

ELEVATOR CONSTRUCTORS ANNUITY AND 401(k) RETIREMENT PLAN
Pretax 401(k) and After-Tax Roth Contribution Enrollment/Deferral Change Form

INSTRUCTIONS

- ✓ Unless your employer provides you with its own Enrollment/401(k) and Roth Change Form, use this form to notify your employer to: (a) **start** your 401(k) deferrals and/or Roth contributions, (b) **change** your 401(k) and/or Roth contribution rate, or (c) **suspend** your 401(k) deferrals and/or Roth contributions. Your employer will use this form to update payroll.
- ✓ By electing to make pretax 401(k) and/or after-tax Roth contributions to the Plan, you are authorizing your employer to withhold those contributions from your pay.
- ✓ If you want to start, change, or suspend pretax 401(k) deferrals, you must complete Parts **A** and **B** of this Form.
- ✓ If you want to start, change, or suspend after-tax Roth Contributions, you must complete Parts **A** and **C** of this Form.
- ✓ If you want to start, change, or suspend pretax 401(k) deferrals and after-tax Roth Contributions, you must complete Parts **A**, **B**, and **C** of this Form.
- ✓ If you are age 50 or over during this calendar year and wish to make Catch-Up Contributions, you must complete Part **A** and **Section 1** of Part **D** of this Form. If you also wish to start making or wish to change your pretax 401(k) deferral rate and/or your after-tax Roth Contribution rate, you must also complete Part **A**, Part **B**, and/or Part **C**.
- ✓ If you are age 60 but not yet age 64 during this calendar year and wish to make Higher Catch-Up Contributions, you must complete Part **A** and **Section 2** of Part **D** of this Form. If you also wish to start making or wish to change your pretax 401(k) deferral rate and/or your after-tax Roth Contribution rate, you must also complete Part **A**, Part **B**, and/or Part **C**.
- ✓ **Remember to sign and date this form and return it to your employer.**

A. GENERAL INFORMATION

Employee's Name: _____
Employer: _____
Local Number: _____
Employee's SSN: _____ - _____ - _____ Phone No.: (____) _____ Email: _____
Employee's Address: _____
Employee's Birthdate: ____/____/____ Hire Date with Employer: ____/____/____

B. START, CHANGE, OR SUSPEND PRETAX 401(k) DEFERRAL

Please check only one box and provide requested information where indicated.

- ☐ **START (or Restart) 401(k) Deferrals:** I want to start (or restart) making pretax 401(k) deferrals at the rate of ____% or \$____, per pay period. I understand this election will become effective coincident with the first payroll of the following month.
- ☐ **CHANGE 401(k) Deferrals:** I want to change my rate of pretax 401(k) deferrals to ____% or \$____, per pay period. Please execute this request as soon as administratively possible.
- ☐ **SUSPEND 401(k) Deferrals:** I want to **cease** making pretax 401(k) deferrals to the Plan. Please execute this request as soon as administratively possible.

(Note: Participants employed by Otis may only make percentage (%) elections.)

C. START, CHANGE, OR SUSPEND AFTER-TAX ROTH CONTRIBUTIONS

Please check only one box and provide requested information where indicated.

- ☐ I elect to **START (or Restart) Roth Contributions:** I elect to start (or restart) making after-tax Roth Contributions at the rate of ____% or \$____, per pay period. I understand this election will become effective coincident with the first payroll of the following month.
- ☐ I elect to **CHANGE Roth Contributions:** I elect to change my rate of after-tax Roth Contributions to ____% or \$____, per pay period. Please execute this request as soon as administratively possible.
- ☐ I **SUSPEND Roth Contributions:** I want to **cease** making after-tax Roth Contributions to the Plan. Please execute this request as soon as administratively possible.

(Note: Participants employed by Otis may only make percentage (%) elections.)

D. CATCH-UP CONTRIBUTIONS

Generally, the sum of your pretax 401(k) deferrals and/or after-tax Roth Contributions may not exceed the IRS' "Applicable Elective Deferral Limit" for a calendar year. If the sum of your pretax 401(k) deferrals and after-tax Roth Contributions reach the Applicable Elective Deferral Limit during the calendar year, your employer will cease making pretax 401(k) deferrals and/or after-tax Roth Contributions for the remainder of the calendar year.

However, if you attain **age 50** or older by the end of the calendar year, you may make **Catch-Up Contributions** until you reach the IRS's "Applicable Catch-Up Contribution Limit."

YOU MUST AFFIRMATIVELY ELECT TO MAKE CATCH-UP CONTRIBUTIONS.

1. Catch-Up Contribution Election (Age 50+)

(**Do Not** Complete this Section 1 if you are at least age 60 but won't be age 64 by the end of the calendar year **and** you wish to make Higher Catch-Up Contributions. Instead, complete Section 2 below). If you are age 50 or older by the end of the calendar year and wish to make Catch-Up Contributions to the Plan if and when you reach the Applicable Elective Contribution Limit, please check each box that will apply to you:

- ☐ **YES**, I will be age 50 or older in the calendar year and I wish to make Catch-Up Contributions when and if the sum of my pretax 401(k) deferrals plus my after-tax Roth Contributions reach the Applicable Elective Deferral Limit as follows:
 - ☐ I elect to have my Catch-Up Contributions comprised solely of pretax 401(k) deferrals at the rate of ____% or \$_____ (choose only one), per pay period, up to the Applicable Catch-Up Contribution Limit in a calendar year.
 - ☐ I elect to have my Catch-Up Contributions comprised solely of after-tax Roth Contributions at the rate of ____% or \$_____ (choose only one), per pay period, up to the Applicable Catch-Up Contribution Limit in a calendar year.
 - ☐ I elect to have my Catch-Up Contributions comprised of pretax 401(k) deferrals at the rate of ____% or \$_____ (choose only one) **and** after-tax Roth Contributions at the rate of ____% or \$_____ (choose only one), per pay period, up to the Applicable Catch-Up Contribution Limit in a calendar year.

2. Special, Higher Catch-Up Contribution Election (Only applicable if you are age 60 to age 63 as of December 31 of the calendar year)

If you are at least age 60 but not yet age 64 at the end of a calendar year and wish to elect to make Higher Catch-Up Contributions to the Plan if and when you reach the Applicable Elective Deferral Limit, please check each box that will apply to you:

- ☐ **YES**, I will be age 60 but not yet age 64 in the calendar year and I wish to make Higher Catch-Up Contributions when and if the sum of my pretax 401(k) deferrals plus my after-tax Roth Contributions reach the Applicable Elective Deferral Limit as follows:
 - ☐ I elect to have my Higher Catch-Up Contributions comprised solely of pretax 401(k) deferrals at the rate of ____% or \$_____ (choose only one), per pay period, up to the IRS' Applicable Higher Catch-Up Contribution Limit in a calendar year.
 - ☐ I elect to have my Higher Catch-Up Contributions comprised solely of after-tax Roth Contributions at the rate of ____% or \$_____ (choose only one), per pay period, up to the Applicable Higher Catch-Up Contribution Limit in a calendar year.
 - ☐ I elect to have my Higher Catch-Up Contributions comprised of pretax 401(k) deferrals at the rate of ____% or \$_____ (choose only one) **and** after-tax Roth Contributions at the rate of ____% or \$_____ (choose only one), per pay period, up to the Applicable Higher Catch-Up Contribution Limit in a calendar year.
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Employee Signature _____ Date _____