

Knox County Retirement & Pension Board

City-County Building, Room 371
 400 Main Street
 Knoxville, Tennessee 37902-2401
 Phone: (865) 215-2323 Fax: (865) 215-2421



Asset Accumulation Program Payroll Contribution

Change Form

Employee #: _____

Part 1 – Employee Data

Employee Full Name: <input type="checkbox"/> Male <input type="checkbox"/> Female		Social Security No.:	Division: <input type="checkbox"/> County <input type="checkbox"/> Schools Dept.: _____
Street:		Date of Birth:	Date of Hire:
City:	State:	Zip:	Daytime Phone:
		Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single	

Part 2 – Contributions Information

Mandatory Pre-Tax Contribution: 6% 100% match by Employer											
Additional Employee Voluntary Pre-Tax Contribution _____% (Please specify any whole percentage contribution)	Additional Employer Pre-Tax Matching Contribution										
<i>Catch-Up Contributions: If you are age 50 or older in the calendar year, you are eligible to make an additional catch-up contribution to the Plan. Please contact the Retirement Office for detailed information.</i>	<table border="1"> <thead> <tr> <th>Years of Service</th> <th>Matching Contribution</th> </tr> </thead> <tbody> <tr> <td>Less than 5 years</td> <td>0%</td> </tr> <tr> <td>5 to 9 years</td> <td>Up to - 2%</td> </tr> <tr> <td>10 to 14 years</td> <td>Up to - 4%</td> </tr> <tr> <td>15 or more years</td> <td>Up to - 6%</td> </tr> </tbody> </table>	Years of Service	Matching Contribution	Less than 5 years	0%	5 to 9 years	Up to - 2%	10 to 14 years	Up to - 4%	15 or more years	Up to - 6%
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	Less than 5 years	0%									
	5 to 9 years	Up to - 2%									
	10 to 14 years	Up to - 4%									
15 or more years	Up to - 6%										

Part 3 – Investment Election

- If you would like to change your investment election, you may do so using the Direct Line Phone System (1-800-828-4224) or the Direct Access Website (www.usicq.com).
- You will need a PIN for telephone access and a username and password for internet access. If you have lost your PIN or don't have one, please contact USI at (865) 523-8353.

Part 4 – Authorization and Employee's Signature

- I hereby authorize the Knox County Retirement & Pension Board to make the change indicated above and for the Employer to withhold from my pay in accordance with this Change Form. Deductions will begin as soon as administratively possible in the next calendar month after the completed Change Form is filed with the Retirement Office.
- I understand the voluntary contributions are subject to FICA and Medicare taxes and Contributions are subject to applicable IRS limits.
- I hereby accept responsibility to review my pay stubs and net pay to assure that my contribution election as set out in this Change Form is properly processed and to promptly notify the Retirement Office in the event of any discrepancy. This authorization will continue in effect until stopped or changed by me.
- Information about the Asset Accumulation Program and your opportunity to make additional, voluntary contributions is included in the Asset Accumulation Program brochure, available at the Retirement Office. Please review that brochure when completing this change form.

Signature	Date
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Original/White – Retirement Office

Yellow Copy – Schools

Pink Employee - Employee