



# Arizona State Retirement System (ASRS)

Supplemental Salary Deferral Plan (SSDP)

This material is not a recommendation to buy or sell a financial product or to adopt an investment strategy. Investors should discuss their specific situation with their financial professional.

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NRM-21876AZ-AS.8 (2/26)



# Benefits of the plan



# Commitment to excellence

## People

- Local Retirement Specialists (RS) who can come to you and your staff members throughout the year
- A Personal Retirement Consultant (PRC) who offers free financial planning
- Local Phoenix full-service walk-in office and phone support
- Evening and Saturday phone support
- Toll-free: 1-888-292-1401  
azssdp.com

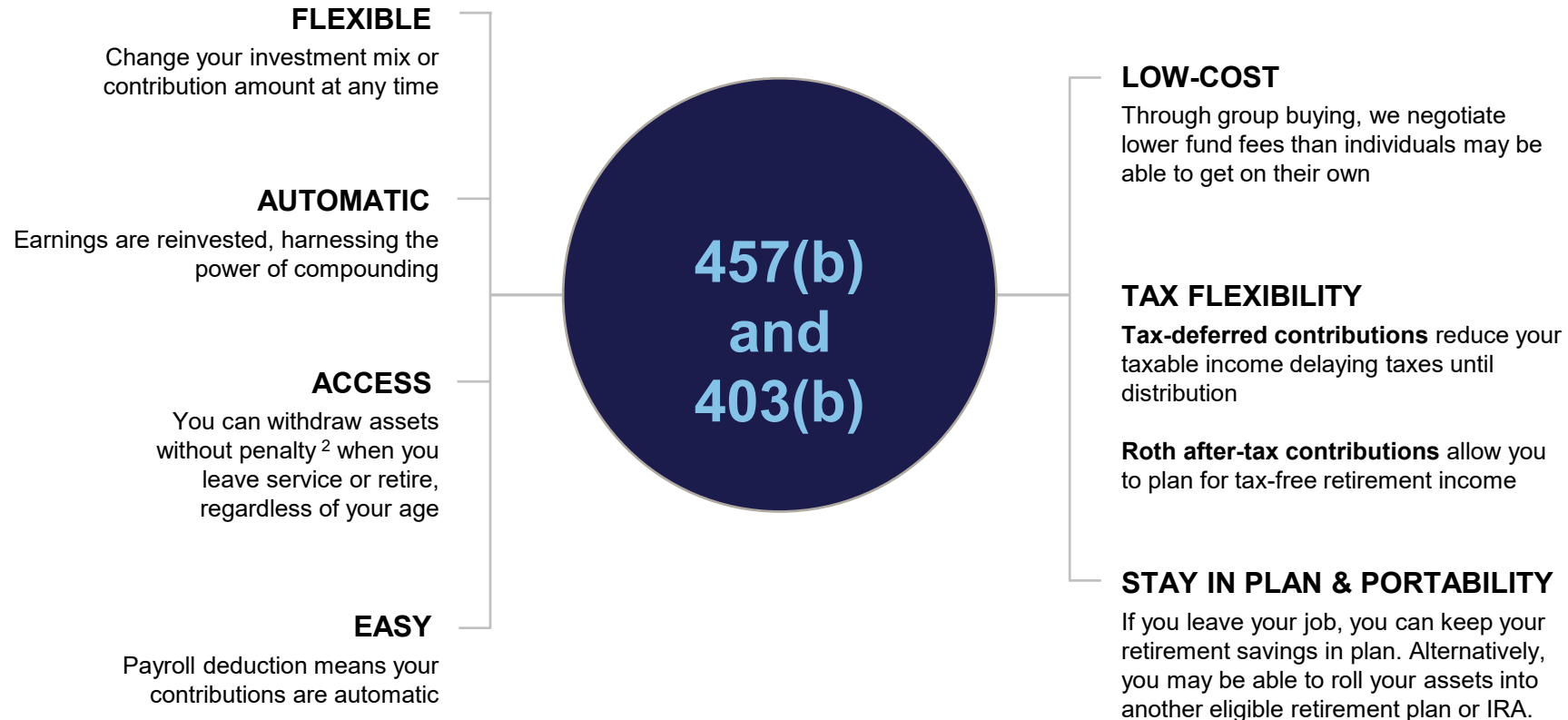
## Retirement readiness

- Social Security, health care in retirement and tax distribution planning webinars
- Personalized participant engagement program messaging
- My Income Retirement Planner<sup>SM</sup> with ASRS Pension to calculate retirement needs
- Hands-on and hands-off investment options to help all types of investors
- Investment advice through the My Investment Planner<sup>SM</sup> Tool (at no cost)
- Mobile-responsive participant website and mobile app

## Flexibility and the power of ASRS

- The official supplementary retirement plan of the Arizona State Retirement System
- Over \$600 million in plan assets means high-quality investments with low cost
- Investments monitored by the ASRS Supplemental Savings Plan Committee and Nationwide<sup>®</sup>
- Legislative and regulatory changes are incorporated into the plan, ensuring that you are always compliant
- Plan sponsor support in Phoenix for help when needed
- ASRS and Nationwide co-fiduciary plan oversight


# Key features of 457(b) and 403(b)<sup>1</sup>



<sup>1</sup> 457(b) — any ASRS members; 403(b) — ASRS members employed by education system.

<sup>2</sup> 403(b) distributions may be subject to an early withdrawal penalty of 10% dependent on age or unless an exception applies

# Simple plan adoption process (457 plans)

**ARIZONA STATE RETIREMENT SYSTEM**  **Arizona State Retirement System 457(b) Supplemental Savings Plan Participation Agreement** Page 1 of 4

**Personal Information**

Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Primary Phone: \_\_\_\_\_  
 Employer: \_\_\_\_\_ Date of Hire: \_\_\_\_\_  
 Email: \_\_\_\_\_ Plan Number (NRS Use Only): \_\_\_\_\_

**Paperless Delivery Consent**

**Paperless Delivery:** By providing your email address you are consenting to electronic (paperless) delivery of documents related to your retirement plan, e.g. - statements, confirmations, terms, agreements, etc. Check the box below if you would prefer to receive paper copies of the documents via US Mail to the address provided above.

I do NOT consent to Paperless Delivery. Please provide the documents related to my retirement plan via US Mail.

**Deferral Election & Payroll Frequency**

457(b) Pre-Tax \$ \_\_\_\_\_ OR \_\_\_\_\_% Payroll Frequency: \_\_\_\_\_ **Bi-Weekly**  
 457(b) Roth\* \$ \_\_\_\_\_ OR \_\_\_\_\_% Start Contribution On (Pay Period): \_\_\_\_\_  
 Total \$ \_\_\_\_\_ OR \_\_\_\_\_%

\*Contributions to Roth are made on a post-tax basis. Use whole dollar amounts and percentages only; no decimals or fractions.

**Enroll me in asset rebalancing.** I agree to comply with and be bound by the terms and conditions of the service including any restrictions imposed by the investment options. I understand I can obtain more information about the service, its terms and conditions by contacting the Nationwide Service Center.

**Beneficiary Designation**

**IMPORTANT NOTES:** 1) Allocations must total 100% for each category of beneficiary; and 2) If you designate a single primary or contingent beneficiary and do not list a percentage, it will be designated as 100%.

I have additional beneficiaries. If you want to designate more than 2 of each type of beneficiary, you may attach a page with the additional beneficiary information. Allocations must still total 100% for each category.

**Primary Beneficiary(ies)** (Allocations must total 100%):

1. Full Name: \_\_\_\_\_ Allocation: \_\_\_\_\_%  
 Relationship: \_\_\_\_\_ SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Full Name: \_\_\_\_\_ Allocation: \_\_\_\_\_%  
 Relationship: \_\_\_\_\_ SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_


**Contingent Beneficiary(ies)** (Allocations must total 100%):

1. Full Name: \_\_\_\_\_ Allocation: \_\_\_\_\_%  
 Relationship: \_\_\_\_\_ SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Full Name: \_\_\_\_\_ Allocation: \_\_\_\_\_%  
 Relationship: \_\_\_\_\_ SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

NRM-13456AZ-AZ.16 (04/2024) For help, please call 1-888-292-1401 azssdp.com

**Participation Agreement**

**ARIZONA STATE RETIREMENT SYSTEM**  **Arizona State Retirement System Supplemental Savings Plan 457(b) Plan Adoption Agreement of Participation Employers** Page 1 of 1

**Preamble**

By this agreement, the Employer hereby adopts the ASRS Supplemental Savings Plan (SSP) 457(b) Plan and permits Employees to begin contributing as of \_\_\_\_\_ (date).

**Employer Information**

Employer Name: \_\_\_\_\_  
 Employer Address: \_\_\_\_\_  
 City, State, & ZIP: \_\_\_\_\_ Employer Tax ID Number: \_\_\_\_\_

**Employee Contributions (check box(es))**

Pre-tax per plan document  Roth after-tax contributions to also be enabled  
 Roll-over contributions per plan document

**In-service Withdrawals (check box(es))**

Shall not be allowed other than per plan document  
 Plan to plan transfers to other active employer sponsored 457 plans allowed

**Loans (check box(es))**

Shall be allowed per plan administrative agreement  Shall not be allowed

**Other Information for the Participating Employers**

The ASRS is responsible for administration of this Plan. Inquiries regarding the adoption of the Plan or the meaning of its provisions should be directed to the ASRS or the acting record keeper. This adoption agreement may be used only in conjunction with the ASRS Supplemental Savings Plan (SSP) 457(b) Plan.

**Employer Signature**

Name of Employer: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Name (please print): \_\_\_\_\_  
 Date Executed: \_\_\_\_\_

**Acceptance by ASRS**

The Arizona State Retirement System (ASRS) hereby accepts the adoption of the Plan by the Employer identified in the Employer Information section.


Arizona State Retirement System  
 Signature: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Name (please print): \_\_\_\_\_  
 Date Executed: \_\_\_\_\_

**Acceptance by the Record Keeper and/or Third Party Administrator (if applicable)**

Signature: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Name (please print): \_\_\_\_\_  
 Date Accepted: \_\_\_\_\_

NRM-13574AZ-AZ.2 (04/2024) For help, please call 602-266-2733 azssdp.com

**457 Plan Adoption Agreement of Participation Employers**

**ARIZONA STATE RETIREMENT SYSTEM**  **Arizona State Retirement System Supplemental Savings Plan Adoption Resolution** Page 1 of 1

WHEREAS, the \_\_\_\_\_ (Name of Political Subdivision) hereinafter designated the Political Subdivision, through its governing body, desires to establish a supplemental defined contribution plan for all of its eligible officers and employees to be administered by the Arizona State Retirement System (hereinafter designated ASRS) under Article 2, Chapter 5, Title 38 of the Arizona Revised Statutes.

NOW, THEREFORE, BE IT RESOLVED, that the Political Subdivision hereby adopts a Supplemental Savings Plan (hereinafter designated SSP) established by the ASRS pursuant to Section 38-781, Arizona Revised Statutes, for the officers and employees of the Political Subdivision who are eligible for participation in the SSP.

BE IT FURTHER RESOLVED, that the \_\_\_\_\_ (Position Title) is designated as the Authorized Agent of the Political Subdivision and is authorized and directed as the representative of the Political Subdivision to conduct all negotiations, conclude all arrangements and sign all agreements and modifications of agreements which may be necessary to carry out the intent of the Agreement in conformity with all applicable federal and state laws, rules and regulations.

I, \_\_\_\_\_ Clerk/Secretary of the \_\_\_\_\_ (Political Subdivision) State of Arizona, do hereby certify the foregoing to be a full, true and correct copy of the resolution adopted by the \_\_\_\_\_ (Name of Governing Body) of the \_\_\_\_\_ (Political Subdivision) at a regular/special meeting held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ as the same appears on record in my office.

\_\_\_\_\_  
 Clerk/Secretary

NRW-4588AZ.1 (04/2024) For help, please call 602-266-2733 azssdp.com

**Adoption Resolution**

# Simple plan adoption process (457 plans), continued

**ARIZONA STATE RETIREMENT SYSTEM** | **Nationwide** | **Arizona State Retirement System Supplemental Savings Plan 457(b) Enrollment Data Sheet**  
Page 1 of 1

**Employer Information**  
 Employer Name: \_\_\_\_\_ ASRS ER ID Number: \_\_\_\_\_  
 Address: \_\_\_\_\_ Employer Website: \_\_\_\_\_  
 City, State, & ZIP: \_\_\_\_\_

**Plan Liaison**  
 SSP Plan Liaison to the ASRS: \_\_\_\_\_  
 Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Payroll Liaison**  
 Payroll Liaison to the SSP: \_\_\_\_\_  
 Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Governing Board**  
 Governing Board Name: \_\_\_\_\_  
 Governing Board Liaison: \_\_\_\_\_  
 Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
 Governing Board Address: \_\_\_\_\_  
 City, State, & ZIP: \_\_\_\_\_  
 Date Form Completed: \_\_\_\_\_

NRW-4606AZ-AZ.1 (04/2024) For help, please call 602-266-2733 azssdp.com

**Enrollment Data Sheet**

**Nationwide** | **Nationwide Retirement Solutions Primary Website User Form**  
Page 1 of 1

This form is required to establish one person within the Plan Sponsor's office as the primary website user on the NRS website. The primary user will administer all other website roles for the Plan's account.  
 Please fax this form to 1-877-677-4329, Attention: Plan Conversion and Setup OR email to [welcome@nationwide.com](mailto:welcome@nationwide.com)  
 New Access Request  Additional Access Request

**Plan Sponsor Information (please print)**  
 Plan Sponsor Name: \_\_\_\_\_  
 Employer Tax ID Number: \_\_\_\_\_  
 Plan Sponsor Number (Nationwide Assigned): \_\_\_\_\_  
 Plan Sponsor Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Primary Website User Contact Information:**  
 Name: \_\_\_\_\_  
 Email (required): \_\_\_\_\_  
 Work Phone: \_\_\_\_\_ Cell Phone (optional): \_\_\_\_\_

**The primary website user will have the following functions on the website:**

- View plan and participant statements
- View and/or submit payroll details
- View participant account details
- Request on demand reports
- View plan account details
- Establish secondary website user accounts for staff personnel
- e.g. - plan health reporting and investment options

We take protecting retirement plan account information very seriously at Nationwide. Therefore, the primary website user is responsible for performing periodic audits to verify that the secondary website users accounts are being used by the original user for legitimate business purposes.

**Payroll Automation**  
 Payroll Automation enables a pay center to easily submit payroll detail, salary deferral contributions, and employer contributions electronically. If you are interested in payroll automation, no action is necessary. A representative from Nationwide will contact you shortly to discuss how you can take advantage of this valuable feature. If you have questions about how automation will benefit you, please contact Nationwide at 1-877-496-1630 Option #3.

**Opt-Out of Payroll Automation**  
 By checking here, the Plan chooses not to take advantage of payroll automation at this time and acknowledges that the Plan will be responsible for manually submitting legible and reconciled payroll detail and contributions to Nationwide each pay cycle.

**Required Authorization**  
 Approving Plan Official:  
 Name (print): \_\_\_\_\_ Title: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Form Return**  
 By Fax: 1-877-677-4329, Attention: Plan Conversion and Setup  
 By Email: [welcome@nationwide.com](mailto:welcome@nationwide.com)

NRF-0456AO.3 (10/2020) For help, please call 1-877-496-1630, Opt. 3 [nraforu.com/plansponsor](http://nraforu.com/plansponsor)

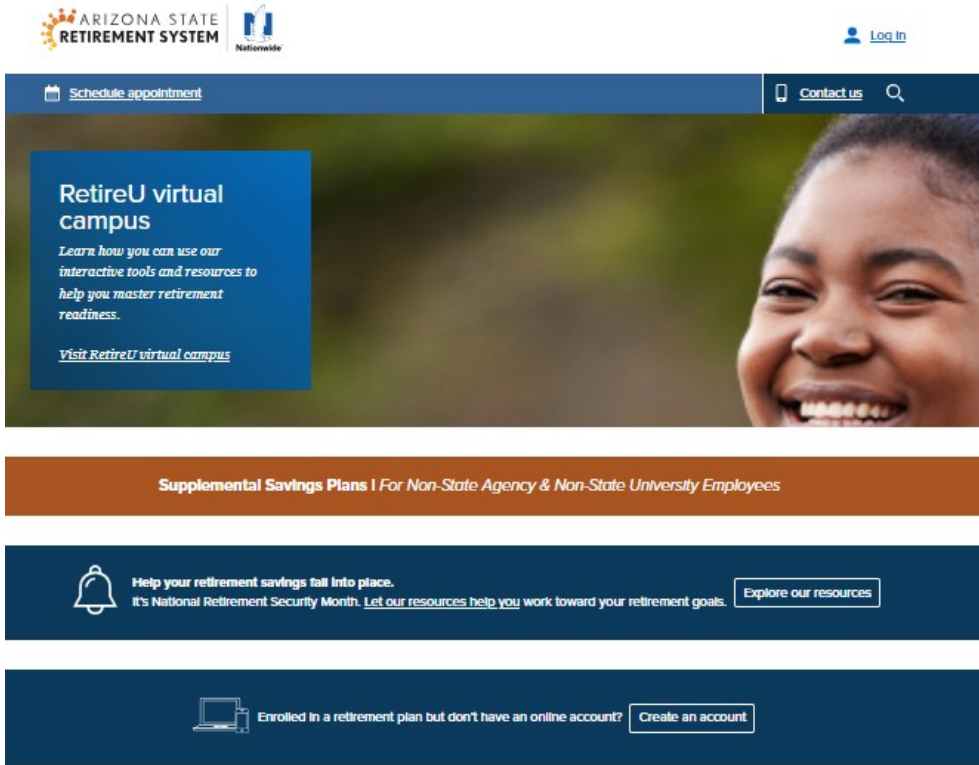
**Primary Website User Form**

**For 403(b) DocuSign adoption forms, contact:**

**Matt Gayman**  
 Phone: 602-316-4329  
 Email: [gaymanm@nationwide.com](mailto:gaymanm@nationwide.com)

**Jim Keeler**  
 Phone: 602-293-1153  
 Email: [keelerj@nationwide.com](mailto:keelerj@nationwide.com)

# ASRS Home Page



ARIZONA STATE RETIREMENT SYSTEM Nationwide

Log In

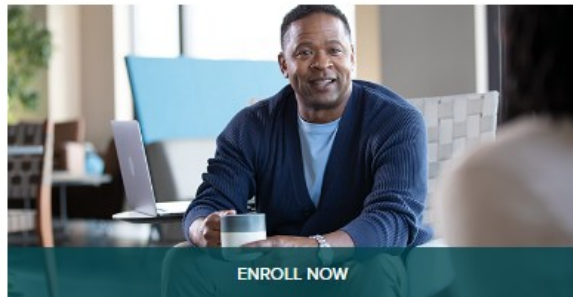
Schedule appointment Contact us

**RetireU virtual campus**  
Learn how you can use our interactive tools and resources to help you master retirement readiness.  
[Visit RetireU virtual campus](#)

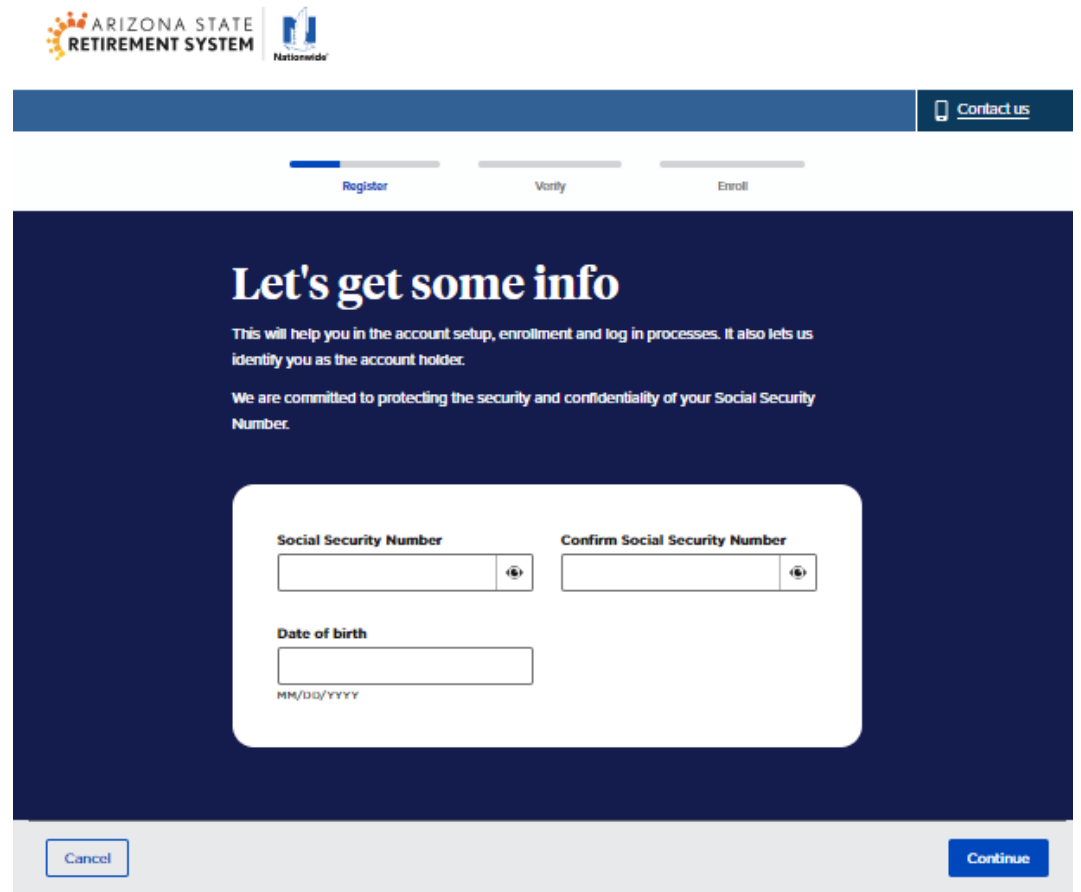
**Supplemental Savings Plans | For Non-State Agency & Non-State University Employees**

Help your retirement savings fall into place. It's National Retirement Security Month. [Let our resources help you work toward your retirement goals.](#) [Explore our resources](#)

Enrolled in a retirement plan but don't have an online account? [Create an account](#)



Enroll Now



ARIZONA STATE RETIREMENT SYSTEM Nationwide

Contact us

Register Verify Enroll

## Let's get some info

This will help you in the account setup, enrollment and log in processes. It also lets us identify you as the account holder.

We are committed to protecting the security and confidentiality of your Social Security Number.

**Social Security Number**

**Confirm Social Security Number**

**Date of birth**   
MM/DD/YYYY

Cancel Continue

# Local Retirement Specialists

- Scan this code to see your local reps contact information



## Arizona Retirement Specialists and Retirement Consultant

**John Bennett**  
602-293-1178  
j.bennett@nationwide.com

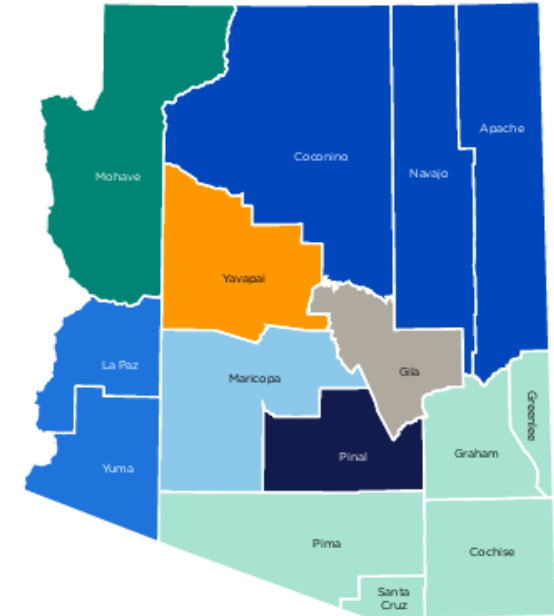
**Klark Krauter**  
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krautek@nationwide.com

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neisr1@nationwide.com

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**Nancy Feilbach**  
602-293-1156  
nancy.feilbach@nationwide.com

**Bobbi Langan**  
602-293-1168  
bobbi.langan@nationwide.com



**Internal Retirement Specialists**  
1-888-401-5272

**Personal Retirement Consultant**  
**Dan Pantoja**  
602-293-1175  
pantod1@nationwide.com

**Retirement Services Program Director**  
**Matt Gayman**  
602-316-4329  
gaymanm@nationwide.com

**Local Office**  
3300 N. Central Avenue,  
Suite 600  
Phoenix, AZ 85012  
**602-266-2733**  
**Toll-Free: 1-888-292-1401**  
www.azsrsp.com



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# Personal Retirement Consultant

**Your Nationwide Personal Retirement Consultant offers an analysis that can help you understand your income needs and whether you have the resources to meet them.**

When you retire, your financial life may seem a bit more complicated. You'll need to write your own paycheck, make sure it goes up a little each year, and make certain it can continue for 20 to 30 years of retirement. As you can imagine, this is no small task and can result in uncertainty and stress for most people as they transition from working to retirement.

Nationwide offers a Retirement Income Analysis service that can provide you with a snapshot of what your income might look like in retirement. Based on the information you provide, the analysis can give you details of your current situation and help you answer questions such as:

- How much will I need to allocate for health care?
- When should I or my spouse draw Social Security?
- What is the best pension payout option for me?
- What assets should I begin to draw from first?
- How will inflation affect my retirement income stream?
- How will my income be taxed in retirement, and what if I move to another state?

Our Retirement Income Analysis is quick and easy. Plus, you'll have the opportunity to talk with a credentialed retirement specialist who works on salary, not commission. Best of all, the service is available at no additional cost for participants of retirement plans administered by Nationwide.

Suggestions generated by the Retirement Income Analysis Service are based on information provided by the participant.



Contact your Nationwide  
Personal Retirement Consultant:  
Daniel Pantoja  
602-293-1175  
Pantod1@nationwide.com

Personal Retirement Counselors are registered representatives of Nationwide Securities, LLC., member FINRA, SIPC. DBA Nationwide Advisory Services, LLC. in AR, CA, FL, NY, TX, and WY. Securities and Investment Advisory Services offered through Nationwide Securities, LLC, member FINRA, SIPC, and a Registered Investment Advisor. DBA Nationwide Advisory Services, LLC in AR, CA, FL, NY, TX and WY. Representative of Nationwide Life Insurance Company, affiliated companies and other companies.

# Contact us

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## Participant website



[azsrsp.com/rsc-web-preauth/index](https://azsrsp.com/rsc-web-preauth/index)

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## Participant Solution Center

Phone: 1-888-292-1401

Monday through Friday 5 a.m. to 8 p.m. MT

Saturday 6 a.m. to 9 p.m.

Email: [nrsforu@nationwide.com](mailto:nrsforu@nationwide.com)

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## Local office

Phone: 602-266-2733

Monday through Friday 8 a.m. to 5 p.m. MT

3300 N. Central Ave., Suite 600

Phoenix, AZ 85012

# Your Nationwide service team

## Plan participant service team



**John Bennett**  
Retirement Specialist



**Klark Krauter**  
Retirement Specialist



**Nancy Feilbach**  
Retirement Specialist



**Ninoska Metcalfe**  
Retirement Specialist



**Randall Neis**  
Retirement Specialist



**Bobbi Langan**  
Retirement Specialist

## Plan Service Team



**Dan Pantoja**  
Personal Retirement  
Counselor



**Jim Keeler**  
Relationship Manager



**Matt Gayman**  
Program Director



**Stephanie Jepson**  
Operations/Admin