

Steps to submitting a request for retirement distribution:

1. Contact your provider and request distribution paperwork.
2. Complete and submit this Retirement Distribution Certification Request to the Office of Human Resources (allow two working days for a certificate to be created).
3. Submit the certificate along with your distribution paperwork to the provider.

The Ohio State University does not sign the provider paperwork but we will provide you with a certificate that replaces our signature on the provider forms. The following information is needed to process your distribution certificate.

SECTION 1: PARTICIPANT INFORMATION

Employee's Full Name: First	M.I.	Last	OSU Employee ID# (required)
Social Security Number (last four digits)	Daytime Phone Number	Email Address	

SECTION 2: RETIREMENT PROVIDER INFORMATION

Provider taking distribution from (provider sending money)	Provider transferring money to (provider receiving money, if applicable)
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Send the certificate to:

Employee Fax number: _____ or Employee Email: _____ or

Employee Address: _____

SECTION 3: EMPLOYMENT STATUS

Are you actively employed with Ohio State? Yes (skip Section 4 and proceed to Section 5) No (complete Section 4)

SECTION 4: DISTRIBUTION REQUEST (to be completed by retired or terminated employees only)

As a retired employee or an employee who has separated from service with the university, you may be eligible to transfer or withdraw all or a portion of your funds. Ohio State will provide a document that certifies your separation from the university and vesting status, if applicable. Check the plan(s) for which you are requesting this documentation:

403(b) 457(b) ARP/401(a) RCP/415(m)

I _____ (name) am requesting a distribution from a university retirement account. I understand that distributions from these accounts are allowed when there has been a termination of service. I also understand that the IRS requires a break in service in order to be considered terminated from employment (unless age 59 1/2 or older). I certify that at this time, I have separated from service and have no plan or agreement (formal or informal) to return to university employment or that I am age 59 1/2 or older and requesting a distribution under the age 59 1/2 age provision.

Participant Signature

Date

See page 2 – Signature required on reverse

SECTION 5: DISTRIBUTION REQUEST (to be completed by active employees only)

As an active employee, you may be eligible for a distribution from your retirement account. Check the plan(s) and the type of distribution requested:

403(b)

- Age 59½
- Disability
- Transfer between plan providers
- Rollover to OSU plan
- Purchase of service credit
- Loan amount requested:
\$ _____
- Purchase of primary residence¹? Yes No
Amount requested:
\$ _____
- Hardship (see page 2),
Amount requested:
\$ _____

457(b)

- Transfer between plan providers
- Purchase of service credit
- Rollover to OSU plan
- Unforeseeable Emergency Withdrawal (see page 2)
- Amount requested:
\$ _____

ARP/401(a)

- Transfer between plan providers (proof of vesting)
- Disability

RCP/415(m)

- Disability²

¹If a loan, is this for the purchase of a primary residence? Note: Refinancing of your current home does not count as purchasing a primary residence.

²Applies to RCP only

If selecting a Hardship Withdrawal from the 403(b) plan, check reason below:

- Medical expenses for you, your spouse or your dependent (or primary beneficiary other than your spouse if your plan allows)
- Expenses related to purchase of your principal residence excluding mortgage payments
- Tuition-related educational fees, including room and board, for the next 12 months for postsecondary education for dependents (or primary beneficiary other than your spouse if your plan allows)
- Amounts required to prevent eviction from, or foreclosure on, your principal residence
- Burial or funeral expenses for your deceased parent, spouse, child or dependent (or primary beneficiary other than your spouse if your plan allows)
- Repairs for uninsured or underinsured damage to your principal residence due to theft, fire, storm or other casualty

NOTE: If a hardship distribution occurs, contributions to the 403(b) plan will be terminated for six months following the withdrawal. A new payroll authorization will be needed to resume contributions.

If selecting an Unforeseeable Emergency Withdrawal from the 457(b) plan, check the reason below:

- An illness, accident or death
- Loss of property due to a casualty loss (for example, the need to rebuild a home following damage that is not reimbursed by insurance due to a natural disaster)
- Any other similar, extraordinary and unforeseeable circumstance arising from events beyond the individual's control

In each situation, the illness, loss or other unforeseeable emergency must be that of the plan participant, of the spouse of the plan participant or of the participant's dependent under Internal Revenue Code Section 152. The financial need involved must be immediate, heavy and directly related to the unforeseen event. **NOTE:** Regardless of the reason for the requested 457(b) emergency withdrawal, there must be a severe financial hardship resulting from unusual AND unforeseeable circumstances beyond the control of the participant.

SECTION 6: CERTIFICATION

I certify that all information provided on this form is true to the best of my knowledge and I authorize the certificate to be sent to my retirement provider, or as instructed above. **PLEASE NOTE:** Distribution certificates will include your SSN.

Participant Signature

Date

NOTE: All options listed are not a guarantee. Refer to your provider's plan document for the most up-to-date information on distribution options.

Return completed form to: The Office of Human Resources, Customer Service, 1590 N. High Street,
Suite 300, Columbus, OH 43201-2190, Fax: **614-292-7813**, HR@osu.edu.