




# Executive Compensation 457(b) Plan

## SAMPLE DECLARATION OF NORMAL RETIREMENT AGE FOR CATCH-UP CONTRIBUTIONS FORM

**This sample Declaration of Normal Retirement Age for Catch-up Contributions form has been prepared to assist with the administration of your co-op's deferred compensation plan.**

-  **IMPORTANT:** The information set forth in this sample document does not constitute legal advice. You should review this document with your co-op's legal counsel prior to use.
-  The co-op should retain the original, signed copy of the beneficiary election form(s) in the co-op's records, as the U.S. Department of Labor may request copies.
-  If you have any questions, please contact the Homestead Advisers Deferred Compensation team at [deferredcomp@homesteadadvisers.com](mailto:deferredcomp@homesteadadvisers.com).

*IMPORTANT: Homestead Advisers offers nonqualified deferred compensation plans as an additional service to members for their employees and directors and provides certain administrative support services; however, Homestead Advisers does not sponsor or act as the plan administrator of these plans, assume liability for their operation, or provide legal or tax advice in conjunction with the plans. Employers and participants are responsible for any tax or legal consequences associated with their adoption, operation or participation in nonqualified deferred compensation plans.*

# SAMPLE: Executive Compensation 457(b) Plan

## Declaration of Normal Retirement Age for Catch-up Contributions

|  |  |         |                        |
|--|--|---------|------------------------|
| Section 1:<br>Participant<br>Information | Employer's Name:   |         |                        |
|  | <b>Full Name of Participant:</b>   |         |                        |
|  | (Last)   | (First) | (MI)                   |
|  | Social Security Number:  |         |                        |
|  | Date of Birth:   |         | Plan Eligibility Date: |
|  | Daytime Phone Number:  |         |                        |
|  | <b>Home Address:</b>   |         |                        |
|  | (Street)   |         |                        |
|  | (City)   | (State) | (ZIP code)             |
| Section 2:<br>Agreement<br>Information   | <p>I hereby designate age _____, which I will attain in the year _____, as my normal retirement age for the purpose of using the special catch-up contribution provision. I understand that:</p> <ul style="list-style-type: none"> <li>• This age determines the three-year period during which I am eligible to begin making special catch-up contributions; this three-year period does not include the year of retirement.</li> <li>• At the designated age, I must be eligible to receive unreduced benefits under my employer's pension.</li> <li>• This election is irrevocable after I begin using the special catch-up provision.</li> <li>• I will not attain age 70½ during the catch-up period.</li> </ul> |         |                        |
| Section 3:<br>Signatures                 | (Employee Signature)   |         | (Date)                 |
|  | (Employer Signature)   |         | (Date)                 |