

# Knox County Retirement & Pension Board

City-County Bldg., Room 371  
 400 Main Street  
 Knoxville, Tennessee 37902-2409  
 Phone: (865) 215-2323 Fax: (865) 215-2421

## Application for Rollover/Transfer to Knox County Employee Retirement Asset Accumulation Program

PART I – EMPLOYEE INFORMATION (please print)			
Participant:		Employee No.	Social Security Number:
Address:		Phone:	
City:		State:	ZIP:
Date of Birth:	Date of Employment:		Knox County Dept. Employed by:

### PART II – INSTRUCTIONS

You may “roll over” all or a portion of a distribution from an unrelated employer’s retirement plan or another qualified plan to this plan provided that the distributing plan was qualified under IRC section 401(a) and:

- The distribution was not a required minimum distribution due to your age (70½ or older),
- The distribution was not part of a series of substantially equal periodic payments paid over ten or more years, your lifetime, or the lifetimes of you and your beneficiary, and
- The distribution must identify the amount of pre-tax and post-tax (after-tax) contributions.

A rollover contribution may be paid directly from another unrelated plan to this plan. Alternatively, you may receive a distribution from another unrelated plan and then roll it over to this plan as long as you do so within 60 days of the date you receive the distribution.

If you have any questions about whether or not a distribution may be rolled over to this Plan contact the Knox County Plan Administrator.

Complete the “Rollover Contribution Election” section below to make a deposit to your rollover account under the Plan. The Plan Administrator of your previous employer’s retirement plan, traditional IRA, or other qualified plan must complete Part IV below.

### PART III – ROLLOVER CONTRIBUTION ELECTION

I hereby elect a direct rollover or transfer from my  former employer’s plan,  traditional IRA, or  other qualified plan to the Knox County Employee Retirement Asset Accumulation Program.

Knox County Plan type:  401A  457B (Transfer to Transfer)

A check from the distributing plan in the amount of \$\_\_\_\_\_ is  Attached; or  Will be forwarded directly from my former employer’s plan, the institution of my traditional IRA, or other qualified plan.

I received a distribution from a former employer’s plan, traditional IRA, or other qualified plan on \_\_\_\_/\_\_\_\_/\_\_\_\_.

I hereby elect to rollover all or a portion of this distribution to the Knox County Employee Retirement Asset Accumulation Program.

Attached is a check in the amount of \$\_\_\_\_\_ Pre-tax \$\_\_\_\_\_ Post-tax \$\_\_\_\_\_

**(NOTE: Traditional IRA’s must consist of payroll deducted contributions only.  
 It cannot consist of out of pocket contributions or combined assets).**

I hereby certify that all information on this form is true to the best of my knowledge and this rollover meets the criteria outlined above.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PART IV – ACKNOWLEDGEMENT OF PREDECESSOR PLAN ADMINISTRATOR

We hereby acknowledge as the Predecessor Plan Administrator that the enclosed distribution for the captioned plan participant to the Knox County Employee Retirement and Asset Accumulation Program is in compliance with the following stipulations for rollover:

- It is from a distributing plan that is qualified under IRC section 401(a) and,
- It is not a required minimum distribution due to the participant age (70½ years or older),
- If the distribution is from a traditional IRA, it consists of payroll deducted contributions only. It does not consist of individual out of pocket contributions or combined assets.
- It is not part of a series of substantially equal periodic payments paid over ten or more years, lifetime or lifetimes of the participant and beneficiary, and
- The distribution does identify the amount of pre-tax and post-tax (after-tax) contributions.

Plan Administrator Signature:	Date:
Title:	Phone:

The Knox County Plan Administrator may request additional information to determine distribution qualification.

Please make check payable to:

**WELLS FARGO BANK, NA  
 TRUSTEE FOR KNOX COUNTY EMPLOYEE  
 RETIREMENT & ASSET ACCUMULATION PROGRAM  
 FBO: (PARTICIPANT’S NAME)**

Please mail check to:

**KNOX COUNTY RETIREMENT  
 CITY-COUNTY BUILDING, RM 371  
 400 MAIN STREET  
 KNOXVILLE, TN 37902**