



INSTRUCTIONS

PLEASE READ CAREFULLY

Please complete this form if you a) are filing for retirement under the Qualified Pension Plan (QPP) and b) are a Tax-Deferred Annuity (TDA) Program participant who wants to defer distribution of your TDA funds past your QPP initial payability date (*i.e.*, the date on which you may begin receiving your QPP retirement allowance).

You must file this form in conjunction with your retirement application, on which you must elect TDA Deferral status in the "TDA Election" section. If you do not file this form, you cannot attain TDA Deferral status; consequently, you would have to elect a method of distribution for your TDA funds as of your QPP initial payability date.

Electing TDA Deferral status means your account may continue to receive interest/investment return, and you will be able to maintain an existing TDA loan, take out a new TDA loan, and manage your TDA investment elections online. These opportunities would not be available to you otherwise.

Retiring members who have an outstanding TDA loan(s) have a choice of how to repay the loan(s) after their retirement date: automatic deductions from their monthly retirement allowance (including advance payments, if applicable) or monthly direct payments to TRS. At any time during repayment, you may change your repayment method for one or more loans by filing a "Request to Change TDA Loan Repayment Method" (code LO105) with TRS.

At any time, you may elect to annuitize your TDA funds or withdraw a portion or all of these funds; however, doing so may affect your TDA Deferral status.

Under TDA Deferral status, distribution of your Post-1986 Funds (TDA contributions and investment returns accumulated after December 31, 1986) must begin as of April 1 of the year after you reach age 70½; distribution of your Pre-1987 Funds (TDA contributions and investment returns accumulated as of December 31, 1986) must begin as of the date on which you reach age 75. These distributions are in accordance with the Required Minimum Distribution (RMD) guidelines established by the Internal Revenue Service (IRS).

For more information about distribution requirements and other features of TDA Deferral status, please consult the *TDA Deferral Status* brochure and the *Required Minimum Distribution for Members* brochure.

For your convenience, TRS forms and publications are available on our website. If you require additional assistance, please contact our Member Services Center at 1 (888) 8-NYC-TRS.

In Part A: All information must be provided.

In Part B: You must elect how you want to repay your outstanding TDA loan(s) after your retirement date: automatic deductions from your monthly retirement allowance (including advance payments, if applicable) or monthly direct payments to TRS. If you elect direct payments to TRS, TRS will send you a monthly loan statement and payment voucher, and you would need to send payment by check each month for all of your loans. **If you do *not* elect a repayment method, your loan payments would automatically be deducted from your monthly retirement allowance (including advance payments, if applicable).**

In Part C: You must provide the requested information, and sign and date this form in the presence of a notary.

In Part D: You must have your form notarized.



Please read the instructions before completing this form.

(NOTE: Please print in black or blue ink, and initial any changes that you make on this form.)

PART A: All information must be provided.

First Name	MI	Last Name	Social Security Number (last 4 digits only)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Permanent Home Address	Apt. No.		TRS Membership Number
<input type="text"/>	<input type="text"/>		<input type="text"/>
City	State	Zip Code	Primary Phone Number (Check one: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile)
<input type="text"/>	<input type="text"/>	<input type="text"/>	(<input type="text"/> <input type="text"/> <input type="text"/>) <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
			Alternate Phone Number (Check one: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile)
			(<input type="text"/> <input type="text"/> <input type="text"/>) <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Please keep your personal information with TRS up to date. We will update our records based on the information you provide above, so *do not enter a temporary address*; instead, TRS suggests that you consult the U.S. Postal Service about having your mail forwarded on a temporary basis. To register any changes to your permanent address (and/or phone number), please access our website or file a "Member's Change of Address Form" (code DM13) with TRS.

If you are providing new information above, please indicate the effective date: / /

PART B: Please elect ONE loan repayment method by checking the applicable box below. (See Part B instructions on Page 1.)

- ☐ I elect to repay my outstanding loan(s) through automatic deductions from my monthly retirement allowance (including advance payments, if applicable).
- ☐ I elect to repay my outstanding loan(s) through monthly payments by check submitted to TRS.

PART C: Please read the following statement, provide the requested information, and sign and date in the presence of a notary.

I certify that I have read the Instructions on page 1 of this form, and I hereby elect TDA Deferral status to delay the distribution of my TDA funds past my QPP initial payability date. I am filing this form in conjunction with my retirement application, on which I have also elected TDA Deferral status. I understand that I must file this form prior to my retirement date under the QPP, which will be _____.
(MM/DD/YYYY)

MEMBER'S SIGNATURE _____ DATE (MM/DD/YYYY) _____

PART D: TO BE COMPLETED BY A NOTARY (NOTE: Attestation made outside the U.S. must be executed before an American consul.)

State of _____)
County of _____) s.s.:

On the _____ day of _____, _____, before me personally appeared the person known to me to be _____, the individual who executed the foregoing instrument and acknowledged to me that (s)he executed the same.

Signature: _____
Official Title: _____
Expiration Date of Commission: _____