

Check the appropriate transaction below.

- NEW PARTICIPATION     
  RESTART PAYROLL DEDUCTION     
  INCREASE PAYROLL DEDUCTION     
  DECREASE PAYROLL DEDUCTION     
  STOP PAYROLL DEDUCTION

**PARTICIPANT INFORMATION**

Name \_\_\_\_\_  
 (Last) (First) (Middle Initial)

Address \_\_\_\_\_  
 (Street) (City) (State) (ZIP Code)

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

**DEFERRAL ELECTION**

**Deferral Amount** \$ \_\_\_\_\_ or \_\_\_\_\_% *Minimum \$10.00 or 1% per pay period.*  
 If applicable, include amount of catch-up and complete Catch-up Contribution section below.

**Roth Deferral Amount** \$ \_\_\_\_\_ or \_\_\_\_\_% *Minimum \$10.00 or 1% per pay period.*

**Over 50 Catchup Deferral Amount** \$ \_\_\_\_\_ or \_\_\_\_\_% *Minimum \$10.00 or 1% per pay period.*

**Over 50 Catchup Roth Deferral Amount** \$ \_\_\_\_\_ or \_\_\_\_\_% *Minimum \$10.00 or 1% per pay period.*

**Participant's Final Deferral Amount** \$ \_\_\_\_\_ or \_\_\_\_\_% *Minimum \$10.00 or 1% per pay period.*

**Special 3 year Catchup Deferral Amount** \$ \_\_\_\_\_

**Restorative Deferral Amount** \$ \_\_\_\_\_ per pay period Plan Year to which this applies \_\_\_\_\_  
 (for Reemployed Military Personnel only)  
 For information, contact your Voya Financial® representative.

**Total Deferral Amount** \$ \_\_\_\_\_ or \_\_\_\_\_% per pay period  
 Total of all deferral amounts per pay period. Specified dollar amount required if electing catch-up, accumulated pay and/or restorative deferral options.

**Effective Date:** This agreement will be effective the first available pay date following receipt or the pay date indicated here. \_\_\_\_\_

**CATCH-UP CONTRIBUTION**

Check below, if you wish to make catch-up contributions as permitted under the Plan. Only one option may be selected during the same year.

**SPECIAL SECTION 457(b) CATCH-UP PROVISION** – This option is available only during the three consecutive years prior to, but not including, the year the employee attains Normal Retirement Age under the Plan. A 457(b) Plan Catch-up Election form is required for this option. For this form and further information, contact your local Voya representative. **Calendar year to begin** \_\_\_\_\_ **Calendar year to end** \_\_\_\_\_

**AGE 50+ CATCH-UP PROVISION** – This option is available to employees age 50 and over by the end of the year. **Date of birth** \_\_\_\_\_

**The participant cannot use both the special section 457(b) catch-up provision and the age 50+ catch-up provision during the same year. The participant must choose the option most beneficial to him or her.**

**ACCUMULATED PAY DEFERRAL**

Check below, if you wish to defer accumulated sick, vacation, or back pay or any other similar forms of accumulated pay which are payable in a lump sum such as premium time earned as permitted under the Plan.

**DEFER ACCUMULATED PAY OPTION** – This option is available only if this form is completed preceding your severance-from-employment, unless such accumulated compensation is payable to you within 2 ½ months from the date you end employment, in which case, this form must be completed no later than the date when such compensation would have been payable to you. This deferral election is subject to the maximum deferral amounts provided under the Plan and Code.

**EMPLOYEE AGREEMENT TO PARTICIPATE IN JOHNSON COUNTY 457 DEFERRED COMPENSATION PLAN**

Johnson County has established an Internal Revenue Code Section 457(b) Deferred Compensation Plan (Plan) for the benefit of its employees. The Plan provides that eligible employees may elect to join and become participants in the Plan (subject to the limitations established in the Plan) upon executing and filing a Participation Agreement with the County.

The employee acknowledges the following:

- I elect to participate in the Plan and agree to defer compensation to the Plan in accordance with the Plan and Internal Revenue Code (Code).
- I agree that all rights to the deferred compensation shall be governed by the terms and conditions of the Plan and Code.
- I agree that the elections indicated above will remain in effect until later changed or revoked by me or my contributions during any year reach the maximum dollar amount allowed under the Plan and Code. If the later occurs, my payroll deductions will automatically stop.
- If you are making both pre-tax and after-tax (Roth) contribution deferrals and reach the annual maximum prior to year end, the after-tax amount will be adjusted first to keep you within the limits.

I certify that the information on this form is true, complete and accurate.

Participant's Signature \_\_\_\_\_

Date \_\_\_\_\_

**RETURN COMPLETED FORM TO:**  
 (if faxed, also mail original)

**Johnson County, Kansas**  
 Financial Management and Administration (FMA)  
 111 S. Cherry, Suite 2400  
 Olathe, KS 66061-3486  
 Fax: 913-715-0577  
 Order# 155645 02/16/2023