

SALARY REDUCTION AGREEMENT

Return to your employer when completed.

EXECUTION CLAUSE

PARTICIPANT INFORMATION

Name: _____ SS#: _____ Account #: _____

Employer Name: _____ City: _____ State: _____

Have you made contributions to another 401(k) or 403(b) account this year? Yes No If so, how much? _____

PARTICIPANT ELECTION

I, undersigned participant, hereby elect to (participant can choose one or both of deferral options):

Pre-tax contributions

Defer from my salary on a pre-tax basis:

- 3% of compensation
- 5% of compensation
- _____ (percentage or dollar amount) per _____ (week, paycheck, month)

Roth contributions (after-tax)

Defer from my salary as a Roth contribution:

- 3% of compensation
- 5% of compensation
- _____ (percentage or dollar amount) per _____ (week, paycheck, month)

COMMENCEMENT DATE

Date: _____ (The Commencement Date must be prospective.)

PARTICIPANT SIGNATURE

Participant and Employer hereby mutually and irrevocably agree that Employer shall reduce and withhold from the Participant's cash remuneration earned after the Salary Reduction Commencement Date and prior to the Salary Reduction Termination Date the Salary Reduction Amount designated above. The Employer shall contribute the amount so withheld to the Free Will Baptist Pension Plan. This Salary Reduction Agreement may be terminated at any time at the option of the participant. Termination of this Salary Reduction Agreement shall be accomplished by the Participant's signing and delivering to the Employer, the Termination Clause of this Salary Reduction Agreement or separation from service from this Employer. The Salary Reduction Termination Date may not precede the date on which the Participant executes the Termination Clause.

Participant Signature: _____ Date: _____

EMPLOYER SIGNATURE

Employer Signature: _____ Date: _____

BOARD OF RETIREMENT REPRESENTATIVE SIGNATURE

The Trustees of the Free Will Baptist Pension Plan hereby agree to accept the Salary Reduction contributions attributable to the Participant pursuant to the terms of this Salary Reduction Agreement and of the Plan.

Board of Retirement Signature: _____ Date: _____

TERMINATION CLAUSE

Participant hereby terminates the above Salary Reduction Agreement effective as of the Salary Reduction Termination Date stated below.

Participant Signature: _____ Termination Date: _____



FREE WILL BAPTIST BOARD OF RETIREMENT
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