

Submit this completed form to your employer to make catch-up contributions. Please note that if you return the form to MissionSquare, it will be destroyed and it will not be processed or forwarded to your employer.

1 PERSONAL INFORMATION

EMPLOYER NAME:	PLAN NUMBER:
LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER <small>(FOR TAX REPORTING PURPOSES):</small>	DATE OF BIRTH: <small>MM/DD/YYYY</small>
FULL NAME: <small>LAST, FIRST, MI</small>	

2 CONTRIBUTION AMOUNT

I authorize my employer to contribute the amount specified below from my pay each pay period. Your contributions will be maintained based upon the information entered in this form. Contribution elections and changes shall be made effective in accordance with the terms of your employer's plan.

Pre-tax contributions of _____% **OR** \$_____ from my pay each period.
 Roth contributions of _____% **OR** \$_____ from my pay each period.



Scan the QR code for information on current year IRS contribution limits.

3 CATCH-UP CONTRIBUTION AMOUNT

Age 50 Catch-Up Contribution

I authorize my employer to contribute the amount specified below from my pay each pay period, to be contributed to my 457(b) Dererred Compensation Plan account with MissionSquare. (Specify a percentage for pre-tax and/or Roth contributions.)

Pre-tax contributions of _____% **OR** \$_____ from my pay each period.
 Roth contributions of _____% **OR** \$_____ from my pay each period.

Age 60-63 "Super" Catch-Up Contribution

I authorize my employer to contribute the amount specified below from my pay each pay period, to be contributed to my 457(b) Dererred Compensation Plan account with MissionSquare. (Specify a percentage for pre-tax and/or Roth contributions.)

Pre-tax contributions of _____% **OR** \$_____ from my pay each period.
 Roth contributions of _____% **OR** \$_____ from my pay each period.

Important Notice: If you plan to make pre-tax contributions

If your prior year Social Security wages exceed the threshold (\$145,000 in 2025), your age 50 or age 60 to 63 catch-up contributions must be Roth contributions. If you are currently making pre-tax catch-up contributions they will stop when you reach the normal limit, you will need to make an election to make Roth contributions.

4 SIGNATURE

By submitting this form, you understand you are authorizing your plan sponsor to enroll you and/or update your contributions in your plan. Contribution elections and changes shall be made effective in accordance with the terms of your employer's plan. **Please note the elections you make above will be summed to one pre-tax election and one Roth election respectively.**

Employee Signature: _____ Date: MM/DD/YYYY _____

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Please keep a copy of the completed form for your records.