

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

Look forward to retirement!

**Southeast Iowa Regional Planning Commission**  
**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)				
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> ).					
<b>457 Payroll Deduction Election</b>	<b>Provider</b>	Voya			
	<b>Per paycheck amount &amp; taxation</b>	Pretax \$ _____ Roth \$ _____ <input type="checkbox"/> Stop deductions			
	<b>Frequency</b>	<input type="checkbox"/> 2 X /month (24 annually) <input type="checkbox"/> All checks (26 annually) <input type="checkbox"/> Monthly – choose <input type="radio"/> 1 <sup>st</sup> check or <input type="radio"/> 2 <sup>nd</sup> check			
	<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 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.				
	<b>X</b> Participant Signature _____ Date _____				
<b>Form Submission</b>	<b>RIC Account Form:</b> Forward to your payroll office (shown below)        <b>Provider account forms:</b> 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 *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.

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

**Southeast Iowa Regional Planning Commission****211 N Gear Ave, Suite 100 ■ W Burlington, IA 52655 ■ (319) 753-4322 ■ Fax (319) 754-4763**Iowa Retirement Investors' Club (RIC) ■ 866-460-4692 (toll free) ■ <https://das.iowa.gov/RIC>