

# IN-PLAN ROTH ROLLOVER REQUEST

Account Number	Sponsor Name
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## PARTICIPANT INFORMATION (Please print)

Name (First, Middle, Last)		Social Security No.
Street Address		
City	State	Zip Code
Legal State of Residence _____		
If the Legal State of Residence is not provided, Empower Retirement will use the state provided in the Mailing Address for state tax purposes.		
Phone Number	E-mail Address	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Not Married or Legally Separated		
<b>Interested in receiving text message updates on your request?</b>		
If so, then check the box below to begin the process to subscribe to the "MMDIST" automated text messaging service, and provide us with your mobile phone number. You will receive an initial text message from Empower Retirement, respond YES to "opt-in" and receive recurring SMS alerts from our automated text messaging service for this transaction. Standard message and data rates may apply. You may cancel this optional subscription at any time. Review our Terms of Use at <a href="https://www.empower-retirement.com/sms-texting-terms-and-conditions">https://www.empower-retirement.com/sms-texting-terms-and-conditions</a> , and our Privacy Policy at <a href="https://www.empower-retirement.com/privacy">https://www.empower-retirement.com/privacy</a> .		
<input type="checkbox"/> Send me text message updates on my request. Mobile #: <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>		

## TO BE COMPLETED BY PLAN ADMINISTRATOR:

For Non-Elapsed time plans, has the Participant worked 1000 hours during this plan year?  Yes  No

## ROLLOVER OPTIONS

SELECT ONE REASON FOR REQUEST:  In-service withdrawal  Termination/Date \_\_\_\_\_  Retirement/Date \_\_\_\_\_

ROLLOVER AMT: \$ \_\_\_\_\_ or \_\_\_\_\_% to the Roth rollover source under the Plan. If you elected a dollar amount and the amount available is less than requested, your account will not be processed. Only vested money can be withdrawn.

SELECT SOURCES:  All  Pre-tax 401(k)  Match  Other employer  Voluntary after-tax  Rollover

An in-plan Roth rollover is a transaction which may create a taxable event. Please note that the conversion will be processed in an investment neutral manner and your fund holdings will not change as a result of the transaction. In addition, please be aware that a conversion from "All" will be processed based on the plan's distribution hierarchy and a conversion where multiple sources are elected will be pro-rated across all selected sources.

## VOLUNTARY INCOME TAX WITHHOLDING

If withholding is elected as a percentage of distribution, the withholding will be calculated based on the account value determined by the stock market's closing one business day prior to the withholding. Taxes withheld may be subject to 10% early distribution tax at a later date based on certain requirements. I have read the Special Tax Notice and I choose:

- Federal withholding \$ \_\_\_\_\_ or \_\_\_\_\_%.
- State withholding \$ \_\_\_\_\_ or \_\_\_\_\_%.
- No federal tax withholding
- No state tax withholding

**If you have elected to roll over 100% of your eligible balance to an in-plan Roth source, no withholding will be allowed.**

Generally, the taxable amount of a distribution rolled over for an in-plan rollover is includible in gross income in the taxable year in which the distribution occurs; however, there is special rule for distributions made in 2010 that are rolled over in an in-plan Roth rollover. In this case half the taxable amount is included as gross income in 2011 and half is included in 2012 unless you elect to include the full taxable amount in gross income in 2010. Please consult with your tax advisor or the IRS if you have any questions concerning tax withholding.

**SIGNATURES**

I understand that I have a right to a 30-day election period. I further acknowledge that I am waiving the 30-day election period by making an affirmative election on this distribution form. I understand there may be a charge deducted from my account for each distribution processed and if all required items are not completed on this form, payment will be delayed. For more information about fees, visit the retirement web portal at [www.RetireSmart.com](http://www.RetireSmart.com). Select the Current Retirement Statement at the top of the Statements/Required Disclosures page.

\_\_\_\_\_  
Payee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Plan Administrator

\_\_\_\_\_  
Date

RS-06375-03

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