this contribution effective on	after receipt of this form by HR)
<b>Non-Statutory Sector</b> – salary reductions shall be remitted to 2024 Maximum elective contributions: Under 50 years old: \$23	
<pre>\$ per pay-period Pre-tax \$ per pay-period Roth (post-tax) \$ Total per-pay elected (Pre-tax + Roth)</pre>	(Deduction code: 253) (Deduction code: 265)
☐ I am age 50 (or will reach age 50) within the 2024 cale up contribution(s) as described below (in red). Please is on the lines above.	•
During the 2024 calendar year, the total maximum elective conretirement plan is \$23,000 (\$30,500 if you are age 50 or will re sum of your elective contributions plus any University contribution the lesser of \$69,000 or 100% of your annual wages.	ach age 50 in the calendar year), and the
I authorize Alfred University to reduce my salary by the amount total contribution (including employer contributions) to my retimy statutory limit under IRC Sections 402(g), 415(c), and 414(to remit the amount of my salary reduction as I have designated will remain in effect until I choose to discontinue the Voluntary	rement account that is equal to or less than (v). I understand that the University agrees I on this form. I understand this election
Employee Signature:	Date:
For HR Use Only: Payroll ID: Deduction begin date:	_
Input in PDADEDN:	Date:
Verified by:	Date:

Once verified in Banner, input into appropriate Payroll PAF folder.