SPECIAL TAX NOTICE REGARDING GOVERNMENTAL 457 PLAN PAYMENTS

This notice explains how you can continue to defer federal income tax on your retirement savings in a governmental 457 plan and contains important information you will need before you decide how to receive your plan benefits.

This notice is provided to you because all or part of the payment that you receive from the plan may be eligible for rollover by you or your plan to a traditional IRA or an eligible employer plan. A rollover is a payment by you or the plan of all or part of your benefit to another plan or IRA that allows you to continue to postpone taxation of that benefit until it is paid to you. Your payment cannot be rolled over to a Roth IRA, a SIMPLE IRA, or a Coverdell Education Savings Account (formerly known as an education IRA). An "eligible employer plan" includes a plan qualified under section 401(a) of the Internal Revenue Code, including a 401(k) plan, profit-sharing plan, defined benefit plan, stock bonus plan, and money purchase plan; a section 403(a) annuity plan; a section 403(b) tax-sheltered annuity; and an eligible section 457(b) plan maintained by a governmental employer (governmental 457 plan).

An eligible employer plan is not legally required to accept a rollover. Before you decide to roll over your payment to another employer plan, you should find out whether the plan accepts rollovers and, if so, the types of distributions it accepts as a rollover. You should also find out about any documents that are required to be completed before the receiving plan will accept a rollover. Even if a plan accepts rollovers, it might not accept rollovers of certain types of distributions. If this is the case, you may wish instead to roll your distribution over to a traditional IRA or to split your rollover amount between the employer plan in which you will participate and a traditional IRA. If an employer plan accepts your rollover, the plan may restrict subsequent distributions of the rollover amount or may require your spouse's consent for any subsequent distribution. A subsequent distribution from the plan that accepts your rollover may also be subject to different tax treatment than distributions from this plan. Check with the administrator of the plan that is to receive your rollover prior to making the rollover.

If you have additional questions after reading this notice, you can contact your plan.

SUMMARY

There are two ways you may be able to receive a plan payment that is eligible for rollover:

(1) certain payments can be made directly to a traditional IRA that you establish or to an eligible employer plan that will accept it and hold it for your benefit ("DIRECT ROLLOVER"), or

(2) the payment can be PAID TO YOU.

If you choose a DIRECT ROLLOVER:
· Your payment will not be taxed in the current year and no income tax will be withheld.
· You choose whether your payment will be made directly to your traditional IRA or to an eligible employer plan that accepts your rollover. Your payment cannot be rolled over to a Roth IRA, a SIMPLE IRA, or a Coverdell Education Savings Account because these are not traditional IRAs.
· Your payment will be taxed later when you take it out of the traditional IRA or the eligible employer plan. Depending on the type of plan, the later distribution may be subject to different tax treatment than it would be if you received a taxable distribution from this plan.

If you choose to have a plan payment that is eligible for rollover PAID TO YOU:
· You will receive only 80% of the taxable amount of the payment, because the plan administrator is required to withhold 20% of that amount and send it to the IRS as income tax withholding to be credited against your taxes.
· The taxable amount of your payment will be taxed in the current year unless you roll it over.
· You can roll over all or part of the payment by paying it to your traditional IRA or to an eligible employer plan that accepts your rollover within 60 days after you receive the payment. The amount rolled over will not be taxed until you take it out of the traditional IRA or the eligible employer plan.
· If you want to roll over 100% of the payment to a traditional IRA or an eligible employer plan, you must find other money to replace the 20% of the taxable portion that was withheld. If you roll over only the 80% that you received, you will be taxed on the 20% that was withheld and that is not rolled over.

Your Right to Waive the 30-Day Notice Period. Generally, neither a direct rollover nor a payment can be made from the plan until at least 30 days after your receipt of this notice. Thus, after receiving this notice, you have at least 30 days to consider whether or not to have your withdrawal directly rolled over. If you do not wish to wait until this 30-day notice period ends before your election is processed, you may waive the notice period by making an affirmative election indicating whether or not you wish to make a direct rollover. Your withdrawal will then be processed in accordance with your election as soon as practical after it is received by the plan administrator.

MORE INFORMATION

I. PAYMENTS THAT CAN AND CANNOT BE ROLLED OVER
II. DIRECT ROLLOVER
III. PAYMENT PAID TO YOU
IV. SURVIVING SPOUSES, ALTERNATE PAYEES, AND OTHER BENEFICIARIES

I. PAYMENTS THAT CAN AND CANNOT BE ROLLED OVER

Payments from the plan may be "eligible rollover distributions." This means that they can be rolled over to a traditional IRA or to an eligible employer plan that accepts rollovers. Payments from a plan cannot be rolled over to a Roth IRA, a SIMPLE IRA, or a Coverdell Education Savings Account. Your plan administrator should be able to tell you whether your payment is an eligible rollover distribution.
The following types of payments cannot be rolled over:

Payments Spread over Long Periods. You cannot roll over a payment if it is part of a series of equal (or almost equal) payments that are made at least once a year and that will last for:
· your lifetime (or a period measured by your life expectancy), or
· your lifetime and your beneficiary's lifetime (or a period measured by your joint life expectancies), or
· a period of 10 years or more.

Required Minimum Payments. Beginning when you reach age 70½ or retire, whichever is later, a certain portion of your payment cannot be rolled over because it is a "required minimum payment" that must be paid to you.

Unforeseeable Emergency Distributions. A distribution on account of an unforeseeable emergency cannot be rolled over.

Distributions of Excess Contributions. A distribution that is made because legal limits on certain contributions were exceeded cannot be rolled over.

The plan administrator of this plan should be able to tell you if your payment includes amounts which cannot be rolled over.

II. DIRECT ROLLOVER

A DIRECT ROLLOVER is a direct payment of the amount of your plan benefits to a traditional IRA or an eligible employer plan that will accept it. You can choose a DIRECT ROLLOVER of all or any portion of your payment that is an eligible rollover distribution, as described in Part I above. You are not taxed on any taxable portion of your payment for which you choose a DIRECT ROLLOVER until you later take it out of the traditional IRA or eligible employer plan. In addition, no income tax withholding is required for any taxable portion of your plan benefits for which you choose a DIRECT ROLLOVER. This plan might not let you choose a DIRECT ROLLOVER if your distributions for the year are less than $200.

DIRECT ROLLOVER to a Traditional IRA.
You can open a traditional IRA to receive the direct rollover. If you choose to have your payment made directly to a traditional IRA, contact an IRA sponsor (usually a financial institution) to find out how to have your payment made in a direct rollover to a traditional IRA at that institution. If you are unsure of how to invest your money, you can temporarily establish a traditional IRA to receive the payment. However, in choosing a traditional IRA, you may wish to make sure that the traditional IRA you choose will allow you to move all or a part of your payment to another traditional IRA at a later date, without penalties or other limitations. See IRS Publication 590, Individual Retirement Arrangements, for more information on traditional IRAs (including limits on how often you can roll over between IRAs).

DIRECT ROLLOVER to a Plan. If you are employed by a new employer that has an eligible employer plan, and you want a direct rollover to that plan, ask the plan administrator

Please retain the Special Tax Notice for your records.

of that plan whether it will accept your rollover. An eligible employer plan is not legally required to accept a rollover. Even if your new employer's plan does not accept a rollover, you can choose a DIRECT ROLLOVER to a traditional IRA. If the employer plan accepts your rollover, the plan may provide restrictions on the circumstances under which you may later receive a distribution of the rollover amount or may require spousal consent to any subsequent distribution. Check with the plan administrator of that plan before making your decision.

DIRECT ROLLOVER of a Series of Payments. If you receive a payment that can be rolled over to a traditional IRA or an eligible employer plan that will accept it, and it is paid in a series of payments for less than 10 years, your choice to make or not make a DIRECT ROLLOVER for a payment will apply to all later payments in the series until you change your election. You are free to change your election for any later payment in the series.

Change in Tax Treatment Resulting from a DIRECT ROLLOVER. The tax treatment of any payment from the eligible employer plan or traditional IRA receiving your DIRECT ROLLOVER might be different than if you received your benefit in a taxable distribution directly from the plan. See the sections below entitled "Additional 10% Tax May Apply to Certain Distributions."

III. PAYMENT PAID TO YOU

If your payment can be rolled over (see Part I above) and the payment is made to you in cash, it is subject to 20% federal income tax withholding on the taxable portion (state tax withholding may also apply). The payment is taxed in the year you receive it unless, within 60 days, you roll it over to a traditional IRA or an eligible employer plan that accepts rollovers. If you do not roll it over, special tax rules may apply.

Income Tax Withholding:

Mandatory Withholding. If any portion of your payment can be rolled over under Part I above and you do not elect to make a DIRECT ROLLOVER, the plan is required by law to withhold 20% of the taxable amount. This amount is sent to the IRS as federal income tax withholding. For example, if you can roll over a taxable payment of $10,000, only $8,000 will be paid to you because the plan must withhold $2,000 as income tax. However, when you prepare your income tax return for the year, unless you make a rollover within 60 days (see "Sixty-Day Rollover Option" below) you must report the full $10,000 as a taxable payment from the plan. You must report the $2,000 as tax withheld, and it will be credited against any income tax you owe for the year. There will be no income tax withholding if your payments for the year are less than $200.

Voluntary Withholding. If any portion of your payment is taxable but cannot be rolled over under Part I above, the mandatory withholding rules described above do not apply. In this case, you may elect not to have withholding apply to that portion. If you do nothing, an amount will be taken out of this portion of your payment for federal income tax withholding. To elect out of withholding, ask the plan administrator for the election form and related information.

Sixty-Day Rollover Option. If you receive a payment that can be rolled over under Part I above, you can still decide to roll over all or part of it to a traditional IRA or to an eligible employer plan that accepts rollovers. If you decide to roll over, you must contribute the amount of the payment you received to a traditional IRA or eligible employer plan within 60 days after you receive the payment. The portion of your payment that is rolled over will not be taxed until you take it out of the traditional IRA or the eligible employer plan.

You can roll over up to 100% of your payment that can be rolled over under Part I above, including an amount equal to the 20% of the taxable portion that was withheld. If you choose to roll over 100%, you must find other money within the 60-day period to contribute to the traditional IRA or the eligible employer plan, to replace the 20% that was withheld. On the other hand, if you roll over only the 80% of the taxable portion that you received, you will be taxed on the 20% that was withheld.

Example: Your payment that can be rolled over under Part I above is $10,000, and you choose to have it paid to you. You will receive $8,000, and $2,000 will be sent to the IRS as income tax withholding. Within 60 days after receiving the $8,000, you may roll over the entire $10,000 to a traditional IRA or an eligible employer plan. To do this, you roll over the $8,000 you received from the plan, and you will have to find $2,000 from other sources (your savings, a loan, etc.). In this case, the entire $10,000 is not taxed until you take it out of the traditional IRA or an eligible employer plan. If you roll over the entire $10,000, when you file your income tax return you may get a refund of part or all of the $2,000 withheld. If, on the other hand, you roll over only $8,000, the $2,000 you did not roll over is taxed in the year it was withheld. When you file your income tax return, you may get a refund of part of the $2,000 withheld. (However, any refund is likely to be larger if you roll over the entire $10,000.)

Additional 10% Tax May Apply to Certain Distributions. Distributions from this plan are generally not subject to the additional 10% tax that applies to pre-age-59½ distributions from other types of plans. However, any distribution from the plan that is attributable to an amount you rolled over to the plan (adjusted for investment returns) from another type of eligible employer plan or IRA amount is subject to the additional 10% tax if it is distributed to you before you reach age 59½, unless an exception applies.

Exceptions to the additional 10% tax generally include (1) payments that are paid as equal (or almost equal) payments over your life or life expectancy (or your and your beneficiary's lives or life expectancies), (2) payments that are paid from an eligible employer plan after you separate from service with your employer during or after the year you reach age 55, (3) payments that are paid because you retire due to disability, (4) payments that are paid directly to the government to satisfy a federal tax levy, (5) payments that are paid to an alternate payee under a qualified domestic relations order, or (6) payments that do not exceed the amount of your deductible medical expenses. These exceptions may be different for distributions from a traditional IRA. See IRS Form 5329 for more information on the additional 10% tax.

The additional 10% tax does not apply to distributions from the plan or any other governmental 457 plan, except to the extent the distribution is attributable to an amount you rolled over to the governmental 457 plan (adjusted for investment returns) from another type of eligible employer plan or IRA.

In addition, any amount rolled over from the plan to another type of eligible employer plan or to a traditional IRA will be subject to the additional 10% tax if it is distributed to you before you reach age 59½, unless an exception applies.

IV. SURVIVING SPOUSES, ALTERNATE PAYEES, AND OTHER BENEFICIARIES

In general, the rules summarized above that apply to payments to employees also apply to payments to surviving spouses of employees and to spouses or former spouses who are "alternate payees." You are an alternate payee if your interest in the plan results from a "qualified domestic relations order," which is an order issued by a court, usually in connection with a divorce or legal separation.

If you are a surviving spouse or an alternate payee, you may choose to have a payment that can be rolled over, as described in Part I above, paid in a DIRECT ROLLOVER to a traditional IRA or to an eligible employer plan or paid to you. If you have the payment paid to you, you can keep it or roll it over yourself to a traditional IRA or to an eligible employer plan. Thus, you have the same choices as the employee.

If you are a beneficiary other than a surviving spouse or an alternate payee, you cannot choose a direct rollover, and you cannot roll over the payment yourself.

If you are a surviving spouse, an alternate payee, or another beneficiary, your payment is generally not subject to the additional 10% tax described in Part III above, even if you are younger than age 59½.

HOW TO OBTAIN ADDITIONAL INFORMATION

This notice summarizes only the federal (not state or local) tax rules that might apply to your payment. The rules described above are complex and contain many conditions and exceptions that are not included in this notice. Therefore, you may want to consult with a professional tax advisor before you take a payment of your benefits from your plan. Also, you can find more specific information on the tax treatment of payments from qualified employer plans in IRS Publication 575, Pension and Annuity Income, and IRS Publication 590, Individual Retirement Arrangements. These publications are available from your local IRS office, on the IRS's Internet Web Site at www.irs.gov, or by calling 1-800-TAX-FORMS.

Withdrawal Request-Governmental Deferred Compensation Plan

Mail Address:
Retirement Plan Service Center
Hartford Life Insurance Company
PO Box 1583, Hartford, CT 06144-1583

Overnight Mail Address:
Retirement Plan Service Center
Hartford Life Insurance Company
1 Griffin Road North, Windsor, CT 06095-1512

Group Contract Number:	Employer:	Social Security Number:

Employee Name: *(Last, First. M.I.)*

Home Address:
☐ New?

City:	State:	Zip:	Resident State:

Home Phone:	Best time to call ☐ AM ☐ PM	Work Phone:	Best time to call ☐ AM ☐ PM	Ext:

A. REASON FOR WITHDRAWAL

☐ Severance from Employment on (Date) _____/_____/_____ on account of: ☐ Termination of employment ☐ Retirement ☐ Death
☐ Withdrawal of Rollover Contribution
☐ QDRO (Qualified Domestic Relations Order)
☐ Unforeseeable Emergency
☐ Purchase of Service Credit. Section C must be completed.
☐ Transfer to another provider in my plan. Section C must be completed.
☐ Direct payment to a qualified health insurance or long term care provider. Section C must be completed.
☐ Required Minimum Distribution (RMD)(IRS requirement must generally begin by age 70 1/2). If you would like Hartford Life to calculate this amount select one method and go to section D; otherwise complete the amount in section B. If the withdrawal is being used for RMD it can be based on the revised IRS divisor or the joint life expectancy method if your spouse is more than 10 years younger. Indicate if the calculation method is ☐ Regular or ☐ Spouse>10 years younger. Spouse date of birth: _____/_____/_____

B. WITHDRAWAL OPTIONS

I. Full Withdrawal (close my account)

☐ Entire account balance payable as a transfer or rollover as specified in Section C.
☐ A distribution of entire account balance paid out in the following combination: $_____or_____% payable to me, less applicable withholding, plus a transfer or rollover of my remaining assets as specified in Section C.
☐ Entire account balance payable to me.

II. Partial Withdrawal

☐ Partial account balance for $_____or_____% payable as a transfer or rollover as specified in Section C.
☐ Partial account balance for $_____or_____% payable to me.

Note: The net amount you will receive for your partial withdrawal will be the amount you requested less any taxes or fees, unless otherwise requested in special instructions. Your partial withdrawal will be taken from your current account balances and contribution sources on a pro-rata basis unless special instructions are provided below. If desired, indicate contribution source and/or investment option:

☐ Employee Contributions ☐ Employer Contributions ☐ Deferred Compensation Plan Rollovers ☐ Miscellaneous Rollovers

Special Instructions: _____

C. PAYEE INFORMATION

☐ **Direct Rollover to an eligible Plan:**
☐ IRA ☐ 457 ☐ 401 ☐ 403(b) Account No. _____

Check payable to: _____

Financial Institution Address: _____

☐ **Transfer to another provider in my Plan:** Account No. _____

Provider: _____

Address: _____

☐ **Purchase of Service Credit:** (Trustee to Trustee Transfer)(Check payable to Trustees of the Plan) Account No. _____

Plan Name: _____

Address: _____

☐ **Direct payment to a qualified health insurance or long term care provider:**

Provider: _____

Address: _____

D. MAILING INSTRUCTIONS

Issue a check to me for the amount requested and mail it to me ☐ at the home address indicated on page 3 or ☐ the following address:

Mailing address: _____

_____

☐ I would like to have my check sent via express delivery. I understand that a fee will be charged for this service. Express mail cannot be sent to a P.O. Box.

☐ Wire Transfer my payment to a financial institution. I understand that a fee will be charged for this service. Please attach a voided check.

ABA Routing Number: _____ Bank Account Number: _____

Call our Service Center at 800-528-9009 for fee information.

E. DEATH CLAIM (Include Certified Death Certificate)

Name of Beneficiary: _____ Social Security No. of Beneficiary: _____ Date of Birth: _____

Address: _____

F. FEDERAL TAX WITHHOLDING will be 20% for withdrawals payable to you (eligible rollover distributions). For Required Minimum Distributions, Unforeseeable Emergency Withdrawals or certain Death Claims, withholding is not mandatory, but we are required to apply 10% withholding unless you elect not to have Federal Income Tax withheld. See the Withholding Authorization Form for more information and applicable state income tax withholding.

G. PARTICIPANT/ BENEFICIARY SIGNATURE **You must also obtain an Employer/Authorized Plan Sponsor Signature**

I UNDERSTAND MY CHECK WILL EQUAL THE DOLLAR AMOUNT REQUESTED LESS APPLICABLE TAXES AND FEES.

I also acknowledge that I have read and understand the Special Tax Notice and the Full Disclosure Statement, as applicable to my state, located on page 5 of this form. I understand that a contingent deferred sales charge may apply.

IMPORTANT NOTICE: PLEASE NOTE THAT A DISTRIBUTION IS A TAX REPORTABLE EVENT THAT MAY NOT BE REVERSED.

_____ _____

Participant/ Beneficiary Signature **Date**

H. EMPLOYER/ AUTHORIZED PLAN SPONSOR SIGNATURE

☐ I authorize and direct this distribution requested by the participant or beneficiary.

☐ I authorize and direct this distribution to the participant/ beneficiary in accordance with the plan provisions.

*Please note this signature is not required if the participant is currently receiving IPO/SWO payments and is simply requesting a one time partial withdrawal. This payment will be made by the method (check or EFT) already in place.

_____ _____

Employer/Authorized Plan Sponsor Signature* **Date**

Please note that duplicate requests for distribution, such as a fax followed by a mailed original, may result in multiple distributions. The Hartford will not be responsible for any gain/loss or charges that arise from multiple submissions.

Hartford Life Service Center Use Only:

E Mail	Contact	Date	Time
Phone	Contact	Date	Time

Circle one: A D _____ Plan Manager

Full Disclosure Statement

Arkansas
"Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison."

Colorado
"It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Services."

District of Columbia
"WARNING: It is a crime to provide false or misleading information to an insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant."

Florida
"Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree."

Indiana
"A person who knowingly and with intent to defraud an insurer files a statement of claim containing any false, incomplete, or misleading information commits a felony."

Kentucky
"Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime."

Louisiana
"Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison."

New Hampshire
"Any person who, with a purpose to injure, defraud or deceive any insurance Company, files a statement of claim containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20. However, the lack of such a statement shall not constitute a defense against prosecution under RSA 638:20."

New Jersey
"Any person who knowingly includes any false or misleading information on an application for an insurance policy, or files a statement of claim containing any false or misleading information, is subject to criminal and civil penalties."

Ohio
"Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement, is guilty of insurance fraud."

Oklahoma
"WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony."

Pennsylvania
"Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties."

Spousal Consent for a Distribution Other Than a Qualified Joint and Survivor Annuity

I certify that I, as Spouse of the Participant named below, have received from the Plan Administrator (1) a full and written explanation of the terms and conditions of a Qualified Joint and Survivor Annuity type of benefit with monthly payments in an amount not to be less than 50% of the benefit payable to my spouse as the Participant, and (2) a written explanation of the financial effect of the decision of my spouse not to receive his or her distribution in the form of a Qualified Joint and Survivor Annuity. I understand that my spouse cannot waive the Qualified Joint and Survivor Annuity without my consent. Once I give my consent to my spouse's waiver of the Qualified Joint and Survivor Annuity, I cannot withdraw or revoke my consent. The Qualified Joint and Survivor Annuity entitles me to receive benefits on my spouse's death which I will lose if I consent to this waiver and my spouse receives his or her benefits in another form.

I hereby consent to the form of payment elected by my spouse and waive any and all rights I may have received under the Plan had such distribution been paid in the form of a Qualified Joint and Survivor Annuity.

We hereby swear that this form is being executed under our own free will and with complete understanding of the benefits available to us.

Form of Payment

Participant's Signature

Participant's Name (Print)

Spouse's Signature

Spouse's Signature (Print)

Witness's Signature (Plan Administrator or Notary Public) Date

CERTIFICATION OF MARITAL STATUS IF UNMARRIED

As the Participant named above, I hereby certify that I am not married and that spousal consent is not required on my behalf. I understand the Retirement Equity Act (REA) requires that spousal consent be provided if I am married and hereby swear that such requirement is not applicable to me.

Participant's Signature Date

Witness's Signature (Plan Administrator or Notary Public) Date