



Special Deferral From Accumulated Annual Leave Payment

457(b) Plan

Complete this form with your agency's SoonerSave Coordinator to request special SoonerSave deferrals from accumulated annual leave payments. Total payroll and annual leave deferrals cannot exceed IRS annual limits. Search 'contribution limits' at [irs.gov](https://www.irs.gov) to view current limits.

See instructions on the second page of this form.

Participant Information

_____ Social Security number	_____ Last name	_____ First name	_____ M.I.
_____ Work phone	_____ Home/cell phone	_____ Email address	

In hours, enter the amount of unused annual leave you would like to defer to your SoonerSave account:

- ☐ Pre-tax: I would like to defer _____ hours of my unused annual leave on a pre-tax basis.
- ☐ Roth: I would like to contribute _____ hours of my unused annual leave on an after-tax basis.

**If you would like a specific dollar amount, please confer with your agency directly.*

Participant Signature

I authorize my employer to deduct this amount from my accumulated annual leave payroll as calculated by my agency's SoonerSave Coordinator. I understand this contribution will be withheld from my paycheck and contributed by my employer to the Plan on my behalf to my 457 Deferred Compensation Plan.

_____ Participant signature (Electronic signatures not accepted)	_____ Date
--	---------------

*Participant: Return form to your agency SoonerSave Coordinator

Section to Be Completed by SoonerSave Coordinator

Enter dollar amount of annual leave that will be deferred. The amount, combined with deferrals already received by SoonerSave in the current calendar year, should not cause the member to exceed the IRS contribution limits for the current year. See instructions on page 2 for description of required information.

\$ _____ Pre-tax deferral amount	\$ _____ Roth deferral amount	_____ Last date on payroll	_____ Pay period (B7/M3)	_____ Payroll authorization date (MM/YYYY)
-------------------------------------	----------------------------------	-------------------------------	-----------------------------	---

_____ Agency name	_____ Agency number
----------------------	------------------------

_____ Coordinator signature	_____ Date
--------------------------------	---------------

Instructions for Participant

- Provide all information in the Participant Information section.
- Select the pre-tax option to defer taxes and/or the Roth option to pay taxes now on your contribution. Enter the number of hours of unused annual leave up to the lesser of current allowable hours or agency limit.
- Provide a handwritten signature and date in ink in the Participant Signature section.
- Your name must match what SoonerSave has on file. If you are unsure, log into your account at soonersave.com or review your most recent quarterly statement.
- **Return the form to your SoonerSave Coordinator the month prior to your last day on payroll.**

Instructions for SoonerSave Coordinator

- Convert the hours provided by the employee to a dollar amount for both pre-tax and Roth.
- Verify the total amount already contributed, expected contributions through employee's last day worked, and the annual leave contribution do not exceed the IRS annual contribution limit.
- Provide the following information:
 - **Last day on payroll:** This is the last day an employee worked or used leave, not the day they receive their paycheck.
Example: Tina's last day physically on the job is September 26. She then uses four days of annual leave to finish out to the end of the month. Tina's Last Date on Payroll is September 30.
 - **Pay period:** Use the code for the pay period the contribution will be received by SoonerSave, e.g. B01, M01.
 - **Payroll authorization date:** This is the month and year corresponding to the pay period dates a member works.
- Return the form within the deadline window. The SoonerSave Administration office must receive the form by the end of month prior to the payroll authorization date and no earlier than 60 days prior to employee's last day on payroll.

Example of pay period and payroll authorization dates

Pay Period	Pay Period Dates	Payroll Authorization Date	Form Deadline
B07	September 10 – September 23, 2023	September 2023	8/31/2023
M03	September 1 – September 30, 2023	September 2023	8/31/2023

Note: Current biweekly pay schedules and deadlines can be found on the Employers page of the OPERS website.

Completed form to be returned to SoonerSave Administration. The following options are available for return:

Mail to: SoonerSave
 PO Box 53007
 Oklahoma City, OK 73152-3007

OR Fax to: 405 848-5946