



EMPLOYEE BENEFITS & PAYROLL DIVISION
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457(B) DEFERRED COMPENSATION PRE-TAX AND ROTH SALARY DEFERRAL DEDUCTION FORM

The Salary Deferral Form is not an enrollment form. It is a form to elect or change your 457(b) contribution amount. You must have opened an account with Empower before submitting this form. Contact Empower customer service at 800-743-5274 to open an account and for general inquiries. To schedule an appointment with the County's designated Empower representative email empower@fultoncountyga.gov or call (404) 612-9048

401(a) Defined Contribution Retirement Plan Participant Match

If you are a participant in the 401(a) (New) Retirement plan, the County will make an Employer Matching Contribution for each payroll period equal to 50% of the first 4% of your Pay for the Plan Year that you contribute to the 457(b) Plan. The County will make a maximum contribution of 2% of your Pay to the Plan on your behalf.

2022 IRS Contribution Limits:

Under Age 50 Pretax and Roth combined contribution limit	\$20,500
Age 50 and Older Pre-Tax and Roth combined catch-up contribution limit <i>(you are eligible for catch-up contribution if you reach age 50 anytime during the calendar year)</i>	\$27,000
Special Pre-Tax & Roth 3 Year Pre-Retirement Catch-Up <i>(must be age 65 or within 3 years of age 65 for the calendar year; contact Empower to confirm eligibility)</i>	\$41,000

**The pre-tax plus the after-tax Roth contributions cannot exceed the IRS contribution limit for the calendar year.*

NAME(Print Full Legal Name)	EMPLOYEE ID# (Required):
DEPARTMENT:	PHONE NUMBER:
I authorize Fulton County Government to defer the following percent of my total gross compensation over 24 pay periods:	
TRADITIONAL PRE-TAX (Before Tax) 457(B):	
<input type="checkbox"/> 1.08% of Pre-Tax Payroll Amount (Biweekly), or 1.00% of Pre-Tax Payroll Amount (Monthly)	<input type="checkbox"/> 2.17% of Pre-Tax Payroll Amount (Biweekly), or 2.00% of Pre-Tax Payroll Amount (Monthly)
<input type="checkbox"/> 3.25% of Pre-Tax Payroll Amount (Biweekly), or 3.00% of Pre-Tax Payroll Amount (Monthly)	<input type="checkbox"/> 4.33% of Pre-Tax Payroll Amount (Biweekly), or 4.00% of Pre-Tax Payroll Amount (Monthly)
<input type="checkbox"/> Greater than 4.33% of Pre-Tax Payroll Amount (enter amount in whole percentage)	<input type="checkbox"/> Special Pre-Retirement Catch-Up <i>(must be age 65 or within 3 years of age 65 for the calendar year; contact Empower to confirm eligibility)</i>
<input type="checkbox"/> 0% - Cancellation of deduction	
ROTH AFTER-TAX 457(B):	
<input type="checkbox"/> 1.08% of Pre-Tax Payroll Amount (Biweekly), or 1.00% of Pre-Tax Payroll Amount (Monthly)	<input type="checkbox"/> 2.17% of Pre-Tax Payroll Amount (Biweekly), or 2.00% of Pre-Tax Payroll Amount (Monthly)
<input type="checkbox"/> 3.25% of Pre-Tax Payroll Amount (Biweekly), or 3.00% of Pre-Tax Payroll Amount (Monthly)	<input type="checkbox"/> 4.33% of Pre-Tax Payroll Amount (Biweekly), or 4.00% of Pre-Tax Payroll Amount (Monthly)
<input type="checkbox"/> Greater than 4.33% of Pre-Tax Payroll Amount (enter amount in whole percentage)	<input type="checkbox"/> Special Pre-Retirement Catch-Up <i>(must be age 65 or within 3 years of age 65 for the calendar year; contact Empower to confirm eligibility)</i>
<input type="checkbox"/> 0% - Cancellation of deduction	
AUTHORIZATION & ACKNOWLEDGEMENT	
I authorize and request Fulton County to defer a portion of my salary into my deferred compensation account(s) each pay period as indicated above, until my termination, retirement, change of election or reaching the maximum deferral allowed per calendar year. I understand that the 457b pre-tax Plan deduction will be deducted from my gross pay (before tax) and that the 457 Roth Plan deduction will be deducted from my net pay (after-tax).	
EMPLOYEE SIGNATURE _____	DATE: _____
Deferred compensation salary deferral elections/changes will be effective as of the first pay period of the calendar month following the date you submit this form or as soon as administratively possible.	

Email completed form to payrollunit@fultoncountyga.gov OR fax to (404) 612-2929.