



**Human Resources & Risk Management**

300 North Washington Street  
Pennsylvania Hall  
Campus Box 2443  
Gettysburg, Pennsylvania 17325-1400

**TIAA  
Salary Reduction Agreement**

Name: \_\_\_\_\_

Employee ID : \_\_\_\_\_

(i) The Employee identified above hereby irrevocably agrees to reduce his or her compensation from the Employer as indicated below, starting with **pay day date** \_\_\_\_\_, for the purposes of having such reduced compensation amounts contributed by Gettysburg College as salary reduction contributions to the following 403(b) account established on behalf of the Employee:

TIAA Tax Deferred Annuity (GSRA/SRA)

Biweekly Total \$ \_\_\_\_\_ or \_\_\_\_\_ %

TIAA Tax Deferred Annuity (RA)

**(Use for already established accounts with funds going into an RA)**

Biweekly Total \$ \_\_\_\_\_ or \_\_\_\_\_ %

(ii) This Salary Reduction Agreement shall be automatically renewed as of January 1 of each calendar year hereafter, unless prior thereto the Employee and Employer agree in writing to amend this Agreement.

(iii) This Salary Reduction Agreement may be terminated at any time by either the Employee or the Employer with respect to compensation not yet earned by the Employee.

(iv) The employee shall be solely responsible for determining that any salary reduction contributions pursuant to this Agreement do not exceed the exclusion allowance limitations of Section 403(b)(2) of the Internal Revenue Code, the annual additions limitations of Section 415(c) of the Internal Revenue Code, or the limits on elective deferrals of Section 402(g) of the Internal Revenue Code.

**ACCEPTANCE:**

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**HR USE ONLY**

Employer Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_