

Prior Retirement Plan Provider and Plan Information

To ensure proper and timely processing, please complete all fields below. You must include a copy of a statement from your prior retirement plan provider.

Prior retirement plan provider name

Prior plan account number _____

Prior retirement plan provider address

City _____ State _____ ZIP code _____

Prior retirement plan provider daytime telephone number

_____-_____-_____

area code

Previous retirement plan name _____

Is any portion of this rollover attributable to designated **Roth** contributions? Yes No
Only Roth 401(k) and Roth 403(b) contributions are acceptable.

What type of plan are you rolling **FROM**?

- 401(a) 401(k) 403(a) 403(b) IRA* Governmental 457(b)
 SEP IRA Simple IRA - Date of first contribution _____

*A Conduit IRA or Traditional IRA with pre-tax money only.

Please indicate the approximate amount of rollover/transfer:

Total Account Value **OR** \$ _____, _____ .00

Rollover Allocation Information

If you have *not* made a rollover investment election by the time your rollover is processed, your rollover contribution will be invested in the default investment option selected by your plan, **otherwise** it will be invested according to your current rollover investment allocation.

Any Roth dollars will be invested in the same allocation as your Roth contributions (if applicable).

If you wish to change your investment elections or transfer funds, you can do so by calling Empower toll-free at the number on the first page or go online at **www.prudential.com/online/retirement**.

Required Information

In order for your rollover to be approved, please be sure to submit proof to ensure the assets are acceptable and the plan satisfies the Code Sections indicated.

You will be required to provide the following documentation from the distributing retirement plan or IRA.

- A copy of a statement from the distributing plan or carrier that includes the plan name and identifies the type of plan (i.e., 401(a), 401(k) etc.),

OR

- A letter from the distributing plan or plan representative stating the plan is qualified under the applicable section of the Internal Revenue Code, or a copy of the plan's most recent determination letter or opinion letter.

Important information continued and signature required on the following page

Social Security Number _____

Distribution Information

I understand that if I am required minimum distribution age or older, the distributing carrier is required to process the Distribution before transferring the funds to Empower. Therefore, if I meet these requirements, and have not already done so, I understand that I need to direct the prior carrier to distribute my Distribution prior to processing this rollover.

Disclosures

If your transaction includes **Roth contributions**, your current provider or custodian needs to provide the amount of the **Roth contributions** along with the check, otherwise the entire amount will be applied as before-tax. Rollover amounts from 401(a) or 401(k) plans that include **after-tax** dollars are **not** allowed. If your rollover amount is from a North Carolina Retirement System, select the box for 401(a). **If you have not made a rollover investment election by the time your rollover is processed, your rollover contribution will be invested in the same allocation as your employee contributions. Any Roth dollars will be invested in the same allocation as your Roth contributions (if applicable).** If you wish to change your investment elections or transfer funds, you can do so by calling Empower toll-free at the number on the first page or go online at www.prudential.com/online/retirement. *For Roth rollover contributions, a letter from the prior plan's administrator that provides (1) the amount of Roth contributions (basis) being rolled over, and (2) your "Roth Start Date." If Empower does not receive your Roth start date or year, we will default it to current day.

The law requires that any withdrawals made of after tax monies from a qualified plan must have a proportionate amount of earnings attached to them. This means that if you happen to have after tax contributions that were made to your account in 1986 or before, you can take a withdrawal at a future date of just the principal amount and you will not be required to include earnings. Any after tax contributions made after that date you will be required to take a proportionate amount of earnings. Your prior record keeper should have been tracking your pre-1987 and post-1986 after tax contributions.

Please note: If Empower receives a Rollover Acceptance Form that does not specify the breakdown of your pre-1987 and post-1986 after tax contributions, the monies will be deposited as post 1986 after tax monies and will have a proportionate amount of earnings attached to them for any future withdrawals until such time as you provide documentation to prove otherwise. If Empower does not receive your Roth start date or year, we will default it to current day.

Your Authorization

I, the Plan member, certify that all information on this form is accurate. I also certify that this rollover contribution was distributed from a plan intended to satisfy the requirements of I.R.C. § 401(a), 401(k), 403(a), 403(b), 457 (governmental only), or an IRA established pursuant to IRC § 408 (pre-tax money only) and, which to the best of my knowledge, does satisfy them.

I additionally certify that this distribution can be rolled over into my account with Empower because it:

- 1) is not one of a series of substantially equal periodic payments (not less frequently than annually) distributed over my life or life expectancy (or the joint lives [or joint life expectancies] of me and my beneficiary) or over a period equal to or greater than 10 years,
- 2) was received by me not more than 60 days before the date of the rollover to the Plan,
- 3) would be includible in gross income if not rolled over in its entirety, unless after-tax or Roth contributions, which have been previously taxed.
- 4) does not represent a Required Minimum Distribution, a hardship distribution, systematic annuity payments, or a corrective distribution (for example: corrections of elective deferrals or elective contributions, etc.), and
- 5) was distributed to me as an employee (not as a beneficiary).

Empower will not accept responsibility for the actions of your distributing plan.

 X _____ Date _____
Member's/Account Owner's signature

Social Security Number _____