



403(b) SALARY REDUCTION AGREEMENT (SRA) for Milwaukee Public Schools Employees

– DO NOT RETURN THIS FORM TO MPS –
Submit the completed form to the MPS third party administrator by email (MPSservicebox@voya.com) or fax (1-612-492-0883).

SECTION 1 **PAYROLL EFFECTIVE DATE** *If your election is received after the payroll processing deadline, it will be effective on the next paycheck. The SRA must be received two weeks prior to the payroll election below.*

Effective Payroll Date (required) (MM/DD/YYYY)	
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SECTION 2 **REASON FOR COMPLETING FORM** *Check one and complete other sections as indicated.*

- Initial 403(b) Salary Reduction Agreement** – *You never contributed to the 403(b) Plan and would like to start contributing. Complete all sections.*
- Change Contribution Amount** – *You are currently contributing to the 403(b) Plan and would like to change the amount of your contribution. Complete all sections.*
- Change Investment Provider Allocation and/or Money Source** – *This will supersede any prior agreement. You are currently contributing to the 403(b) Plan and would like to continue contributing the same amount but with a different vendor and/or Money Source (i.e., 403(b) pre-tax or Roth 403(b) after-tax). Complete all applicable sections.*
- Terminate Agreement** – *You want to stop contributing to the 403(b) Plan. Complete only sections 1, 2, 3, and 7.*
- Restart Contributions** – *You were contributing to the 403(b) Plan, but are not currently contributing and would like to start contributing again. Complete all sections.*
- Suspend Contributions** – *You want to stop contributing to the 403(b) Plan, but you want to contribute in the future. Complete only sections 1, 2, 3, and 7)*
- Start Age 50 Plus Catch-Up Contribution** – *You are age 50 plus and want to make additional contributions. Please verify the additional contribution amounts with your investment provider. Note: Starting in 2026, if a participant's 2025 FICA wages exceeded \$150,000, all catch-up contributions (for age 50 and older) must be made as Roth (after-tax) contributions. Complete all sections.*

SECTION 3 **EMPLOYEE INFORMATION** *Complete all requested information.*

Name (First/M/Last)	Social Security No. (XXX-XX-XXXX)
Address	Date of Birth (MM/DD/YYYY)
City/State/ZIP	Telephone (XXX-XXX-XXXX)
Email	

SECTION 4 **SALARY REDUCTION ELECTION** *Check one, only if applicable.*

<input type="checkbox"/> I elect to reduce my salary by the following amount for 20 pay periods <i>(for 10-Month and 11-Month employees only):</i>	\$
<input type="checkbox"/> I elect to reduce my salary by the following amount for 24 pay periods <i>(for 12-Month employees only):</i>	\$

– Complete Sections 4–7 and see important note on the next page. –



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SECTION 5 MONEY SOURCE *Check one, only if applicable.*

403(b) Pre-Tax OR Roth 403(b) After-Tax

SECTION 6 INVESTMENT PROVIDER ALLOCATION ELECTION *Complete, only if applicable. The employee is responsible for establishing an account with the Investment Provider before any amounts are contributed. The allocation must be in whole percent and the total allocation must equal 100%. Please allocate 403(b) contributions as follows:*

INVESTMENT PROVIDER	PLAN NUMBER	ACCOUNT NUMBER	ALLOCATION PERCENTAGE	
			PRE-TAX	AFTER-TAX ROTH
Voya 403(b)(1) Variable Annuity Product	VG0196			
Voya 403(b)(7) Mutual Fund Product	666278			
MetLife Expert Selection (Mutual Funds)	1013891-02			
MetLife Financial Freedom Select (Variable Annuity)	0836786			
TIAA	403424			
WEA Member Benefits	800661			
			MUST EQUAL 100%	

SECTION 7 EMPLOYEE AUTHORIZATION *In witness whereof, this Agreement has been executed by and on behalf of the parties in accordance with all terms and conditions contained on this document.*

Signature of employee (required)		Date	
Signature of investment provider's representative/name of company		Date	

IMPORTANT NOTE

This Agreement is intended to meet the requirements of, and qualify under, Section 403(b) of the Internal Revenue Code of 1986, as amended, and of the plan adopted by Employer. The Employer and Employee agree that the employment agreement between Employer and Employee is being initiated or amended as stated on the front page. This amendment is incorporated and made a part of the agreement as of the effective date indicated on the front page. The terms of this Agreement are as follows:

- 1 The Agreement is a legal and binding contract and is irrevocable with respect to amount earned while it is in effect, and applies only to amounts earned while it is in effect;
- 2 It shall automatically apply to the employment agreement between Employer and Employee of each succeeding year unless amended or terminated by a written notice to one of Employer approved vendors;
- 3 It is suspended/terminable at any time for amounts not earned;
- 4 A termination request remains in effect unless or until a new Agreement is submitted;
- 5 It replaces any previous Agreement and therefore includes all applicable contribution choices;
- 6 Employee irrevocably waives and releases all present and future rights to receive payment of said amounts earned from Employer while this agreement is in effect in exchange for the payment of said amounts to the Employee's account with the Investment Provider or Providers listed above.

Combined contributions in the Pre-Tax 403(b) and the Roth 403(b) After-Tax may not exceed the limits of IRC 401(a)(30), 402(g)(1), 403(b)(1)(E), 415(c) and any other applicable IRS provisions.