

## Salary Reduction Agreement Processing Service

Employee Online SRA Tutorial

TSA Consulting Group, Inc.

**Compliance & Administration Service Provider** 

**Client Services** 

73 Eglin Parkway NE • Fort Walton Beach, FL 32548

888.796.3786 Option 5 • <a href="mailto:sraprocessing@tsacg.com">sraprocessing@tsacg.com</a>

Dear Employee,

Twin Rivers Unified School District is pleased to announce that enhancements have been made to the 403(b) and 457(b) Salary Reduction Agreement (SRA) process as of January 6, 2021. On this date, new election requests will be submitted through a new online system. This system is provided by our Plan Administrator, TSA Consulting Group, Inc. (TSACG). The new online process allows 24-hour access for employees and does not require login credentials.

There are many benefits to the new SRA process:

- Employees simply visit <u>https://sra.tsacg.com</u> to access the online system.
- The system can be accessed 24 hours a day, 7 days a week.
- Employees can start, change, or stop a 403(b) SRA at their convenience.
- Employees receive immediate online confirmation that their request has been submitted.
- Authorized Investment Provider Agents/Representatives can assist employees.
- A list of Authorized Investment Providers is available at www.tsacg.com

Employees should review the information below to successfully utilize the online 403(b)/457(b) Salary Reduction Agreement process:

- 1. Before completing the online 403(b)/457(b) Salary Reduction process, you MUST have an account established with the Authorized Investment Provider of your choice.
- 2. Navigate to the secure website <u>https://sra.tsacg.com</u>.



- 3. <u>Note that the SRA information entered via the online system will supersede and replace all</u> <u>prior 403(b) including the amounts, investment providers, and effective dates. Any election(s)</u> <u>you want to continue must be reflected or the election will be stopped.</u>
- 4. Employee Certification You must confirm that you are eligible to participate in your employer's plan. You will also be confirming that you have established your account under your employer's plan with one of the Authorized Investment Providers. Click "Confirm" and then click "Submit".

Part 1: Employee Certification	
I certify that I am an eligible participant in my employer's plan and the information provided in conjunction with this salary reduction request is true and accurate to the best of my knowledge. Further, I certify that I have an open account with the investment provider(s) referenced herein and that it was established while working for my current employer. I understand if the account was not established while working for my current employer that my contribution (s) may not be accepted by my investment provider(s). I understand questions regarding the employer associated with my account should be directed to my financial advisor or my investment provider.	
I have read and understand the information above.* O Confirm	
* You must confirm you have read and understand the information above to continue with the Salary Reduction Agreement process.	
	I certify that I am a eligible participant in my employer's plan and the information provided in conjunction with this salary reduction request is true and accurate to the best of my knowledge. Further, I certify that I have an open account with the investment provider(s) referenced herein and that it was established while working for my current employer. I understand if the account was not established while working corm y current employer. I understand if the account was not established while working to my current employer that my contribution (s) may not be accepted by my investment provider(s). I understand questions regarding the employer associated with my account should be directed to my financial advisor or my investment provider.

Employer and Participant Information – If you have previously entered SRA information or TSACG has your demographic information archived in their system, most of your personal information will prepopulate. If your information is not currently in TSACG's system, you will be able to add your record. Depending on the information displayed, be prepared to enter the following information:

- Employer's State
- Employer's Name
- Employee's Social Security Number
- Employee's Date of Birth
- Employee's Name, Address, and Telephone Number

	Employer State California	* Employer Anderson Union High Sc	hool District, Anderson
	If you cannot find the employer's state or employe option 5 to de	r's name above, please contact the SRA P etermine if we are the TPA for the employe	rocessing department at 888-796-3786 er.
art 3: Participant's In	formation		
	Social Security Number XXX-XX-3333	AND	Date of Birth 03/05/1964
			SEARCH
	Personal Information		Contact Information
First Name     Wat     Mddle Name		* Address	1 Mainstreet USA
		* City * State	Anaheim
in date ritante	* Last Name Disney		CA
* Last Name		<ul> <li>Zip Code</li> <li>Phone Number</li> </ul>	92802
* Last Name Hire Date		Phone Number	1111111111 Ext
* Last Name	tion Date	Email	
* Last Name Hire Date	tion Date	Email * Alternate Email	programservices@tsacg.com

- 5. Salary Reduction Agreement Information You have the ability to start, change, or stop contributions. If you want to maintain an existing contribution(s), you will need to enter the information for that contribution in addition to any other changes you are making. Be prepared to enter the following information:
  - Effective Date of the contribution(s)
  - The total dollar amount per pay period for all contributions
  - The investment provider(s) to whom you would like to contribute
  - The Plan type
  - The amount of a previous contribution, if any
  - The new amount of your contribution

	Salary Rec	luction Agreement Informa	ition		
Effective Date	9 03/05/2019				
Dollars					
Total Per Pay Dollar Amount	\$ 200.00				
Total Per Pay Amount above must match S	RA Total below				
		403(b) Contributions			
Investment Provider	Contract/ Account Number	Plan Typ <del>e</del>	Previous Amount	New Amount	
Select Investment Provider		403(b) 💙 \$	0.00	\$ 200.00	Remove
Add					
			18. March 19.		
			* SRA Tol	tal \$ 0.00	
Must Equal Total Per Pay Amount					
					FINISHED

- 6. Salary Reduction Agreement Terms and Disclosures Once you have clicked *Finished*, you will be asked to read and confirm that you have read the SRA terms. You will also be asked to acknowledge the SRA disclosures.
- 7. Submitting your SRA After completing the terms and disclosures sections, you will be asked to confirm that you are not a robot, and then you can submit your SRA. TSACG will forward your contribution information to us, and you can print a copy of the SRA for your records. Providing your account(s) is established with your investment provider, no further action is required.

CONSULTING GROUP ONLINE SALARY REDUCTION AGREEMENT Welcome to TSACC's Online Salary Reduction Agreement.						
Dispersion services	START TRANSACTION					
	Your Salary Reduction Agreement (SRA) request has been received. Your SRA will be processed as soon as administratively possible based on your Employer's payroll processing schedule.					
	Click here to download your SRA forms.					
	FINISH					

Should you have any questions regarding the process, please contact TSACG's SRA Department at 888.796.3786, option 5.