



**UDM SALARY REDUCTION FORM**  
**DEFINED CONTRIBUTION RETIREMENT PLAN (RA)**  
 and  
**SUPPLEMENTAL TAX DEFERRED ANNUITY PLAN (GSRA)**  
**ON GOING DEDUCTION ELECTION – IRS MAXIMUM – PERCENTAGE ONLY**

Employee Name: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Banner T#: \_\_\_\_\_

**\*\*UDM DEFINED CONTRIBUTION RETIREMENT PLAN (RA) 104559**

Beginning on \_\_\_\_\_, for the purchase of retirement benefits in accordance with the UDM retirement plan. The amount authorized to be deducted from my paycheck is: **0%  YES** OR **3%  YES** and subject to the University contribution, if applicable.

*\*\*Maximum contribution is 3% of base salary or as defined in the University's plan document to receive University's contribution.*

**2010 IRS Contribution limit is \$16,500.** If you would like to contribute more than the 3% selected above, please complete this section and *you MUST also complete a TIAA-CREF Supplemental plan enrollment.*

**UDM SUPPLEMENTAL TAX DEFERRED ANNUITY PLAN (GSRA) 104560**

Beginning on \_\_\_\_\_, for the voluntary purchase of retirement benefits in accordance with the UDM supplemental retirement plan. The amount to be deducted from my paycheck will be: \_\_\_\_\_ % and is NOT subject to the University contribution. **If eligible, this percentage also includes amounts for:**

**Age 50 and Older Catch-up  YES**

*(Up to \$5,500 additional elective deferral, contribution limit as set by IRS 2010)*

**15 Years or More Service  YES**

*(Up to \$3,000 additional elective deferral, contribution limit as set by IRS 2010).* PARTICIPATION REQUIRES A TIAA -CREF MAXIMUM CONTRIBUTION CALCULATION. PLEASE CALL 800-842-2776 TO OBTAIN APPROVAL AND RETURN TO HUMAN RESOURCES.

**If you need help in determining what percentage you will need to contribute, please contact TIAA-CREF at 1-800-842-2776.**

**Explanation of Salary Reduction Authorization**

Effective, with respect to the amount earned on the beginning of the next available payperiod indicated above, the employee's base annual salary will be reduced by the amount indicated above, and at the same time the University's contribution to the employee's annuity contract(s) will be in accordance with the retirement plan and allocated as designated by the employee.

This authorization shall be legally binding and irrevocable as to each of the parties hereto while employment continues, provided however, that either party may terminate this authorization as of the end of any month, so that it will not apply to salary subsequently earned, by giving at least thirty (30) days written notice of the date of termination. The amount of salary reduction will produce a total contribution to the employee's annuity contract(s) that is equal to or less than the employee's statutory exclusion allowance under section 403(b) of the Internal Revenue Code, as affected by the Tax Reform Act of 1986.

Employee's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please fax this form to: Human Resources and Payroll Department at (313) 993-1015.**

Human Resources and Payroll Department  
 University of Detroit Mercy  
 4001 W McNichols  
 Detroit, MI 48221