Provider-to-Provider Account Transfer

457(b) and Governmental 401(a) Retirement Plans

Use this form if you want to
- transfer your account from another provider under your current Plan to your existing account at MassMutual Retirement Services ("MassMutual").

Do not use this form to:
- submit a rollover in. Complete a *Rollover In/Plan-to-Plan Transfer In Form*.
- submit a plan-to-plan transfer in. Complete a *Rollover In/Plan-to-Plan Transfer In Form*.

MassMutual will not process this form until it is received in good order. Please see the Important Information Section for information on "Good Order" requirements.

Questions?
Call
MassMutual's Customer Service Center
1-800-528-9009

Fax
1-860-843-3280

Online
retire.hartfordlife.com

Section A - Plan Information

Group No	Plan Name

Section B - Participant Information

SSN	Participant Name	Date of Birth

*Legal Address			
City	State	Zip Code	Daytime Phone Number
Financial Advisor's Name		Financial Advisor's Phone Number	
Financial Advisor's Email			

*We will change your account information to reflect the Legal Address above and all future mailings will be sent to this address unless changed by you or your Plan Administrator as described under "Stale Address" in the *Important Information* Section.

Section C - Transfer Information

I hereby request a transfer to my ☐ 457(b) OR ☐ 401(a) account with MassMutual of: (Select one below)

☐ all amounts **OR** ☐ $ ________________ of my existing ☐ 457(b) or ☐ 401(a) account value.

Transfer From:

Provider	Account Number
Address	Phone Number

GPROCESS/ GROLOVERIN

Section D - Payment Information

For payments made by check, make check payable to:

The Hartford FBO Employee Name____________________ Social Security No. ____________________

Mail check and this form to:

Regular Mail: MassMutual Retirement Services
P.O. Box 1583
Hartford, CT 06144-1583

Overnight Mail: MassMutual Retirement Services
1 Griffin Road North
Windsor, CT 06095-1512

For payments made by ACH or Wire, forward to:

Mellon Bank
Three Mellon Bank Center
Pittsburgh, PA 15259-0001
Money Transfer Dept.
ABA-043000261
Account No 1957963

Include the following information:
Credit Hartford Life - RPSC
FBO: Employee Name ____________________
Social Security No. ____________________
Employer Name ____________________

Section E - Participant Authorization

I understand that if I am currently enrolled in the Plan, my transfer will be allocated among the investment options based upon my current investment elections unless Special Instructions are provided below to invest my transfer.

Special Instructions: ____

____ ____________________
Participant Signature Date

Section F - Plan Administrator Authorization

I authorize this transfer request to the participant's eligible deferred compensation or 401 retirement plan with MassMutual.

____ ____________________
Authorized Plan Administrator's Signature Date

____
Authorized Plan Administrator's Name (please print)

Section G - Important Information

Good Order - "Good Order" means that all sections of the form are complete, the participant has provided their signature authorizing the transaction, the former Plan Sponsor has provided their signature (if required) and the current Plan Sponsor has provided their signature authorizing MassMutual to process the transaction requested on the form (if required).

MassMutual - MassMutual Retirement Services (MMRS) is a division of Massachusetts Mutual Life Insurance Company (MassMutual) and affiliates.

Effective January 1, 2013, Massachusetts Mutual Life Insurance Company ("MassMutual") acquired The Hartford's Retirement Plans Group ("RPG") business. MassMutual has no affiliation, and the RPG business no longer has any affiliation, with The Hartford Financial Services Group, Inc. or any of its subsidiaries. MassMutual has been appointed by Hartford Life Insurance Company ("HLIC") to provide all administrative services necessary to support the insurance contracts issued by HLIC in connection with the RPG business.

The Hartford - "The Hartford" is Hartford Life Insurance Company and its affiliates.

Stale Address - It is important that you notify us if you change your address. Going forward, your address may change in our records either at your or your employer's direction, or as a result of an address confirmation service provided under our agreement with your employer. Under this service, the addresses in our records are compared against and updated quarterly with addresses received from commercial address update services (e.g., the U.S. Postal Service). If your mail is returned to us or your employer tells us your address is incorrect, we are likely to suspend future mailings until a new address is obtained. Unless preempted by federal law, failure to give us a current address may also result in uncashed distributions from your participant account being considered abandoned property under state law, and remitted to the applicable state. To update your address, contact your Plan Administrator or, if permitted by your Plan, log in to our website at retire. hartfordlife.com and select the "My Profile" tab at the top of the screen.