Rollover Contribution Instructions & Application

Rolling money into your retirement plan account is an easy four-step process. To help us process your rollover contribution quickly and accurately, please follow these instructions carefully, making sure to complete each step.

Step 1 - Review the rollover types available and certifications required on this application to ensure your retirement savings are eligible to roll into your retirement plan account. Please note that a Roth IRA cannot be rolled over to any qualified plan.

Step 2 - Request a distribution check from your prior plan administrator or custodian. The check should be made payable to CSTB for (your retirement plan name or Plan ID (PID)), FBO (your name and last 4 digits of your social security number).

Example: CSTB for (Your retirement plan name or Plan ID (PID))
FBO John Doe, 9999

The check can be mailed to you or directly to Schwab Retirement Plan Services, Inc. at the address below. If the check is being mailed to you to be forwarded, please be sure you include the check stub and all supporting documentation.

If the distribution check was already made payable directly to you, you can send us a cashier's check or certified check as an indirect rollover (personal checks and money orders are not acceptable). This indirect rollover option is only available for 60 days after you receive your distribution check. Also, when the distribution was originally paid directly to you, your prior administrator or custodian may have withheld taxes from your savings. If these additional amounts are not included in your rollover contribution, they will be considered a withdrawal and may be subject to income tax and penalties. The indirect rollover of after-tax and Roth is not allowed.

Step 3 - Carefully complete and sign this application.

Step 4 - Return this application and/or your rollover check by one of the following methods:

Check and Rollover Application:

Regular Mail
Schwab Retirement Plan Services-(CPU)
PO Box 2029
Omaha, NE 68103-2029

For Express Mail (Overnight)
Schwab Retirement Plan Services-(CPU)
200 S 108th Ave
Omaha, NE 68154

Rollover Application Only:

Regular Mail
Schwab Retirement Plan Services–(DPU)
PO Box 2026
Omaha, NE 68103-2026

Fax the application to 877-312-3347 (check must be mailed)

Or upload the application via the Message Center in your account at workplace.schwab.com (check must be mailed)

Upon receipt of this rollover check and completed application in good order, the money will be invested in your account according to your current investment instructions (investment elections). In the event there are no investment instructions on file, your rollover contribution will be invested according to the Plan's default instructions. You may change your investments at workplace.schwab.com or by calling Participant Services at the number below.

If we are unable to process this rollover contribution, we will mail the rollover check back to you at your address on file after attempting to contact you for a resolution. Also, if after accepting the rollover contribution into the retirement plan account, it is determined that the contribution was not an eligible rollover, then the entire amount of the rollover and any associated earnings will be sent back to you.

If you need help or have any questions about this process, please call Participant Services at **800-724-7526.** Thank you.

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Rollover Contribution Application

Your Information

Name: _____
Last Four Digits of Your SSN: _____
Email Address: _____
Date of Birth: _____
Current Retirement Plan Name: _____

Home Phone: _____
Work Phone: _____
Current Employer: _____

Distributing Plan or IRA Information (where the rollover is coming from)

Previous Administrator or Custodian: _____ Phone #: _____
Name of Previous Retirement Plan or IRA: _____

Rollover Type

Your current employer's retirement plan only accepts rollovers from the following types of retirement accounts. If your savings is from another type of account, it is not eligible to roll into your current employer's plan. If you are not certain of the account type, please contact your prior plan administrator or custodian for verification.

My rollover contribution is from:

- ☐ a 401(k), 401(a), or 403(a)
- ☐ a 403(b) plan
- ☐ a 457-government savings plan
- ☐ an IRA with no after-tax contributions
- ☐ a SEP IRA or SIMPLE IRA (a SIMPLE plan must have been in existence for at least 2 years)

☐ Check here if this is a return of a Qualified Distribution. Qualified Distributions include: Qualified Disaster Recovery Distribution, Qualified Birth or Adoption Distribution, Terminal Illness Distribution, Emergency Personal Expense Distribution, Domestic Abuse Victim Withdrawal or Home Purchase/Construction Financial Hardship where the purchase/construction will not occur because the land or structure was destroyed as a result of a qualified disaster. You may recontribute any portion up to the full amount of your Qualified Distribution and generally, except for the financial hardship, the repayment must be made within 3 years from the day after the date the Qualified Distribution was received. The financial hardship repayment must occur by the date that is the latest of: (1) 180 days after the first day of the incident period, (2) 180 days after the date the disaster is federally declared. Schwab Retirement Plan Services will verify your eligibility before processing your rollover.

To avoid invalidating your rollover or potentially being double taxed on this savings, please include your pre-tax and after-tax amounts here. If you are not certain what amount, if any, is after-tax money, please contact your prior plan administrator or custodian for verification. I certify that my enclosed rollover includes:

$_____Pre-tax dollars
$_____After-tax Contributions
$_____After-tax Earnings

Please also provide the total Roth contributions (if any) or the amount of Roth savings you added to your employer-sponsored plan along with the earnings on that money. I certify that my enclosed rollover includes the following Roth savings:

_____Roth Start Date (if any)
$_____Roth Contributions (if any)
$_____Roth Earnings (if any)

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Your Certification and Signature

By signing this application, I certify that the information in this application is complete and correct.

- This rollover contribution is of amounts I received as an "eligible rollover distribution".
- This rollover does not include any ROTH contributions or earnings prohibited by the Plan.
- This rollover does not include any AFTER-TAX contributions or earning prohibited by the Plan.
- I did not receive the funds as a non-spouse beneficiary of a death benefit.
- I did not receive the funds as one of a series of periodic payments.
- I did not receive the funds as a hardship distribution.
- If an indirect rollover, (the distribution was originally paid directly to you by the prior plan administrator or custodian), I am rolling over these funds within 60 days of the date I received them from an eligible employer plan or IRA; or I am enclosing a written certification (using the model self-certification letter found in Revenue Procedure 2020-46) that the rollover contribution missed the 60-day deadline due to one of the reasons provided under Revenue Procedure 2020-46. However, if my indirect rollover is a rollover of a qualified plan loan offset amount, I am rolling over these funds by the due date (including extension) of my individual tax return for the year in which the loan offset is treated as distributed.
- If from an IRA, these funds would be included in my gross income if not rolled over (no after-tax funds).
- These funds do not include any required minimum distributions.
- In the event that your rollover check(s) is/are returned unpaid, the transaction(s) will be reversed from your account, and you will be responsible for any losses incurred as a result of the reversal.

If you are not certain on any of these items, please contact your prior plan administrator or custodian for verification. Also, if there are no investment instructions on file, these funds will be invested according to the Plan's default instructions.

Signature: _____ Date: _____

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