

Boston University Supplemental Retirement and Savings Plan Employee Contribution Withdrawal Request

Under the terms of the Supplemental Retirement and Savings Plan (the "Plan"), an employee may withdraw automatic enrollment contributions (with earnings) by completing a withdrawal election form and returning the completed form to Human Resources no more than 90 days after the employee's first automatic enrollment contribution was withheld from the employee's wages. Use this form to request a withdrawal of your automatic enrollment contributions. Note that if you choose to withdraw your automatic enrollment contributions, you will lose any associated University Matching Contributions and the amount refunded to you will be subject to federal and state income tax withholding for the year in which you receive the refund.

Human Resources must receive this form, signed and dated, no later than 90 days after automatic enrollment contributions were first taken from your pay in order for your refund to be made.

I _____ (Print Name) hereby request a withdrawal of all of the automatic enrollment contributions made on my behalf to the Supplemental Retirement and Savings Plan, which commenced on _____ (date of first automatic employee contribution), together with any earnings/losses. I understand that I will forfeit any University Matching contributions, if applicable, that would have been made on my behalf with respect to the automatic enrollment contributions. I also understand that my refunded contributions will be subject to federal and state income tax.

You must sign and date this form, and return it to Human Resources not later than 90 days after automatic enrollment contributions were first taken from your pay, for your withdrawal request to be effective.

Employee's Signature (Wet Signature Required)

Employee's BU ID Number

Signature Date

Please return signed and dated agreement to: Human Resources, 25 Buick Street, Boston, MA 02215 or email it to hr@bu.edu.