Seattle City Employees' Retirement System

For office use only.
Retirement number:

Contribution Rollover Request

PART I — To be completed by the member

Use this form to roll over contributions from another qualified plan to the Seattle City Employees' Retirement System for the purchase of retirement service credit as part of a qualified buy back. Please help us to serve you by printing legibly. ***Note****:*

- *Only direct rollovers to the plan are permitted*
- *Rollover checks must be payable to: Seattle City Employees' Retirement System*
- *This completed form must be returned or we cannot accept the rollover*

As a member in Seattle City Employees' Retirement System, I hereby make a rollover contribution in the cash amount of:

$_____

The rollover contribution is eligible for rollover and is from a source that satisfies the requirements of one of the following sections of the Internal Revenue Code of 1986, as amended.

Check which type of plan the rollover amount will come from:

❒ 403(a)
❒ 403(b)
❒ 457 Governmental Plan
❒ 408(a) IRA – Traditional
❒ 401(a) defined benefit plans
❒ 401(a) defined contribution plans

If the rollover contribution is from an IRA, I certify the above amount does not include any amounts that have previously been taxed.

Print your name:_____

Member signature:_____

Last four digits of your Social Security number:_____Date:_____

Seattle City Employees' Retirement System, Kenneth J. Nakatsu, Interim Executive Director
720 Third Avenue, Suite 900, Seattle, WA, 98104
Tel: (206) 386-1293 Toll free: (877) 865-0079 Fax: (206) 386-1506
www.seattle.gov/retirement retirecity@seattle.gov

PART II — To be completed by the member's former plan or IRA

As custodian or trustee of the above-named member's IRA or plan administrator of the above-named member's eligible employer plan, please provide the following information and sign the form below:

Plan or IRA name:_____

Gross amount of distribution: $_____Taxable amount of the distribution: $_____

Non-taxable amount of the distribution: $_____

If the distribution is from an employer plan, does it qualify as an "eligible rollover distribution" under Section 402(c) of the Internal Revenue Code?

❒ Yes ❒ No

I certify that the above-named plan or IRA is intended to satisfy the requirements of the Internal Revenue Code for the plan type checked by the member above, and I am not aware of any plan or IRA provision or operation that would result in its disqualification.

Date:_____

Printed name of custodian/trustee or plan administrator:_____

Signature of custodian/trustee or plan administrator:_____

Please mail rollover checks to:

City of Seattle, Retirement
FAS Treasury Cashiers
P.O. Box 94766
Seattle, WA 98124-7066