

SALARY REDUCTION ELECTION

< _____ **Enter plan name here** >

I, _____, hereby acknowledge and understand that as a Participant in < _____ Enter plan name here >, I may reduce my salary up to a maximum amount permitted by law. I further understand that any amounts I may defer hereunder shall be deducted from my paycheck by my employer and deposited into my accounts under the Plan by the Plan's Trustees.

In accordance with my rights as a Participant and provisions of the Plan, I hereby elect to reduce my pay by _____% (or) \$_____ each pay period.

(if Roth 401(k) allowed)

Further,

I designate that _____% of my Salary reduction contribution as a Roth after-tax deferral.

I designate that \$_____ of my Salary reduction contribution as a Roth after-tax deferral.

Roth deferrals will be matched at the same rate as your Pre-tax deferrals were matched.

This election authorizes my Employer to withhold this amount from my paycheck. This election shall remain in effect until I revoke this election in writing or change my election percentage or amount in accordance with the rules of the Plan. Any questions regarding this election should be directed to the Plan Administrator.

Salary Deferral elections may be made effective _____ (per Plan Provisions) per Plan Year on the _____ day of the year and _____ of the first day of the Plan Year.

I understand that this election will be implemented as soon as administratively feasible but no later than 30 days from its receipt by the Employer.

I understand that the Plan Administrator may limit my salary reduction contributions during the year if doing so will enable the Plan to meet the various Internal Revenue Code and Regulation provisions affecting the Plan.

Dated this _____ day of _____, _____.

Participant's Signature

Social Security Number