CITY OF AUSTIN POLICE
RETIREMENT SYSTEM

2520 South I.H. 35, Ste. 205
Austin, Texas 78704

Retirement Refund Authorization

(This form must be completed and signed by terminating employees to receive a refund of their Retirement Deposits)

Name (Print)	Department Number	Social Security Number
_____	_____	_____

Effective _____, 20___, I am terminating my employment with the City of Austin Police Department.

In conjunction with that termination, I am making the following selections with respect to my contributions in the Retirement System and any interest accrued on those contributions:

I. **Retirement Options** - I request that my contributions and any accrued interest to the Retirement system be: (check one)

( ) Refunded to me in accordance with the guidelines approved by the Retirement Board for the City of Austin Police (See Retirement Refund Process below.)

( ) Refunded to me after the current year's interest allocation. I understand that the Austin Police Pension Office will mail the check to me in mid-January of next year. A 1099R tax form will then be issued one year after I receive this payment.

( ) Retained in the retirement system. Note: This option is available only if the employee is vested, that is, has ten or more years of service with the City of Austin Police Department. The contributions retained in the Retirement System will be used to purchase a deferred annuity (an allowance received by the employee upon attaining eligibility to retire based on average regular pay and years of creditable service at the time of separation from the City of Austin Police Department). Please contact the City of Austin Police Pension Office (416-7672) now to discuss vesting your retirement benefits and in the future notify them of any address changes.

II. **Tax Withholding Options:** 1) *What has been taxed?* Contributions made to the Retirement System prior to 1985 have already been taxed. Contributions made after January 1, 1985 and all interest earnings have not been taxed. 2) *What is my tax liability?* Federal law requires the Retirement System to withhold 20% for taxes on all taxable amounts not directly transferred to another tax qualified retirement plan or IRA. A letter of transfer must be sent to the Pension Office from the receiving plan or financial institution. 3) *What about tax penalties?* If you receive a refund of your retirement funds and you are under age 59 1/2, there is an early withdrawal penalty in addition to any income taxes paid. To avoid this penalty, transfer or roll your contributions into a tax qualified plan (such as an IRA) within 60 days of your refund. A roll over will still be subject to the 20% withholding tax whereas a transfer will not.

III. **Please check one of the following options:**

( ) I choose to have all of the taxable portion of my refund transferred to the eligible plan named on the letter of transfer attached, and represent that it is an eligible plan for the purpose of this transfer. I understand that the non-taxable portion, if any, will be paid to me.

( ) I choose to have $_____ of the taxable portion of my refund transferred to the eligible plan named on the letter of transfer attached, and represent that it is an eligible plan for the purpose of this transfer. The balance of the account (less withholding) is to be paid to me.

( ) I choose to have the entire refund (less withholding) paid directly to me.

IV. **Retirement Refund Process**

The retirement refund process cannot begin until the final paycheck process is complete.

Retirement refunds are produced and mailed on Friday, two weeks after the final paycheck is issued.

V. **Signatures and Designation of Address**

I understand the refund process as described above and request that any refunds, tax forms, and other correspondence be mailed to the address below. A copy of this form was provided to me.

_____

Employee Signature Date Employee Phone Number

_____

Street Address City State Zip
(Not a P.O. Box please)

_____

Employee Driver's License #

_____ _____

Witnessed by Date