

San Bernardino County PST DEFERRED COMPENSATION PLAN PARTICIPANT AGREEMENT

The PST Deferred Compensation Plan is a mandatory Social Security replacement program for part-time, seasonal, temporary, extra-help, recurrent, and some contract employees who are not eligible to participate in the San Bernardino County Employees' Retirement Association (SBCERA).

REFERENCES

Current County Memoranda of Understanding (MOU); Internal Revenue Service (IRS) Code 415, 457(b)

FORMS REQUIRED

PST Deferred Compensation Plan Participation Agreement
Beneficiary Designation for ING_(recommended)

MANDATORY FIELDS

All
All

GENERAL INFORMATION

Eligible employees shall defer a percentage of their biweekly salary as established in their employment contract or Memorandum of Understanding into an account set up on their behalf in the PST Plan. Employees' contributions shall be automatically deducted from earnings. The plan offers a fixed interest rate investment fund.

IRS regulations provide strict guidelines governing the distribution of funds from the PST plan. The employee can only access PST funds under the following circumstances:

1. After separating from County employment
2. After two years from being transferred to a position that does not require participation into the PST plan (i.e., regular, contract), if the PST account balance is under \$5,000 and there has been no other prior fund distribution.

If the employee qualifies based on one of the conditions listed above, the employee must contact ING at (800) 584-6001 to request a *PST Deferred Compensation Plan Distribution Request Form* to initiate the distribution of funds.

Except under the conditions listed above, part-time, seasonal, temporary, extra-help, recurrent, or contract employees that are subsequently hired into a regular County position will not be eligible for distribution of the PST account. However, these employees shall be eligible to use their PST funds to purchase SBCERA service credit. *Refer to SBCERA Retirement Plan booklet.*

Employees may not transfer PST funds into their County 457(b) plan.

Employees who have retired from the County and have been re-employed by the County in a part-time, seasonal, temporary, or contract capacity, are not eligible to participate in the PST plan.

EMPLOYEE RESPONSIBILITIES

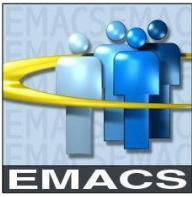
Participation Agreement

The PST Deferred Compensation Plan Participation Agreement form must be used for all initial enrollments and re-enrollments, as well as address changes and name changes.

Initial/Re-Enrollment

- ◆ Check the appropriate choice at the top of the Participation Agreement
- ◆ Complete all information. A mailing address must be provided. Sign the Participation Agreement
- ◆ Return completed Participation Agreement directly to department payroll specialist

Note: To designate a beneficiary, contact ING or complete a Beneficiary Designation for ING form.



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Change of Address

- ◆ Check the "Change of Address" option at top of the Participation Agreement
- ◆ Complete all information
- ◆ Print new address in the space provided. A mailing address must be provided
- ◆ Sign the Participation Agreement
- ◆ Return completed Participation Agreement directly to department payroll specialist

Name Change

- ◆ Check the "Name Change" option at top of the Participation Agreement
- ◆ Print new name on the "Name" line and write former name in the space provided
- ◆ Complete all other information
- ◆ Sign Participation Agreement
- ◆ Return completed Participation Agreement directly to department payroll specialist

Note: If name change is due to marriage, complete the Beneficiary Designation for ING form and obtain spousal consent if necessary. *Refer to Beneficiary Designation section*

Beneficiary Designation

Initial beneficiary designation and beneficiary changes may be made by completing the Beneficiary Designation for ING form, contacting ING, or visiting ING's website.

Initial Designation

- ◆ Check "Initial Designation" box
- ◆ Complete all information. *Refer to Beneficiary Designation Instructions on page two of the form*
- ◆ Sign form
- ◆ Return completed form directly to department payroll specialist

Change to Designation

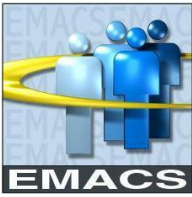
- ◆ Check "Change to Designation" box
- ◆ Complete all information. *Refer to Beneficiary Designation instructions on page two of the form*
- ◆ Sign form
- ◆ Return completed form directly to department payroll Specialist

Note: The new Beneficiary Designation form will completely replace any prior designation on file. Therefore, if adding additional beneficiary(ies) you must re-enter any prior beneficiary(ies) that you wish to keep in addition to the new one(s).

PST Distribution

Approximately 2-3 weeks following separation from the County, employees may request a PST Deferred Compensation Plan Distribution form from ING. ING will not release forms until there is a termination date in EMACS for the employee.

All distributions will be subject to an automatic 20% federal tax withholding and a 2% state tax withholding. To request additional withholding above the 20% federal tax withholding, a W-4P must be completed. To request additional withholding above the 2% state tax withholding, a DE-4P must be completed.



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PARTICIPANT AGREEMENT**

PAYROLL SPECIALIST RESPONSIBILITIES

PST Deferred Compensation Plan Participation Agreement - form

- ◆ Audit form for completeness
- ◆ Retain copy for department file
- ◆ Forward to EBSD-HR (0440)
- ◆ Verify that EMACS has been updated to reflect the requested action

Beneficiary Designation for ING - form

- ◆ Audit form for completeness
- ◆ Verify that employee has designated at least one primary beneficiary and has included all personal information for this individual
- ◆ Verify that the total for all primary beneficiaries equals 100%. Verify that the total for all contingent beneficiaries equals 100%.
- ◆ If employee has indicated that they are married, but designating someone other than (or in addition to) their spouse as the primary beneficiary, verify that the Spousal Consent section has been completed
- ◆ Retain copy for department file
- ◆ Forward to EBSD-HR (0440)

PST Distribution - form

Direct employee to mail form to ING at the address indicated on the form

RELATED FORMS

Premium Deduction Election
Job Share Contract

RELATED PROCEDURES

New Hire - Contract - checklist
New Hire - Extra-Help - Recurrent - checklist
New Hire - PSE - checklist
Termination - checklist
Job Share - checklist