



Excess More Than 2½ Months Following Plan Year End Or De Minimis Distributions (<\$100) Within 2½ Months of Plan Year End

Information About the Plan (To Be Completed by Employer)

Plan Name: _____ Plan ID and Division: _____

Information About You (To Be Completed by Participant)

Name (First, M.I. Last)		Social Security Number
Street Address of Legal Residence		If you are not a U.S. citizen OR if you are a resident of Puerto Rico, complete an Income Tax Sheet for Aliens and Residents of Puerto Rico.
City	State	Zip Code

Information About the Corrective Distributions (To Be Completed by Employer)

This correction is for the plan year ending _____ (mmddyy, please specify the exact date).

Corrective Distributions must be made when a participant has excess contributions under the Actual Deferral Percentage (ADP) Test or excess aggregate contributions under the Actual Contribution Percentage (ACP) Test and the employer does not correct these excesses by making Qualified Non-Elective Contributions or Qualified Matching Contributions.

Vesting Schedule Applied to Excess Aggregate Contributions (ACP Test Failures):
If the participant is not 100% vested in employer matching contributions, the non-vested portion of the corrective distribution must be forfeited and cannot be returned to the participant. Once forfeited, these amounts may be used to offset future employer contributions or be applied towards paying plan expenses in accordance with the provisions of your plan document.

Attributable-to-Matching Contributions (ATMs):
"ATMs" are employer matching contributions made on employee pre-tax and/or post-tax contributions that are now being distributed to correct ADP or ACP excesses. "ATMs" must always be forfeited, even if they are vested. Once forfeited, they may be used to offset future employer contributions or to pay plan expenses, as provided in your plan document.

Corrective Distribution (forfeited) Amounts	Earnings	(Prudential will calculate earnings if left blank)
ADP Excess (distributed) \$ _____	\$ _____	\$ _____
Vested ACP Excess (distributed) \$ _____	\$ _____	\$ _____
Non-vested ACP Excess (forfeited) \$ _____	\$ _____	\$ _____
ATMs (forfeited) \$ _____	Not Applicable	

Income Tax Withholding Information (To Be Completed by Participant)

Corrective distributions are not eligible for rollover and are exceptions to the mandatory 20% federal income tax withholding requirements. Instead, they are subject to withholding at a rate of 10%. However, you can elect not to have federal income taxes withheld from these payments. (Non-resident aliens and U.S. citizens whose payments are delivered outside the U.S. or who have resident addresses outside the U.S. cannot elect out of federal withholding.) If you choose not to have federal and/or state income tax withheld, you are still liable for the payment of taxes on the taxable portion of the distribution. If you pay estimated taxes under estimated tax rules, you may be subject to tax penalties if estimated taxes are not accurate.

Check here if you elect out of federal income tax withholding

Read the State Withholding Information Sheet before you complete this section. If you do not have a copy of the State Withholding Information Sheet, please contact your plan administrator.

What is your state of legal residence? _____

Do you want to have state income tax withheld from your payment?
 No Yes Complete the following: Amount to withhold, if applicable \$ _____

Approval (To Be Completed by Participant and Employer)

I certify that the plan administrator has explained the terms and conditions of my choices.

Participant's Signature: _____ Date: _____

I certify that the information above is complete and accurate. The distribution is either a de minimis distribution of <\$100 (without earnings) made within 2½ months of the plan year end or a distribution made more than 2½ months following the plan year end indicated above. I understand that if this form is not received by Prudential Retirement at least 30 days prior to the end of the 12-month period following the plan year end noted above, the distribution will not be made by the IRS deadline.

Company Authorization: _____ Date: _____