

Colorado PERA 401(k) Plan Rollover

ING Attn: Colorado PERA 401(k) Plan PO Box 5599 Boston, MA 02206-5599 1-800-759-PERA (7372) www.copera.org

PERA's 401(k) Plan can accept rollovers of tax-deferred (or pre-tax) money from qualified 401(a), 401(k), 401(c) Keogh, governmental 457(b), 403(a) and 403(b) plans (you must be eligible to take a distribution from the plan), conduit IRAs, and traditional IRAs. After-tax money can be rolled over only if it originated in a 401(a) or 403(a).

You are responsible for obtaining and submitting the verification to ING, proving the rollover is acceptable under the Internal Revenue Code. The rollover will not be accepted if the verification is incomplete. Send the completed form, along with the check, to ING. The check should be issued payable to The Colorado PERA 401(k) Plan.

When the required verification has been submitted and accepted by the Plan, your rollover will be invested according to your current investment mix or the default fund if you are not currently enrolled in PERA's 401(k) Plan.

Do	not	use this form to transfer i	money to purch	ase or reinstat	e service cre	ait.		
Pa	rtici	pant Information:						
Υc	our	SSN						
Na	me_	Last				_ Telephone ()	
		Last	First		MI			
Ad	dres	S						
1.	Which rollover are you requesting? (Check one):							
		paragraph above). If my lf my check is from an IF understand that this con	y check is from a RA, I will have the apleted form and rollover. My pe	another plan, I ne financial ins d a copy of the ersonal check	will have tha titution (IRA) check sent to payable to Th	it plan's administr custodian) comple to me should be s ne Colorado PERA	submitted to ING and ING A 401(k) Plan is enclosed.	
		check payable to The Cocustodian complete sect of my rollover check, the I authorize my previous	olorado PERA 4 tion 3. I unders en ING will appr employer, retire	401(k) Plan. I tand that this foove or deny m	will have that orm must be y rollover.	plan complete se submitted to ING	ove) will issue my rollover ection 2, or have my IRA along with or in advance offormation requested	
		below to complete my ro	ollover.					
		Participant Signature				· · · · · · · · · · · · · · · · · · ·	Date	
2.	Plan Verification for 401(a), 401(k), 401(c), Governmental 457, 403 (a), and 403(b) Plans (To be completed by your previous employer or retirement plan.)							
	car forr	The above individual is requesting that PERA's 401(k) Plan accept a rollover from your plan. Before this request can be approved, we need verification of the status of your plan. Please complete this section and return this form to ING, along with or in advance of the rollover check. The types of acceptable plans are listed in the first paragraph on this form. Please consider this form a letter of acceptance.						
	Na	me of employer's retireme	ent plan					
	Add	dress				· · · · · · · · · · · · · · · · · · ·		
		ertify that this is a Section plan's IRS Favorable De			ternal Reven	ue Code. Or, I ha	ave attached a copy of	

	What event makes this account eligible for rollover? (Termination, reaching age 59½, etc.)					
	How much after-tax money was contributed prior to 1987? \$ How much after-tax money was contributed in 1987 and after? \$					
	Approximate date of distribution					
	Trustee (Custodian) who will be issuing the check					
	Your company's name Telephone ()					
	Authorized Signature Title Date					
3.	IRA Verification (To be completed by your IRA custodian.)					
	The participant named in section 1 is requesting that PERA's 401(k) Plan accept a rollover from an IRA held by your institution. Before we can accept this request, we need verification of the IRA's purity. Please complete the following section and return this form to ING.					
	Name of IRA custodian					
	Type of IRA (traditional, conduit, etc.)					
	Approximate amount of the rollover to PERA's 401(k) Plan (current balance) \$					
	Approximate date of the distribution					
	This IRA contains tax-deferred money: ☐ Yes ☐ No ☐ Unknown					
	This account contains after-tax money: ☐ Yes ☐ No ☐ Unknown					
	Authorized Signature Date					
	TitleTelephone()					

Please return this completed form to:

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