



**Iowa Retirement Investors' Club
(RIC) 457/401a Plans**

Look forward to retirement!

**City of Grimes
RIC Account Form**

| | | | | |
|--|--|--|--|--|
| Personal Information | Name _____ Social Security # _____ <small>Last First MI Existing accounts need last 4 digits only</small> Address _____ City _____ State _____ Zip _____ Birth Date _____ Phone (work) _____ Phone (home) _____ Phone (cell) _____ | | | |
| Account Status | <input type="checkbox"/> New account (Must open 457/401 accounts with RIC provider) <input type="checkbox"/> Change to existing account (This form replaces last completed deduction request) | | | |
| 457 Payroll Deduction Election | The combined amount of all 457 pretax and Roth contributions in a tax year is limited to the IRS annually declared maximum contribution limits (see https://das.iowa.gov/RIC/PSE/contributions). | | | |
| | Provider | Corebridge Financial <small>(Formerly AIG)</small> | Empower | Horace Mann |
| | Per paycheck amount & taxation | Pretax \$ _____ Roth \$ _____ <input type="checkbox"/> Stop deductions | Pretax \$ _____ Roth \$ _____ <input type="checkbox"/> Stop deductions | Pretax \$ _____ Roth \$ _____ <input type="checkbox"/> Stop deductions |
| Effective date Deduction requests must be submitted by the end of each quarter to be effective for the following quarter. | | | | |
| Provider Transfers | For transfers between providers, complete and submit the Transfers Between RIC Providers Form . | | | |
| Participant Signature | I authorize my employer to process these requests. I have access and agree to the terms and conditions of the Iowa Retirement Investors' Club (RIC) as disclosed in the Plan Document. I have established 457 and 401a accounts with a RIC provider. I understand that the total of all 457 contributions made in the calendar year must not exceed the federal limits as required by the Internal Revenue Code section 457. I understand that withdrawals may only be made upon termination of employment or qualification for an in-service distribution. X _____ <small>Participant Signature Date</small> | | | |
| Form Submission | RIC Account Form: Forward to your payroll office (shown below) Provider account forms: Forward to the provider | | | |

Agent Use Only (Not required, but preferred) I am authorized to open RIC accounts for this employee. I verify 457/401a accounts have been established.

Print Agent Name _____ Agent Signature _____ Agent Phone Number _____ Date _____



Visit the RIC website at <https://das.iowa.gov/RIC/PSE> for full program details; select *Your Plan Details* from the left menu to access the *RIC At-A-Glance* and plan options specific to your employer's 457/401a plans.

| | |
|--|---|
| Payroll Office Date Received: _____ Paycheck Effective Date: _____ Name: _____ | RIC Use Only Date Pended: _____ Entered: _____ Checked: _____ |
|--|---|

City of Grimes

101 NE Harvey St ▪ Grimes, IA 50111 ▪ (515) 986-3036 ▪ Fax (515) 986-3846
 Iowa Retirement Investors' Club (RIC) ▪ 866-460-4692 (toll free) ▪ <https://das.iowa.gov/RIC>