



## Retirement Investors' Club (RIC)

457/401a Plans

## Calhoun County RIC Account Form

<b>Personal Information</b>	Name _____				Social Security # _____
	Last _____	First _____	MI _____	Existing accounts need last 4 digits only	
	Address _____		City _____	State _____	Zip _____
Birth Date _____		Phone (work) _____	Phone (home) _____	Phone (cell) _____	
<b>Account Status</b>	<input type="checkbox"/> <b>New account</b> (Must open 457/401 accounts with RIC provider) <input type="checkbox"/> <b>Change to existing account</b> (This form replaces last completed deduction request)				
<b>457 Payroll Deduction Election</b>	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 <a href="https://das.iowa.gov/RIC/PSE/contributions">https://das.iowa.gov/RIC/PSE/contributions</a> ).				
	Provider	Corebridge Financial		Voya	
	Per paycheck amount & taxation	Pretax \$ _____ Roth \$ _____ <input type="checkbox"/> Stop deductions		Pretax \$ _____ Roth \$ _____ <input type="checkbox"/> Stop deductions	
	Frequency	2 X /month (24 annually)			
	<b>Effective date:</b> Changes are effective for the next available paycheck unless a future effective date is indicated. <input type="checkbox"/> Begin as of _____ Future effective date (if desired) <input type="checkbox"/> 1 check only _____ <input type="checkbox"/> Final check _____				
<b>Participant Signature</b>	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 <a href="#">Plan Document</a> . 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 <a href="#">in-service distribution</a> .				
<b>Form Submission</b>	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
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Visit the RIC website at <https://das.iowa.gov/RIC/PSE> for full program details; select *Employer Plan Details* to access the *RIC At-A-Glance* and plan options specific to your employer's 457/401a plans.

<b>Payroll Office</b>	<b>RIC Use Only</b>
Date Received: _____	Date Pended: _____
Paycheck Effective Date: _____	Entered: _____
Name: _____	Checked: _____

### Calhoun County

416 4<sup>th</sup> St Ste 1 ■ Rockwell City, IA 50579 ■ (712) 297-8083 ■ Fax (712) 297-5309  
Iowa Retirement Investors' Club (RIC) ■ 866-460-4692 (toll free) ■ <https://das.iowa.gov/RIC>