

npers.ne.gov

Name LAS	Т	FIRST		MIDDLE	Date of Bi	rth	OFFICE	
ocial Security Nu	ımber		Ema	il			-	
ddress			City		State	Zip	Initials	
101633			City		Otate	Ζιρ	Date	
ome Phone	V	/ork Phone		Employer			Fhdr	
	Defer	red Compe	ensatio	n Plan (DC	P) Char	nge Fori	m	
	COMPLETE O	NLY THOSE SECT				OU WISH TO	MAKE.	
				JTION CHANG		1 (2)		
	i tne pian are pre-ta: ir annual compensa					be contribut	ted each year is the lesse	
YEAR	NORMAL LIMITA	TION DEFERRAL	4L		TIONAL CATCH- UP —		AGE 50 MAXIMUM DEFERRAL	
2024	\$23,000		- T		500		\$30,500	
ou will be no	tified if contributio	ns designated o	n this form	are expected to	exceed IR	S limitations	s. If you are 50 or older	
	ibute up to the Ag			5.15 5Ap 5515 11				
ontribution	Per Pay Period:	\$	Start	: date:				
FREQUENCY	:			As soon as poss				
☐ Monthly	= 12 per year 🔲 B	i-Weekly = 24 per y	ear 🔲	After paycheck of	lated:			
stimated Ar	nnual Salary: \$_						alendar year? 🗌 Yes 📗	
				please attach a cop	· ·		• • • • • • • • • • • • • • • • • • • •	
] I wish to d	lefer from final s	ick/vacation lea	ave pay. To	ermination Date:	/	/	Amount:	
		INVEST	MENT ELE	CTION (FUTUR	RE ONLY)			
lake your selec	tion(s) in whole incre	ments totaling 100	%. Elections	will only change f	uture contribu	itions. See tra	ansfer section below for tra	
		uaranteed as to ra					rmless against any losses.	
% Investor Select (24)			% U.S. Core Plus Bond (BF) % LifePath Index 20 % LifePath Index 2065* (BG) % LifePath Index 20				ath Index 2040* (BM)	
% U.S. Bond Index (18) % Stable Value (10)						ath Index 2030* (BO)		
% International Stock Index (BD)							ath Index 2025* (BP)	
% U.S. Total Stock Market Index (BA)			% LifePath Index 2050* (BJ)			% LifePath Index Retirement* (BQ)		
	bal Equity (BE)	maox (BA)		ath Index 2045* (BI		70 21101 0	att mask real official (Sa)	
		s, bonds, etc. that				t seek to mitig	ate risk closer to your intend	
tirement date.							,	
transfer will me	TR/ ove a dollar amount	ANSFER OF EX						
RANSFER \$	OR	% <u>from</u> the	.9 .440		FUND, <u>in</u>		F	
RANSFER \$	OR	OR % <u>from</u> the		FUND, <u>into</u> the				
RANSFER \$	OR	% <u>from</u> the			FUND, <u>in</u>	<u>to</u> the	F	
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RANSFER \$	OR	% <u>from</u> the			FUND, <u>in</u>	to the	F	
cessed within 3 ne using the Am	business days of rece eritas online account.	eipt. Changes to con If you are a State of	tributions will Nebraska en	be made as soon a nployee, you must u	ıs administrati ıse Workday f	vely possible. or DCP change	ent elections/transfers will be Allocations and Transfers ma es, unless you are rolling you frm must be submitted.	
ember ignature: gency ignature:	gnature:ency				Date:		AGENCY ACTION: Please re this form and the instructions a (for deadlines). You will be not when the member has been enrolled and deductions may be	
yılatule					Number:		on one and deductions may be	
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BAR CODE