

# Introduction

## Application for Withdrawal of Accumulated Total Deductions

Form Last Revised: April, 2002

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*The Application for Withdrawal of Total Accumulated Deductions* allows an eligible member to receive a refund of the total accumulated deductions in his or her annuity savings (retirement) account.

An eligible member is one who:

- has terminated his or her employment with a governmental unit;
- is not receiving workers' compensation;
- is not seeking to be restored to his or her position; and
- is not accepting a position in the service of the Commonwealth or one of its political subdivisions

Members are strongly advised to review the following:

- If you have over ten years of creditable service, you may currently be or might become eligible for a retirement allowance. By taking a withdrawal of your accumulated total deductions, you will lose any right to this retirement allowance. Before proceeding with a withdrawal, you should ask your retirement board for a personalized estimate of any benefits that you will forego by withdrawing.
- Taking a refund of your total accumulated deductions terminates your rights in the retirement system and may subject you to tax implications. For distributions made after January 1, 2002, please be aware that your options of an eligible retirement plan for transferring your deductions have been expanded dramatically. Please carefully review the "Special Tax Notice" that accompanies this application. If you have unresolved concerns, you may wish to consult with an attorney or a tax professional.
- Interest is limited for most members with less than ten years of creditable service who voluntarily terminate their employment. Please carefully review the interest provisions on this application.
- Your employer must certify the termination of your employment and sign this application.
- Your retirement board will determine if you are eligible for a refund of your total accumulated deductions.

### Instructions

Members must complete pages 1, 2, and 3, and sign page 3.





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Member's Last Name	First	M.I.	Social Security #

**Method of Payment**

3) Check One:

- A) I wish to have the amount of my Annuity Savings Fund that is eligible for a refund paid directly to me in full with the exception of the 20% withholding of the federally taxable portion, which will be paid to the Internal Revenue Service.
- B) I wish to have the federally taxable amount of my Annuity Savings Fund that is eligible for a refund paid directly to an IRA, a 401(a) qualified plan, a 403(b) annuity contract, or an eligible governmental 457(b) deferred compensation plan as specified below, with the federally non-taxable amount paid directly to me.
- C) I wish to have the federally non-taxable amount of my Annuity Savings Fund paid to an IRA or a 401(a) defined contribution plan as specified below, with the federally taxable amount paid directly to me.
- D) I wish to have the federally taxable amount of my Annuity Savings Fund that is eligible for a refund paid directly to an IRA, a 401(a) qualified plan, a 403(b) annuity contract, or an eligible governmental 457(b) deferred compensation plan as specified below, with the federally non-taxable amount of my Annuity Savings Fund paid to an IRA or a 401(a) qualified defined contribution plan as specified below.
- E) I wish to have \_\_\_\_\_% of the federally taxable amount of my Annuity Savings Fund that is eligible for a refund paid directly to me (on which I realize there will be 20% withholding paid to the Internal Revenue Service) and the balance of the federally taxable amount of my Annuity Savings Fund paid directly to an IRA, a 401(a) qualified plan, a 403(b) annuity contract, or an eligible governmental 457(b) deferred compensation plan as specified below, with the federally non-taxable amount paid directly to me.

**For Taxable Portion**

Name (IRA, qualified 401(a) plan, 403(b) annuity provider, or eligible governmental 457(b) deferred compensation plan)

Address of above-listed entity	City	State	Zip

Member's Account Number with above-listed entity

Member's Address	City	State	Zip

<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Member's Last Name	First	M.I.	Social Security #

**For Non-Taxable Portion**

Name (IRA, qualified 401(a) defined contribution plan)

<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Address of above-listed entity	City	State	Zip

Member's Account Number with above-listed entity

<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Member's Address	City	State	Zip

**Member & Witness Signature Block**

I request payment according to the method selected on page 2.

Member's Signature \_\_\_\_\_ Date of Signature \_\_\_\_\_

Witness' Signature \_\_\_\_\_

Witness' Printed Name \_\_\_\_\_ Date of Signature \_\_\_\_\_

**Section B: To Be Completed by the Department Head**

This is to notify the Retirement Board that  was  (job title) in the  department in the political subdivision of  who (Check One)  resigned  terminated on  and that the above named employee will appear on the payroll for the last time on the pay period ending .

1) To the best of my knowledge the above named employee is not leaving to accept a position in the service of the Commonwealth or any political subdivision thereof which would entitle the above to become a member of any similar contributory retirement system and is not seeking to be restored to the position from which such employee was terminated.

2) Was the above member employed less than full time?  Yes  No

3) Is the above employee receiving Workers' Compensation benefits?  Yes  No

Signature/Department Head \_\_\_\_\_

Member's Last Name

First

M.I.

Social Security #

**Section C: To Be Completed by the Retirement Board****Determination of Eligibility for Return of Accumulated Total Deductions**

Members are eligible for a refund of accumulated total deductions under the following conditions.

Check the condition which applies to this member.

- 1) The member is leaving service and does not intend to take a position in the service of the Commonwealth or any political subdivision thereof subject to the provisions of G.L. c. 32, §§ 1-28 and does not intend to seek to be restored to the position from which he/she was terminated.
- 2) The member is leaving service as above and is otherwise entitled to receive a retirement allowance but the normal yearly amount of the allowance would be less than \$360, the member **MUST** receive a refund.
- 3) The member is a veteran who entered the service of a governmental unit within the Commonwealth prior to July 1, 1939 and is retiring under G.L. c. 32, §§ 56-60. (Under this condition the member must sign the waiver on the appropriate form).
- 4) In general, if a member is employed by two or more governmental units and enrolled in the retirement systems pertaining to each governmental unit, upon ending service in one unit, the member's accumulated total deductions must be transferred to the retirement system pertaining to the unit in which service continues. However, if the member has contributed a lesser amount to the Annuity Savings Fund of the system in which service has ended, the member is entitled to a refund of those accumulated total deductions.

NOTE: The right to receive a retirement allowance or a return of accumulated total deductions is subject to the provisions of G.L. c. 32, § 15 pertaining to dereliction of duty by members and G.L. c. 32, § 19C pertaining to child support obligations.

**Interest Provisions**

No interest shall be included in the accumulated total deductions paid to the member for any period after the expiration of two years from the end of the month preceding the date of his or her termination of service.

Members who entered into service on or after January 1, 1984 are subject to the following limitations with respect to the refund of interest credited to their annuity accounts.

Check the condition which applies to this member:

- 1) The member has less than 60 months (5 years) of creditable service and has **voluntarily** withdrawn from service. The member will receive **no** interest on accumulated total deductions.
- 2) The member has at least 60 months (5 years) but less than 120 months (10 years) of creditable service and has **voluntarily** withdrawn from service. The member will receive 50% of the interest on accumulated total deductions.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="-"/>	<input type="text" value="-"/>
Member's Last Name	First	M.I.	Social Security #	

- 3) The member has 120 months (10 years) or more of creditable service. The member will receive 100% of the interest on accumulated total deductions.
- 4) The member was involuntarily terminated from service. The member will receive 100% of the interest on accumulated total deductions.

Refund

Total in annuity savings account as of date of withdrawal \$

Minus interest not eligible for refund \$

TOTAL REFUND TO BE ISSUED

Federal taxable portion \$  Federal non-taxable portion \$

AMOUNT REFUNDED

(Fill in those that apply)

To Member \$

To Department of Revenue/  
Child Support Enforcement Unit \$

To Designated Plan (IRA, 401(k), 401(a),  
403(b), 457.) \$

Type of Plan

To Internal Revenue Service \$

To Pension Reserve Fund \$

To Retirement System \$

Date of Retirement Board vote authorizing refund

Date refund issued

Signature \_\_\_\_\_  
Board Member or Administrator

Print Name