

See Important Note Below*

Arizona State Retirement System Supplemental Retirement Savings Plan 401(a)

The Supplemental Retirement Savings Plan is qualified under Section 401(a) of the Internal Revenue Code. The program allows eligible members to contribute tax-deferred money into an account that can be drawn upon in retirement. This plan will be administered through Nationwide Retirement Solutions.

To be eligible for this program, you must meet the following criteria:

- Must be at least 30 years of age
- Must be eligible for ASRS or PSPRS

If you meet the above criteria:

- There is a two (2) **year window of opportunity** to enroll as follows:
 - Upon inception of the plan (07/01/2008 - 06/30/2010)*
 - Upon date of hire if you are age 30 or older
 - Upon attaining the age of 30

***IMPORTANT NOTE:** For employees already hired upon inception of the 401(a) plan (07/01/2008) and were age 30 or older at the time, 06/30/10 is the end of your window of opportunity to enroll.

- Your election is **Irrevocable**. This means that you cannot make any changes to your contribution amount or end participation during your employment with the City.
 - If you do not elect the plan during your window of opportunity, you cannot join
 - Once elected, you cannot increase or decrease your contribution amount

Go to www.azsrsp.com for more information



401(a)
Arizona State Retirement System
Supplemental Retirement Savings Plan
Defined Contribution Plan
 Participation Agreement

Personal Information

Name:	SSN:
Address:	City, State, & ZIP:
Date of Birth:	Email Address:
Home Phone Number:	Work Phone Number:
Employer:	
Date of Hire with current employer:	Plan Number (NRS Use Only):

Contribution & Payroll Frequency

	Dollar Amount OR Percentage	Payroll Frequency:	Per Pay Period
401(a) Pre-Tax	\$ _____ %		

Beneficiary Designation

Check here if this is a change of beneficiary. (Beneficiaries listed below replace any prior designation)

NOTE: Percentage split must total 100% for each category of beneficiary.

If additional space for beneficiaries is required, attach additional sheets and mark this box:

Primary Beneficiary(ies) (must total 100%):

Name:	Relationship:	Social Security #:	Phone #:
Address:		Date of Birth:	% Split:
Name:	Relationship:	Social Security #:	Phone #:
Address:		Date of Birth:	% Split:

Contingent Beneficiary(ies) (must total 100%):

Name:	Relationship:	Social Security #:	Phone #:
Address:		Date of Birth:	% Split:
Name:	Relationship:	Social Security #:	Phone #:
Address:		Date of Birth:	% Split:

Funding Options

Asset Allocation -

American Funds Target Date Funds

_____ % RFJTX American Funds 2015 Target Date Retirement Fund (Class R6)

_____ % RRCTX American Funds 2020 Target Date Retirement Fund (Class R6)

_____ % RFDTX American Funds 2025 Target Date Retirement Fund (Class R6)

_____ % RFETX American Funds 2030 Target Date Retirement Fund (Class R6)

_____ % RFFTX American Funds 2035 Target Date Retirement Fund (Class R6)

_____ % RFGTX American Funds 2040 Target Date Retirement Fund (Class R6)

_____ % RFHTX American Funds 2045 Target Date Retirement Fund (Class R6)

_____ % RFITX American Funds 2050 Target Date Retirement Fund (Class R6)

_____ % RFKTX American Funds 2055 Target Date Retirement Fund (Class R6)

_____ % RFUTX American Funds 2060 Target Date Retirement Fund (Class R6)

Foreign Large Blend

_____ % VTIAX Vanguard Total International Stock Index Admiral Shares

_____ % RERGX American Funds EuroPacific Growth Fund (Class R6)

Small Cap

_____ % VSMAX Vanguard Small Cap Index Admiral Shares

_____ % VSENX JP Morgan Small Cap Equity (Class R6)

Mid Cap

_____ % VIMAX Vanguard Mid Cap Index Admiral Shares

_____ % DPSRX Dreyfus Structured Mid Cap Fund (Class I)

Large Cap

_____ % VFIAX Vanguard 500 Index Admiral Shares

_____ % POSKX PRIMECAP Odyssey Stock

Specialty-Real Estate

_____ % ASRFX INVESCO Global Real Estate Fund (Class R6)

Diversified Emerging Markets

_____ % LZOEX Lazard Emerging Market Open Class Fund

Intermediate-Term Bonds

_____ % VBTLX Vanguard Total Bond Market Index Admiral Shares

_____ % MWTRX Metropolitan West Total Return Bond Fund

Fixed/Cash

_____ % Arizona Fixed Fund

_____ % Morley Stable Value Fund

100 % Total for both columns must equal 100%

Authorization

I have read and understand each statement on this form. I accept these terms and understand that these statements do not cover all of the details of the Plan or investment products offered with the Plan.

Participant Signature:	Date:
Retirement Specialist Name (Print):	FSR # Code

Form Return

Mail: Nationwide Retirement Solutions
PO box 182797
Columbus OH 43218-2797

Fax: 877-677-4329



Arizona State Retirement System Supplemental Retirement Savings Plan Memorandum of Understanding

The purpose of the Memorandum of Understanding is to highlight some of the characteristics, restrictions and costs of participation in the Plan. While all efforts have been made to cover the main provisions of participation in the Plan, this Memorandum of Understanding is not intended to cover all specific details of the Plan. I have read and acknowledge the following:

General Provisions of Participation:

My employer has adopted the Arizona State Retirement System Plan Supplemental Retirement Savings Plan (SRSP), which is administered by Nationwide Retirement Solutions, Inc. (NRS).

I have reviewed and understand this Memorandum and I have had the opportunity to contact NRS with questions regarding the terms of my participation within the Plan.

1. I understand that my participation in the Arizona State Retirement System Plan Supplemental Retirement Savings Plan (SRSP) is governed by the terms and conditions of the Plan Document. The product information brochure and fund prospectuses are available upon request from:
 - The local Nationwide Retirement Specialist at 602-266-273.
 - The Arizona State Retirement System Plan Supplemental Retirement Savings Plan website at azsrsp.com..
 - The Nationwide Retirement Solutions Customer Service Center at 888-224-1011.
2. I am only able to make contributions to this Plan through salary reduction. The salary reduction amount I choose will be withheld from my paycheck beginning with the earliest possible pay period after NRS and my pay center have processed my request. Such reduction is irrevocable.
3. The Internal Revenue Code (Code) sets limits on the maximum amount I may contribute to the Plan and other retirement accounts on an annual basis. It is my responsibility to adhere to these maximums. Upon request, a NRS representative will provide me assistance to determine my contribution limits
4. I may elect a beneficiary to receive the proceeds of my account upon my death. Should I fail to make such election, upon death, the proceeds of my Plan account shall be paid according to the default beneficiary provisions of the Plan. My beneficiary elections must be made on a form provided by NRS and become effective only upon acceptance and processing of the form by NRS.
5. The Code has prescribed specific conditions that must be met in order to take a distribution from the Plan. The conditions generally include termination from employment.
6. I generally must begin distributions from my account within the Plan no later than April 1st following the calendar year in which I attain age 70 ½, however, should I still be working at age 70 ½, I may defer distributions until the date I actually retire.
7. Distributions from my account will be taxable and may be subject to penalty for early withdrawal (withdrawals made prior to age 59 ½). Upon distribution, I will receive a special tax withholding notice that describes the options then available to me.
8. I understand that there is a vesting schedule that applies to Employer contributions and earnings, and that if I have not been employed for a five year period, that I will receive the vested amount of the contributions made by the Employer and the earnings resulting from these contributions. Employer contributions and earnings are vested according to the following schedule:

Less than one year of service.....	0%
One year but less than two years of service.....	20%
Two years but less than three years of service	40%
Three years but less than four years of service	60%
Four years but less than five years of service	80%
Five years or more.....	100%
9. I will notify NRS, in writing, of any financial changes, non-financial changes, or requests for distribution.
10. I understand that at the time I terminate from employment, I can choose a distribution option.
11. The earliest your enrollment or contribution change can start is the first day of the month following your completed request. Please remember, your employer's processing schedule will determine the actual effective date of the contribution. It is the Plan Sponsor's/ Pay Center's responsibility to ensure deferrals do not commence too early.

Provisions of Investment Options

1. The investment options available to me through the participation in the Plan, unless otherwise noted, are variable and subject to increase or decrease in value according to changes in the market. My principal (contribution amount) is not guaranteed.
2. Some mutual funds may impose a short term trade fee. Please read the underlying prospectuses carefully.
3. I may request additional information regarding any of the investment options available to me under the Plan by contacting NRS..

Administrative Fees

1. There is an explicit administrative fee of .06% (\$6 per \$10,000 annually).
2. I understand that the value of the investment options I select may change on a daily basis and there is no guarantee of principal or investment returns.

ASRS Supplemental Salary Deferral Plan Memorandum of Understanding

3. Morley Stable Value Retirement Fund

1. The Morley Stable Value Retirement Fund is not a mutual fund.
2. I understand that exchanges to competing investment options must be held in a non-competing investment option for a minimum of 90 days before I can subsequently transfer to a competing option.

Mutual Fund Payment Disclosure

Nationwide Retirement Solutions, Inc. and its affiliates (Nationwide) offer a variety of investment options to public sector retirement plans through variable annuity contracts, trust or custodial accounts. Nationwide may receive payments from mutual funds or their affiliates in connection with those investment options. For more detail about the payments Nationwide receives, please visit nrsforu.com.

Endorsement Disclosure

Nationwide Retirement Solutions, Inc. and Nationwide Life Insurance Company have endorsement relationships with the National Association of Counties and the International Association of Firefighters-Financial Corporation. More information about the endorsement relationships may be found online at nrsforu.com.

Consent to Electronic Paperless Delivery and Access

By providing your email address here, you are agreeing and consenting to receive and view plan benefit statements, correspondence and confirmations, and other communications electronically. These materials will be provided through an email message notifying you that electronic documents are available online for you to view and print. This replaces all written communication associated with your Retirement Plan(s) serviced by Nationwide and you will no longer receive these documents via US Mail. By providing your consent to electronic delivery, you are acknowledging and confirming that you are consenting to receive Plan Communications electronically, as they are now available or as they may be required or become available in the future and that you have access to view and print your documents electronically from the website and to save them from your computer or other electronic device. If you would like to receive the above referenced documents in paper form via US Mail you can do so by contacting Customer Service at (888-224-1011) and requesting paper. You may opt out of electronic delivery of your plan related documents at any time. There is no additional cost to receive documents in paper format via US Mail.

Changing Your Email Address and Your Paperless Delivery Preferences

You are able to update your email address or change your Paperless Preferences anytime either on the website or via Customer Service.

Your Right to Revoke Consent

You have the right to revoke your consent to receive documents electronically. Your consent shall be effective until you revoke it by changing your delivery preferences via Customer Service or on the website by selecting US Mail delivery.