



ROLLOVER CERTIFICATION FOR PAYMENT OF PAST SERVICE CREDIT

Avoid Delays – Please read the instructions on the back of this form before completing

PLEASE PRINT OR TYPE

- **Do not withdraw any funds or send any rollover distributions to LABF before we advise you of your eligibility to do so.**
- Complete this certification to roll over tax-deferred distributions from another qualified plan or qualifying individual retirement account (IRA) for payment of past service credits.

SECTION 1 – MEMBER INFORMATION

First Name	Middle Initial	Last	Social Security Number
Street (Mailing) Address			City, State and Zip
Telephone Number			Work () Home ()

SECTION 2 – CERTIFICATION BY QUALIFIED PLAN ADMINISTRATOR OR FINANCIAL INSTITUTION

Name of Plan/Financial Institution	Address of Financial Institution
Account Number	Telephone Number (include area code)

The qualified plan or individual retirement account named above is (check one):

- ☐ A qualified plan under Internal Revenue Code Section (). Please identify section 401(a), 403(b), 457(b) etc.
- ☐ An individual retirement account ("IRA") which was established solely with funds from qualified plan(s).
- ☐ An eligible spousal rollover of distributions from a 401(a), 403(b) or 457(b) plan due to death of a spouse or that has been divided by a Qualified Domestic Relations order.

IF IRA, PLEASE COMPLETE THE FOLLOWING:

What amount is tax deferred ? _____ What amount was previously taxed? _____

Have these funds been combined with funds from other sources?.....☐ Yes ☐ No

Does this account contain only the original deposit amount plus accrued interest?.....☐ Yes ☐ No

I hereby certify that the information stated above is true.	Date
Signature & Title of Administrator from the Financial Institution	

SECTION 3 – MEMBER CERTIFICATION

I request that LABF accept a rollover distribution in the amount of \$ _____, which is a rollover distribution from:

(NAME OF PLAN OR FINANCIAL INSTITUTION)

With this distribution I am purchasing _____ months of LABF service credit.

I understand that I may be required to provide proof, if requested, in support of the above statements. I also understand that my rollover must be made to LABF within 60 days of receipt of the distribution.

I agree with the information provided by my financial institution	Date
Member Signature (write; do not print or type)	

ALL QUESTIONS MUST BE ANSWERED BEFORE SUBMITTING ANY FUNDS TO LABF

**Laborers' and Retirement Board Employees'
Annuity and Benefit Fund of Chicago
150 N Wacker Dr Ste 800 • Chicago IL 60606-1624
(312) 236-2065 • Fax (312) 236-0574**

Do not withdraw any funds or send to LABF any rollover distributions before LABF advises you of your eligibility to do so.

LABF must review your rollover information before accepting a rollover.

Please allow at least 30 days for this review.

- **Do NOT send money with this form**

Before LABF can accept any rollover monies, specific information must be submitted to LABF for an eligibility review.

Once we have determined whether we can accept your rollover distribution, we will then contact you and advise whether or not you can remit the rollover distribution.

- **Rollover distributions we CANNOT accept:**

The Internal Revenue Code regulations do not permit us to accept a rollover distribution from:

- A Roth IRA **OR**
- Contributions that were previously taxed **OR**
- Any eligible rollover distribution that is greater than the cost of your past service **OR**
- An IRA opened with a refund of LABF contributions where you made additional deposits into the same account

- **Rollover distributions we CAN accept:**

Federal tax laws allow LABF to accept the following rollover distributions for payment of past service:

- An Internal Revenue Code (IRC) Section 401(a) qualified plan, including 401(k) and Keogh plans
- An annuity plan described in IRC, Section 403(a)
- A tax-sheltered annuity contract described in IRC, Section 403(b)
- An individual retirement account or annuity (IRA) under IRC, Section 408(a) or Section 408(b) that is eligible to be rolled over and would otherwise be included in gross income
- A individual retirement account described in IRC, Section 408(d)
- A Simplified Employee Pensions Plan (SEP) under IRC, Section 408(k)
- A Savings Incentive Match Plan for Employees (SIMPLE IRA) under IRC Section 408(p), if there has been participation in the plan for at least two years.
- An eligible deferred compensation plan under IRC, Section 457(b) which is maintained by a state, political subdivision of a state, or any agency or instrumentality of a state or political subdivision of a state
- An eligible spousal rollover of distributions from a 401(a), 403(a), 403(b) or 457(b) plan due to the death of a spouse or that has been divided by a Qualified Domestic Relations Order

- **What you and your financial institution must do:**

Your financial institution must provide ALL information required on the form.

The institution completes Section 2 of the Rollover Certification form including:

1. Verifying the Internal Revenue Code (IRC) under which the account/plan qualifies
2. If the rollover is from an IRA, additional questions regarding the source and taxability of the funds.

If you send an ineligible distribution to LABF:

If you send a rollover distribution to LABF that we cannot accept, the rollover distribution will be returned either to you or to your financial institution and may be seen by the IRS as a tax-qualifying event

If you have any questions:

Call a LABF Benefits Counselor at (312) 236-2065
Monday through Friday 8:30 A.M. to 4:30 P.M.