



Payroll Deductions: *Benefits Website Instructions*

OPEN ENROLLMENT

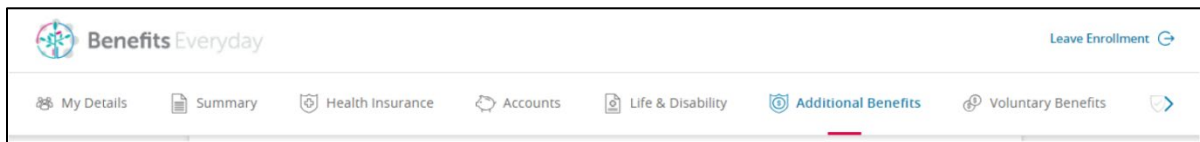
Benefits-eligible Associates can contribute to the Ross Cares Fund through recurring payroll donations. Automatic deductions will repeat in equal installments each pay period. You can adjust the size of the donation at any time. The minimum payroll deduction per pay period is \$1.

Donations to the Ross Cares Fund are tax deductible, however, donations are deducted from your paycheck after taxes. You will need to claim your tax deduction when you file your taxes. The pledge form (Step 4), along with a copy of a paystub or W-2, can be used to claim the deduction when you file your taxes.

Use these instructions to start, stop, or change your payroll donations through the benefits enrollment website **during the Open Enrollment period**. The changes you make will be **effective January 1**.

Instructions

1. Log in to your account at rossstores.myplansconnect.com.
2. Click "Get Started" and then "Start Open Enrollment" to access Open Enrollment elections. You will be prompted to complete the information in the "Get Started" tab.
3. Click on "Additional Benefits" and scroll to the Ross Cares Fund section.



4. Enter the dollar amount that you would like to donate annually, starting January 1. Click "Calculate" to view the per pay period cost, and then click "Select." Note: both steps are required to make your election.

Note: *The total donation amount will be divided evenly among your regular paychecks for the calendar year. For example, if you enter \$120, you will donate \$4.62 (bi-weekly) or \$5.00 (semi-monthly) for each pay period. You can adjust this amount at any point in the year.*

IMPORTANT: This pledge form should be printed and should be retained for tax filing purposes.

Ross Cares Fund

Currently Selected

Ross Cares Fund: Supporting Associates in Need

The Ross Cares Fund allows you to support other Ross Associates in their time of need. The fund provides emergency relief for Associates facing a financial crisis as the result of a qualified disaster or personal hardship.

- Minimum contribution: \$26.00
- Maximum contribution: \$50,000.00

Desired Amount

\$120.00

Per Pay Period Cost

\$4.62

Annual Cost

\$120.00

[Calculate](#)

Currently Selected

[Waive](#)

BENEFITS

- Make recurring donations through your paycheck.
- Click "Calculate" to view the per pay period cost and "Select".
- Donations are tax-deductible. Ross Cares Fund is a component fund of E4E Relief LLC. E4E Relief LLC does not provide goods or services as whole or partial consideration for contributions.
- Adjust contribution amounts at any time by revisiting this website. Donations already made cannot be refunded.
- IMPORTANT:** This pledge form should be printed and retained for tax-filing purposes.

LEARN MORE

[Ross Cares Fund website](#)

5. After you have finished making your benefit changes, click "Complete Enrollment" to review your benefit elections.

 Benefits Everyday

[My Details](#)

[Summary](#)

[Health Insurance](#)

[Accounts](#)

[Life & Disability](#)

[Additional Benefits](#)

[Voluntary Benefits](#)

[Complete Enrollment](#)


6. Scroll to the bottom of the page and click the "Yes, I accept" box to accept the Terms and Conditions. Then, click "Complete Enrollment" to submit your elections.

IMPORTANT: You must click "Complete Enrollment" for your changes to be saved.

Terms and Conditions

☒ Yes, I accept.

Carefully review your benefit elections. When you are satisfied with your selections click Yes, I accept and Complete Enrollment. By clicking Complete Enrollment, you hereby: (1) request to enroll in the benefit option(s) selected under the Ross Stores Benefits Program; (2) affirm that you will abide by the provisions set forth in the Summary Plan Description and Plan Document (available on the enrollment website); and authorize Ross Stores to make payroll deductions for any required contributions from your earnings as permitted by applicable federal or state law. You also acknowledge that the information you have provided is accurate and complete to the best of your knowledge. This information is open to investigation and verification, and is subject to the eligibility provisions of the plans. If you add a dependent that requires verification, your dependent coverage will be "pending" until you submit proof of eligible dependents. In these situations, you may owe Ross Stores retroactive deductions after all documents are submitted and verified. Ross Stores will automatically take additional deductions from your paycheck to bring your payment up-to-date. You further acknowledge that if any of this information is found to be false or misleading, you may be required to reimburse the plan for monies spent as a result of any false or misleading statements, and subject to discipline, up to and including dismissal. You further understand that you cannot make changes to your coverage elections during the year unless you have a qualified status change. Please enroll as soon as possible to ensure your portion of the benefit plan costs are deducted timely as you are responsible for your share of the plan costs starting from the coverage effective date.

 **IMPORTANT:** You must keep your records up-to-date. Immediately inform your Store Manager or HR Business Partner if your mailing address or other personal information changes

[Back](#)

[Complete Enrollment](#)

7. On the confirmation page, click "Print my enrollment summary" to save a copy of your Confirmation Statement for your records.

Enrollment Submitted

For 2026 Open Enrollment, active Associates with a Ross email address will receive a link to view their 2026 elections online after open enrollment has ended; all other Associates will be mailed a Confirmation Statement to the address on file. You can also save a copy of your enrollment summary with the link below. Please save a copy of this statement for your records. For elections not related to Open Enrollment, a Confirmation Statement will be mailed to the address on file.

[Dependent Verification Instructions](#)

Event type: **Open Enrollment | January 1, 2026**

[Print my enrollment summary](#)



Enroll by Phone

You can also call the Ross Stores Benefits Service Center to enroll or change your deductions to the Ross Cares Fund. Dial 1-800-752-7534, Monday through Friday, between 6:00 AM and 6:00 PM Pacific Time. Press 0 to speak to a customer service representative.