

# Separation Payout Form LIRR – Deferral Election Form

HR-DEFCOMP-074A



## Section 1 - Information and Instructions

The purpose of this form is to specify how you wish to allocate your final payout upon retirement or separation from **MTA LIRR**. Employees of **agencies other than LIRR should complete form HR-DEFCOMP-074**. If you do not submit this form, your current 401(k) and 457 Plan deferral election(s) will apply.

**NOTE:** Traditional 401(k) and 457 Plan contributions are exempt from federal and state taxes; Roth contributions are made on an after-tax basis, therefore they are NOT exempt from federal and state taxes. Whether you elect to make traditional pre-tax deferrals or Roth after-tax deferrals, the gross amount of your payment is still subject to FICA taxes (Social Security and Medicare required withholding, or the equivalent under the RRB). Since the amounts withheld for FICA (or the equivalent) cannot be deferred into the Plans, they are considered income/wages and are therefore (federally and state) taxable. As a result, even if you elect to defer 100% of your payment, the final percentage deferred will be less than 100% because of the required withholdings. You should always consult with a tax advisor for advice on your personal tax situation.

All amounts deferred (pre-tax and Roth) will be limited by the IRS annual contribution limit, which is inclusive of any contributions already made through payroll deductions during the same calendar year. 401(k) contribution amounts will always be deducted first, followed by required withholding amounts (as described above), and finally, 457 contribution amounts. For more information on contribution limits, please contact Empower at 1-877-756-4682.

Please fax a signed copy of the form to 212-852-8700 or e-mail a signed copy of the form to [bscservice@mtabsc.org](mailto:bscservice@mtabsc.org). If you have any questions, please contact MTA Business Service Center (BSC) at 646-376-0123 or [bscservice@mtabsc.org](mailto:bscservice@mtabsc.org).

## Section 2 - Employee Information

Print Name	Last First M.I. Suffix	BSC ID
Agency: LIRR	Department	<input type="checkbox"/> Check here if you are transferring agencies
Street Address		
City	State	Zip Code
Phone (H)	Phone (W)	Email

## Section 3 – Allocation of Final Payout to Deferred Compensation Plans

As a result of my separation on \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YYYY) from LIRR, I would like my final payouts distributed as follows:

SICK TIME (a)	VACATION TIME (b)	ADJUSTMENTS (c)
<input type="checkbox"/> I want no change to my current Deferred Compensation elections	<input type="checkbox"/> Apply the <u>same elections as column (a)</u> . If checked, DO <b>NOT</b> complete the following.	<input type="checkbox"/> Apply the <u>same elections as column (a)</u> . If checked, DO <b>NOT</b> complete the following.
<input type="checkbox"/> I want no Deferred Compensation deductions taken from this payment.	<input type="checkbox"/> I want no change to my current Deferred Compensation elections	<input type="checkbox"/> I want no change to my current Deferred Compensation elections
<input type="checkbox"/> I want a different deferral amount than my current elections (fill in below):	<input type="checkbox"/> I want no Deferred Compensation deductions taken from this payment.	<input type="checkbox"/> I want no Deferred Compensation deductions taken from this payment.
<input type="checkbox"/> 401(k) _____ % OR \$ _____	<input type="checkbox"/> I want a different deferral amount than my current elections (fill in below):	<input type="checkbox"/> I want a different deferral amount than my current elections (fill in below):
<input type="checkbox"/> Roth 401(k) _____ % OR \$ _____	<input type="checkbox"/> 401(k) _____ % OR \$ _____	<input type="checkbox"/> 401(k) _____ % OR \$ _____
<input type="checkbox"/> 457 _____ % OR \$ _____	<input type="checkbox"/> Roth 401(k) _____ % OR \$ _____	<input type="checkbox"/> Roth 401(k) _____ % OR \$ _____
<input type="checkbox"/> Roth 457 _____ % OR \$ _____	<input type="checkbox"/> 457 _____ % OR \$ _____	<input type="checkbox"/> 457 _____ % OR \$ _____
	<input type="checkbox"/> Roth 457 _____ % OR \$ _____	<input type="checkbox"/> Roth 457 _____ % OR \$ _____

# Separation Payout Form LIRR – Deferral Election Form

HR-DEFCOMP-075



Do you wish to use the 457 Plan special catch-up feature? ☐ Yes ☐ No

If you check yes, you will need to complete and submit an additional form. Please open a ticket with the BSC directed to the Deferred Compensation department or call Empower 1-877-756-4682 to determine your eligibility, obtain this form, and for help completing the form. If you are eligible, the special catch-up may provide an increased annual contribution limit in the 457 Plan.

## Section 4 – Acknowledgment & Authorization

*I authorize the MTA to defer my Separation Payout as indicated above. I understand that these deferrals are subject to IRS limits for each calendar year and that this payment is a part of my W-2 wages and therefore subject to certain required tax withholdings as described in Section 1 of this form. I also understand that wages can only be deferred into the 401(k) or 457 Plan up to the later of: (1) the end of the calendar year in which I separate from service with the MTA and (2) 2 ½ months following the end of the calendar year in which I separate from service with the MTA. Finally, I acknowledge that this signed form must be received by the MTA before my Separation Payout check is issued. Forms signed or received after the payment has been made will not be honored.*

Employee Signature

Date:

SSN Last 4 Digits