ICMA-RC is now

Missi; nSquare

457 Deferred Compensation Plans Contribution Form

- Use this form to initiate or change the amount you contribute to your 457 deferred compensation plan account with MissionSquare Retirement. Note: You should only use this form if you have previously established an account in your employer's plan.
- · Return the completed form to your employer.

YEAR	MAXIMUM CONTRIBUTION	AGE-50 CATCH-UP	PRE-RETIREMENT CATCH-UP
2026	\$24,500.00 *Approximately \$907 each pay period if contributions begin January 1 or \$1,750 if contributions begin July 1.	\$8,000 \$32,500 Total	\$49,000 Total

1 PARTICIPANT INFORMATI			
EMPLOYER PLAN NUMBER: 307126	CITY OF CHICO		
FULL NAME: LAST, FIRST MI	EMPLOYEE ID:		
EMPLOYE	R MATCH: CPSA (10%) CPOA (10%) Employer match does not apply to catch-up contributions.		
2 CONTRIBUTION AMOUNT	AND EFFECTIVE DATE		
Contribution Amount: (per pay page 1) I authorize my employer to contribution account with Mission Square	ibute the amount specified below from my pay each pay period, to be contributed to my 457 deferred compensation		
☐ Pre-Tax Contributions:	Dollar Amount: \$ (per pay period)		
Roth Contributions: Dollar Amount: \$ (per pay period)			
Roth contributions are not available in all plans. Please check with your employer or MissionSquare to confirm that Roth contributions are offered in your plan before selecting this option.			
Normal Contribution Limit (202	26): 100% of compensation or \$24,500, whichever is less.		
Catch-up Contributions:			
If you are taking advantage of eit	ther of the catch-up contribution provisions available to 457 plan participants, please check the applicable box below.		
Age 50 catch-up contributions (up to \$8,000 more than the normal limit. \$32,500 maximum.)			
Special pre-retirement	☐ Special pre-retirement catch-up (up to \$24,500 more than the normal limit. \$49,000 maximum.)		
Please read MissionSq	uare's 457 Deferred Compensation Plan Pre-Retirement Catch-Up Form for more information.		
Effective Date:			
All contribution changes will be e unless a later date is specified be	effective the first of the pay period following form submittal, or as soon as administratively possible thereafter, elow.		
	Future Effective Date:		
3 SIGNATURES			
Participant Signature	Date		