WHY YOU NEED A: SUPPLEMENTAL RETIREMENT PLAN



The Florida Retirement System Pension Plan (or FRS Investment Plan) is an essential piece of your retirement plan puzzle.

However, you may find that your FRS plan, alone, does not fully meet your retirement planning needs. That is why so many FRS participants turn to an employer sponsored supplemental retirement plan such as the Vista 401(k) Plan.

Together, these plans allow you to contribute even more for retirement, moving you closer toward affording the retirement you envision.

Unlike the FRS plan, you are NOT automatically enrolled in a supplemental retirement plan such as the Vista 401(k) Plan. As a result, many employees miss out on this option. Too often FRS Pension Plan participants do not realize the need for a supplemental plan until they reach their 40's, 50's, or 60's. But do not fear! It is never to late to open a Vista 401(k) supplemental retirement account. Invest your personal maximum today and watch it grow over the remainder of your career.

CONSIDER THE LIMITATIONS OF THE FRS PENSION

The FRS pension plan normally provides a monthly benefit at retirement using this formula:

Years of Service X Percentage Value Avg. Final Compensation

12
(# of Months in a Year)

If sample numbers are plugged into the above equation, it will calculate as follows:



In the example above, the participant is expected to receive less than half of their yearly salary. That may not meet the participant's needs. This monthly benefit is further reduced by federal income tax, which varies depending on your tax bracket.

WOULD THAT BE ENOUGH TO MEET YOUR RETIREMENT NEEDS?

WANT TO INVEST IN A VISTA 401(K) SUPPLEMENTAL RETIREMENT PLAN?

Quick Enroll

- 1. Complete the fillable enrollment form on the next page
- 2. Save the completed form to your desktop
- 3. Visit https://forms.myfbmc.com/Forms/Vista401k & provide the requested information.
- 4. Attach your completed application & choose submit

-OR- Complete the fillable application return it to the Retirement Services Dept. via:

Fax: (850) 425-8345

Mail: PO Box 1878, Tallahassee, FL 32302-1878





401(k) Short Enrollment Form

(Please complete all portions of this form)

1 EMPLOYEE INFOR	RMATION						
LAST NAME	FIRST NAME		MI	SSN DOB			
ADDRESS				CITY	STATE	ZIP	
EMAIL				PHONE			
2 CONTRIBUTIONS							
Amount Per Pay Period (\$ -OR	- %)	(NOTE: 1	he minimu	ım amount is \$25.00)			
				nnual Automatic Increase by %	(not to	exceed%	
				ır 401(k) Plan. Also indicate, using percen centage. The minimum contribution amou			
3 INVESTMENT ELE	CTIONS						
 Determine the percentage of this investment option. Review your percentages to 	ensure they total 100%. I	stment options of your	choice wh	ow and following these instructions: ich represents the percentage of your co 0%, your request will not be accepted. pspectus at Vista401k.com/401k-funds/		you would like in	
American Century Inflation-Ad		%		1 Funds EuroPacific Growth		%	
American Funds Target Date F		%		nternational Index		%	
American Funds Target Date F		%		an Equity Income Fund		%	
American Funds Target Date F		%		an Large Cap Growth		%	
American Funds Target Date F		%		ett Total Return	_	%	
American Funds Target Date F		%		Insurance Guaranteed FI VI		%	
American Funds Target Date F		%		d Balanced Index	_	%	
American Funds Target Date F		%	_	d Institutional Index Fund		%	
American Funds Target Date F		%		d Mid-Cap Index Fund		%	
American Funds Target Date F		%		d Small-Cap Index Fund		%	
American Funds Target Date F		%	_	TOTAL (MUST equal 100% in whole num	nhors)		
American Funds Target Date F		%		Total (most equal 100 % in whole hun		%	
4 INVESTMENT ELE	CTIONS						
	_	•		ployment continues; provided, however tha ules and prescribed methods concerning sa			
that the School Board and Vista 40	1(k) undertake no obligation ment Plan. You have select	by making available a	salary redu	ended and shall remain in full force and effection agreement through payroll deduction Funds listed above (Section 4) and the Scho	to make co	ntributions to any	
	enrollment form. I understa			iability resulting from either my participatio bject to federal income tax until distribution			
SIGNATURE:				DATE: _			