

RESOLUTION ELECTING TO JOIN OR ENLARGE THE PUBLIC EMPLOYEES' RETIREMENT FUND (PERF) AS ADMINISTERED BY THE INDIANA PUBLIC RETIREMENT SYSTEM

WHEREAS, the Georgetown Town Council is the governing body of Town of Georgetown, a political subdivision or miscellaneous participating entity in the STATE OF INDIANA; and

WHEREAS, for the purposes of this document and interpretation of statutes governing the Public Employees Retirement Fund ("PERF"), "Plan" refers to the public employees' defined contribution plan under ("PERF My Choice: Retirement Savings Plan"). "Fund" refers to the PERF Hybrid defined benefit pension fund ("PERF Hybrid").

WHEREAS, political subdivisions may participate in the PERF My Choice: Retirement Savings Plan and choose whether employees are required to become members of the **Plan**, the **Fund** or may choose membership in either the **Plan** or the **Fund**.

WHEREAS, the governing body is fully cognizant that, if it is resolved that the governing body will place any employees in the **Fund**, the percentage of cost of gross annual payroll of covered employees has been set at 11.2 % by the actuary of the Fund, and that the Board of Trustees of the Indiana Public Retirement System directs the actuary to annually review the status of the employees covered and shall adjust the cost percentage accordingly so that the Fund will remain on an actuarially sound basis; and

WHEREAS, the governing body is fully cognizant that, if it is resolved that the governing body will require employees to enter the **Plan** or offer employees a choice between **Fund** and **Plan** membership, the governing body shall submit a resolution with the following information regarding their participation in the **Plan**:

1. Specify the political subdivision's contribution rate to the plan as a percentage of each member's compensation AND pay such contributions as required under _____; and
Such rates must be greater than or equal to zero percent (0%) and may not exceed the percentage that would produce the normal cost for participation in the fund under _____.
2. Specify the political subdivision's matching rate that is the percentage of each member's additional contributions to the plan that the political subdivision will match. A political subdivision may specify only:
 - (1) Zero percent (0%); or
 - (2) Fifty percent (50%).
3. Specify whether the political subdivision will pay any part of a member's contribution on behalf of the member;
4. Specify whether employees will automatically be enrolled in the **Fund** or the **Plan** if an eligible employee does not make an affirmative election.

WHEREAS, if such governing body participates in **Fund**, such governing body acknowledges its liability and that, pursuant to law, it and its successors in office, must appropriate sufficient funds each year to retire the employees' prior service liability in an orderly manner and also fund the current cost accruing annually.

WHEREAS, if such governing body participates in **Plan**, such governing body acknowledges its liability and that, pursuant to law, it and its successors in office, must appropriate sufficient funds each year to meet all contribution obligations required by law.

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WHEREAS, such governing body acknowledges and agrees to make a supplemental contribution to the fund in an amount necessary to pay the employer's share of the fund's actuarial unfunded liability that other employers would otherwise be required to pay because the employer's employees are becoming members of the plan instead of the fund.

WHEREAS, such governing body acknowledges and agrees, when an employee separates from service before the member is fully vested in the employer contribution subaccount, the amount in the employer contribution subaccount is forfeited as of the date the member separates from service and that such forfeited amounts will be utilized according to state and federal law.

WHEREAS, the General Assembly of the State of Indiana has authorized covered employers to pick-up all, or part, or none of members' mandatory contributions.

NOW THEREFORE, BE IT ORDAINED by the governing body of the Town of Georgetown in the State of Indiana:

SECTION ONE: The Town elects to become a participating political subdivision or miscellaneous participating entity in the Public Employees' Retirement Fund by including classes of employees as stated below in the coverage under Chapter 340 of the Acts of 1945, and all Acts amendatory thereof and supplemental thereto.

SECTION TWO: The Town of Georgetown elects to offer the following retirement plan(s) under the Public Employees' Retirement Fund:

1. ☒ Only PERF Hybrid for all PERF-eligible employees
2. ☐ Only PERF My Choice for all PERF-eligible employees
3. ☐ A choice between PERF Hybrid and PERF My Choice for all eligible employees, based upon the employee's previous participation election with the employer in the **Fund or Plan**.
4. ☐ PERF Hybrid only to **certain classes of employees** and PERF My Choice: Retirement Savings Plan to **certain classes of employees** as set forth in an attached document.
()
5. ☐ A choice between PERF Hybrid and PERF My Choice to **certain classes of eligible employees** as established in the attached document () based upon the employee's previous participation election with the employer in the **Fund or Plan**.

NOTE: If the employer wants to offer a choice for the employer's unit between Hybrid and My Choice to a certain class and require everyone else to participate in either My Choice or Hybrid as the employer decides, then Employer should select both Items 4 and 5 and describe, in detail on the attached document (), the class(es) of employees impacted and which option will apply to each class of employee in addition to any other pertinent information.

If PERF My Choice in any format is selected above; please indicate whether PERF Hybrid retirees will be allowed to participate in PERF My Choice. If one of the checkboxes below is not selected, the default will be that no PERF Hybrid retirees will be allowed to participate in PERF My Choice.

- ☐ Yes, PERF Hybrid retirees will be allowed to participate in PERF My Choice
- ☐ No, PERF Hybrid retirees will **not** be allowed to participate in PERF My Choice

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SECTION THREE: If an employee is eligible to choose membership in either the Fund or the Plan, and that employee fails to make an election within the period set forth in _____ and _____, said employee will be automatically and irrevocably enrolled in the following plan:

- ☐ PERF Hybrid
- ☐ PERF My Choice: Retirement Savings Plan

SECTION FOUR: That, effective as of the 1 _____ day of January _____, 2026, this participating political subdivision or miscellaneous participating entity shall pick up **all or** 0 _____ % of the mandatory contribution for **all or all** covered employees

employees who are members of PERF. Said employees shall not be entitled to choose to receive the contributed amounts directly instead of having them paid by the employer to the specified pension fund.

CHOOSE EITHER 4A OR 4B

- ☐ **4A. New Money Pick-Up** – That the above contributions, even though designated as employee contributions for state law purposes, are being paid by the employer in addition to regular compensation as a supplemental contribution that is separate and distinct from the employees' current or future compensation, and in lieu of contributions by the employees. Such contributions will not be included in the gross income of the employees for any tax reporting purposes, such as for federal, state, or local income tax withholding, or FICA taxes, until distributed either through a pension benefit or a lump sum payment. These contributions are made on a pre-tax basis and are paid by the employer on behalf of the employee.
- ☐ **4B. Salary Reduction Pick-Up** – That said contributions, even though designated as employee contributions for state law purposes, are being paid by the employer via a reduction in salary. Such contributions will not be included in the gross income of the employees for certain tax reporting purposes, that is, for federal, state, or local income tax withholding, until distributed either through a pension benefit or a lump sum payment. Such contributions will be included in the gross income of the employees for FICA taxes when they are made. These contributions are made on a pre-tax basis but are paid by the employee through a payroll deduction.

SECTION FIVE: The _____, as a participating political subdivision, offering the Plan, agrees to pay a contribution rate to the Plan as a percentage of each member's compensation in the amount of _____. This amount may range from 0% to the percentage that would produce the normal cost for participation in the fund under _____.

SECTION SIX: The _____, as a participating political subdivision, offering the Plan, agrees to pay a matching rate in the amount of:

- ☐ Fifty Percent (50%)
- ☐ Zero Percent (0%)

which is the percentage of each member's additional voluntary contributions to the Plan that governing body will match.

SECTION SEVEN: The positions listed on an attached document are declared covered by the Fund, the Plan, or Both as indicated in the attached document.

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SECTION EIGHT: It is hereby declared that none of the classifications or positions specified in Section Three are compensated on a fee basis or of an emergency nature, or in a part-time category.

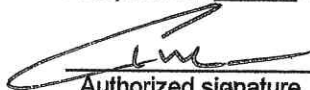
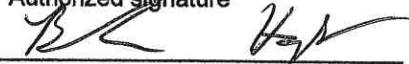
SECTION NINE: The active participation membership of the Town of Georgetown
(Name of Political Subdivision) shall begin January 1, 2026

SECTION TEN: This resolution shall be in full force and effect from date of passage and upon approval of the Board of Trustees of the Indiana Public Retirement System, except that active participating membership shall begin on the date set forth in Section Nine.

SIGNATURES

Provide as many authorized signatures as required by your unit.

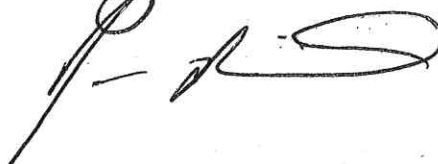
Adopted this 17th day of NOVEMBER, 2025

	<u>TOWN COUNCIL PRESIDENT</u>	<u>CHRIS LOOP</u>
Authorized signature	Title	Printed Name
	<u>Town Council Vice President</u>	<u>Brandon Hopf</u>
Authorized signature	Title	Printed Name

On Behalf of Town of Georgetown

 Town Council Member Matt Nolan

 Town Council Member DOUG WACKER

 TOWN COUNCIL MEMBER JASON PARRISH

APPENDIX A

☐ **Fire Chief** who is ineligible for membership in the 1977 Police Officers' and Firefighters' Pension and Disability Fund as provided in _____ because he/she has a waiver as described in _____

☐ **Police Chief** who is ineligible for membership in the 1977 Police Officers' and Firefighters' Pension and Disability Fund as provided in _____ because he/she has a waiver as described in _____

** Per _____, political subdivisions may specify departmental, occupational, or another definable classification of employees who are required to become members of PERF Hybrid or PERF My Choice or have an option to select between the two. If necessary, attach all additional explanation and/or documentation material to this form when submitting it to INPRS.*

SIGNATURE

 TOWN COUNCIL PRESIDENT CHRIS LOOP
Authorized signature Title Printed Name

RESOLUTION ELECTING TO JOIN OR ENLARGE THE PUBLIC EMPLOYEES' RETIREMENT FUND (PERF) AS ADMINISTERED BY THE INDIANA PUBLIC RETIREMENT SYSTEM. *(Continued)*

APPENDIX B

Complete if applicable:

Political subdivisions joining PERF and selecting My Choice for their employees, must specify whether or not they want to give years of participation credit for employees' prior years of service with them as an employer. If they do, the employer must provide a list of employees with the employees' prior years of service and date of hire with them as an employer prior to them joining My Choice. If additional pages are needed, attach them and label them with the unit name.

No	Prior service credit	Employee name	Yrs of service	Date of hire
1	☐ Yes ☐ No			
2	☐ Yes ☐ No			
3	☐ Yes ☐ No			
4	☐ Yes ☐ No			
5	☐ Yes ☐ No			
6	☐ Yes ☐ No			
7	☐ Yes ☐ No			
8	☐ Yes ☐ No			
9	☐ Yes ☐ No			
10	☐ Yes ☐ No			
11	☐ Yes ☐ No			
12	☐ Yes ☐ No			
13	☐ Yes ☐ No			
14	☐ Yes ☐ No			
15	☐ Yes ☐ No			
16	☐ Yes ☐ No			
17	☐ Yes ☐ No			
18	☐ Yes ☐ No			
19	☐ Yes ☐ No			
20	☐ Yes ☐ No			
21	☐ Yes ☐ No			
22	☐ Yes ☐ No			

Attach all additional explanation and/or documentation material to this form when submitting it to INPRS.

SIGNATURE

Authorized signature

Title

Printed Name