



RETIREMENT PLAN RESELECTION FORM

Combined Plan Enrollees Eligible for Permanent Reselection

Deadline: June 1, 2019

Name _____ Member's Social Security no. _____
or STRS Ohio account no. _____

Address _____
Street City State ZIP code

Home phone _____ Email _____

Cell phone _____ Work phone _____

Please check one box. This selection will be your plan for as long as you remain an STRS Ohio member.

I elect to remain enrolled in the Combined Plan. (If you elect this plan, you do not need to return this form.)

The Combined Plan includes features of the Defined Benefit and the Defined Contribution Plans. A portion of your retirement income is based on the performance of investment choices you select for your contributions. The plan provides service retirement, disability and survivor benefits and access to health care coverage* in retirement when eligibility conditions are met. Payable at age 60, service retirement income from the defined benefit portion is determined by a calculation, set by statute, based on service credit and salary. The service retirement benefit from the defined contribution portion is based on the amount contributed to your account, the performance of your investment choices and annuity rates at retirement.

I elect to enroll in the Defined Contribution Plan.

If you make the Defined Contribution Plan your permanent plan:

- Your Combined Plan account will be closed.
 - The account balance in the defined contribution portion of your Combined Plan account will be deposited to your new Defined Contribution Plan account.
 - Once final service credit has been reported at the end of the current fiscal year, the withdrawal value of your defined benefit, if any, will be determined and added to your Defined Contribution Plan account following your current allocation.
- Retirement income is based on the amount contributed to your account, the performance of investment choices you select and annuity rates at retirement.
- Disability benefits, survivor benefits and health care coverage in retirement are not provided under this plan.
- Contribution rates are established by the State Teachers Retirement Board and are subject to change.

I elect to enroll in the Defined Benefit Plan.

If you make the Defined Benefit Plan your permanent plan:

- Your Combined Plan account will be closed and you will no longer have a defined contribution portion to manage.
- Your retirement income will be determined by a calculation, set by statute, based on service credit and salary.
- Disability benefits, survivor benefits and access to health care coverage* in retirement will be provided when eligibility conditions are met.

I certify that I have read the materials supplied by STRS Ohio and have selected the plan indicated above. I understand that my plan election is irrevocable and that I cannot change my plan election while I am a member of STRS Ohio.

Member's signature _____ Date _____

This form must be completed, signed and returned to STRS Ohio by June 1, 2019. It can be returned any of the following ways:

ONLINE | **MAIL** it in the enclosed envelope | **EMAIL** it to contactus@strsoh.org | **FAX** it to 614-233-8713

To make your plan selection online at www.strsoh.org: log in to your Online Personal Account, click on "Member Information" in the top menu and then "Retirement Plan Reselection" under Useful Links.

If we do not receive your plan selection by the deadline, under Ohio law you will stay in the Combined Plan for as long as you remain an STRS Ohio member.

*The STRS Ohio Health Care Program is not guaranteed. STRS Ohio may change or discontinue all or part of the program for all or a class of eligible benefit recipients and covered dependents at any time. Premium rates and eligibility for health care are established by the State Teachers Retirement Board and are subject to change.

