

Instructions

- Complete this form in its entirety.
- Mail or fax this completed form and documentation as instructed below.
- Contact your previous recordkeeper or plan sponsor to initiate a disbursement from your previous account to Prudential.

**Form and
Check
Direction**

This form should be used to place assets into your 403(b) plan with Prudential. **Please complete using blue or black ink.**

Keep a copy of this form for your records and send the completed form and check to the following address. All checks, whether sent by you or your prior provider, should be payable to 'Prudential for the benefit of (participant's name)' and should also include the last 4 digits of the individuals social security number. Please mail to the following address.

Prudential
30 Scranton Office Park
Scranton, PA 18507-1789
Fax: 1-866-439-8602

For Assistance
Call 1-855-444-2832
Say "consolidate"

Note: Receipt of the completed form is required within 30 days of the receipt of check. Failure to send us the completed form may cause the check to be returned.

About You

To ensure proper and timely processing, please complete all fields below.

Prudential Plan number	Sub plan number	Facility
<u>0</u> <u>0</u> <u>5</u> <u>0</u> <u>1</u> <u>1</u>	<u>0</u> <u>0</u> <u>1</u> <u>0</u> <u>2</u> <u>2</u>	NYC HEALTH + HOSPITALS _____
Social Security number	Daytime telephone number	
_____-_____-_____	_____-_____-_____	
	<small>area code</small>	
First name	MI	Last name
_____	_____	_____
Address		

City	State	ZIP code
_____	_____	_____
Date of birth	Gender	Original date employed
<u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>	<input type="checkbox"/> M <input type="checkbox"/> F	<u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>
<small>month day year</small>		<small>month day year</small>

**Distributing
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.

Distributing provider name

Prior retirement plan provider address

City

State

ZIP code

Daytime telephone number

_____-_____-_____

area code

Plan Sponsor name (If different from current plan sponsor) _____

Distributing plan account number _____

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

- 401(k) 401(a) 403(a)
 403(b) IRA Governmental 457(b)
 Simplified Employee Pension (SEP) Plan

Please liquidate and rollover/transfer:

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

If you selected a plan type other than 403(b) above, proceed directly to the **Rollover** section.

**Rollover
Allocation
Information**

If you **are enrolled** in the Plan and 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, **otherwise** it will be invested according to your current allocation. If you **are not enrolled** in the Plan, your rollover contribution will be invested in the default investment option selected by your Plan.

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 (if allowed under your plan), you can do so by calling Prudential toll-free at the number on the first page or go online at

www.prudential.com/online/retirement.

! Please carefully read the descriptions below and select the appropriate ONE for your situation.

Contract Exchange Information

Contract Exchange (formerly known as 90-24 transfer): Can be completed when you want to move assets from your 403(b) account at another investment provider to your 403(b) account with Prudential Retirement. **Both accounts must be part of the same plan.**

I have established a 403(b) plan with Prudential and hereby request an exchange of all or a portion of my 403(b) assets with another investment provider to my account at Prudential. Both accounts are part of my same employer's plan.

If your current provider is not sharing information with Prudential, please have them include the following with the check:

- Account value, if any, as of December 31, 1986
- Any amounts subject to 403(b)(7) restrictions
- Account value, if any, as of December 31, 1988 not subject to in-service distribution restrictions
- Contributions received after December 31, 1988 (for hardship withdrawal purposes)

Plan to Plan Transfer

403(b) plan to 403(b) plan Transfer of Assets: Can be completed to **move assets from one 403(b) plan to a separate 403(b) plan** (i.e. you have changed employers and would like to move your 403(b) account from your former employer to your 403(b) plan with Prudential Retirement, or your employer has elected to freeze or terminate their existing 403(b) plan and start a new 403(b) plan.)

I have established a 403(b) plan with Prudential and hereby request you to transfer all or a portion of either 1) my *former employer's* 403(b) plan account, or 2) my current employer's former 403(b) plan account to Prudential Retirement.

In order for us to accept the check and complete the request, please be sure to submit proof to show the assets are from a 403(b) plan. Acceptable documentation includes:

- A copy of a statement from the prior plan provider that includes the plan name and indicates that it is a 403(b) plan, or
- A letter from the prior plan provider stating it is a 403(b) plan.

If your current provider is not sharing information with Prudential, please have them include the following with the check:

- Account value, if any, as of December 31, 1986
- Any amounts subject to 403(b)(7) restrictions
- Account value, if any, as of December 31, 1988 not subject to in-service distribution restrictions
- Contributions received after December 31, 1988 (for hardship withdrawal purposes)

Rollover

Direct Rollover: Can only be completed by a participant who has had a distributable event (i.e. attaining age 59½, separation from service, etc.) who elects to directly roll those eligible assets into a current 403(b) plan with Prudential Retirement. In addition to completing this form, the financial institution that holds your other plan account may also require you to complete a distribution form. **Note:** Not all plans accept rollovers; if needed, consult with your Plan's representative for assistance.

I have reached a distributable event and have established a 403(b) plan with Prudential and hereby request you to directly roll over my assets from my eligible retirement plan into my account with Prudential.

In order for us to accept the check and complete the rollover, please be sure to submit proof to ensure the assets are acceptable and the plan satisfies the Code Sections indicated. Acceptable documentation includes, but is not limited to one of the following:

- A copy of a statement from the prior 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.

I certify that this distribution can be rolled over into my account with Prudential 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, 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) or as a surviving spouse.

Minimum Distribution Information

I understand that if I am required minimum distribution age or older, the distributing provider is required to process the Required Minimum Distribution before these funds are rolled over to Prudential. I further understand that I need to direct the prior provider to distribute my Required Minimum Distribution prior to processing the rollover.

Note: This is not applicable when requesting a contract exchange or a plan to plan transfer.

Disclosures

If your transaction includes **after-tax dollars and/or Roth contributions**, your current provider or custodian needs to provide the amount of the **after-tax dollars and/or Roth contributions** along with the check, otherwise the entire amount will be applied as before-tax. Not all plans accept rollovers/transfers of **after-tax and/or Roth**. *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.”

The law requires that any withdrawals made of after tax monies from a retirement 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 Prudential does not receive 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 proportionate amount of earnings attached to them for any future withdrawals until such time as you provide documentation to prove otherwise. If Prudential does not receive your Roth start date or year, we will default it to current day.

Your Authorization

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

Please note that if you live in one of these states (**Alabama, Alaska, Arizona, Arkansas, Colorado, Connecticut, Florida, Hawaii, Iowa, Kentucky, Louisiana, Maine, Maryland, Mississippi, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Oregon, Rhode Island, South Dakota, Texas, Utah, Vermont, Virginia, Washington, West Virginia or Wisconsin**), the following question must be answered. Failure to answer this question will result in processing delays of your transaction.

Was this transaction directly solicited by a selling agent? NO YES (If “Yes” is checked, please ensure that the Agent Authorization section below is completed by the selling agent. Failure to do so will result in processing delays of your payment. Please note direct solicitation took place if the selling agent “initiated” contact with you via phone call, in person, or a direct mailing. A group educational or group enrollment meeting would not constitute direct solicitation unless an agent initiated individual contact with you or you initiated individual contact with an agent to discuss investment options offered by more than one provider.)

X _____ Date

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Participant’s/Account Owner’s signature

**Prudential
Authorization**

To be completed by a Prudential Representative upon receipt of completed form. This is to confirm that the above named participant or beneficiary has established a Plan account with us, and we will accept the rollover form your plan on behalf of this individual. If the participant is requesting a Contract Exchange, we certify that Prudential has agreed to share information with employer.

X

Prudential Representative's signature

Date