



## MEMORANDUM

TO: All GMCS Employees  
DATE: October 20, 2021  
SUBJECT: Tax Sheltered Annuities 403(b) Plan

Gallup-McKinley County Schools has chosen the OMNI Group as the Third Party Administrator (TPA) for our 403(b) program. OMNI is an independent TPA who does not advise, sell or recommend 403(b) products. The OMNI Group's responsibility is to ensure that the District complies with Internal Revenue Service Federal Regulations.

To maintain District compliance, each employee is required to complete and submit an online Salary Reduction Agreement (SRA), whether you are Currently participating in the District's 403(b) plan, or not.

### **To Complete the Online SRA**

- Go to the [www.omni403b.com](http://www.omni403b.com) website for the online SRA.
- Select "Gallup-McKinley County Schools" then, click on "Submit".
- Under the section "Forms", click on "Salary Reduction Agreement-New On-line Version".

### **Part 1 Employee Information:**

- Part 1, fill out in its entirety including an email address at which you may be reached.

### **Part 2 Employer Information:** The School District's name will be pre-filled.

- Complete your date of hire.

### **Part 3 Contribution Information:** Select one statement that best applies to your current or desired status.

- "I do not wish to participate"- Select if you understand that you are eligible to participate in the District's 403(b) Plan, however you do wish to do so at this time.
- "Discontinue SRA(s)"- Indicate the name of the 403(B) Service Provider that you are electing to stop your deduction.
- "No Change"- Select if you are a current 403(b) participant and you are electing to continue your existing salary reduction(s) and Service Provider(s).

- “Initiate a New Salary Reduction”- Select a 403(b) Service Provider from the District’s approved Service Provider list, attached. Additionally, you will be responsible for contacting the elected Service Provider and setting up a 403(b) account with them.
- “Change a Current Salary Reduction Amount”- Indicate the new 403(b) deduction amount you desire to have withheld for your Current Service Provider.

#### **Part 4**

- Read Agreement and Acknowledgements.
- Re-Enter Social Security Number
- Click “Continue” button to go to confirmation screen.

After reviewing the confirmation information, you may change the information by clicking on the “Click Here to Change Entry Values” or continue to the bottom of the page. Re-enter your social security number for security purposes, the click “Submit request to OMNI”.

If you have any questions about the completion of this form, you may contact any of the Payroll Staff at the following extensions:

Arlene Cortez- Ext 11077  
Alfreda Vandever- Ext 11078  
Kimberly Abeita- Ext 11079

**EACH EMPLOYEE’S COMPLIANCE IS NECESSARY TO ENSURE DISTRICT COMPLIANCE**