

**Utah Retirement Systems**

PO Box 1590
Salt Lake City, UT 84110-1590
801-366-7318 | 800-753-7318
www.urs.org

STATE OF UTAH
Tier 1 REQUEST FOR EXEMPTION
UNDER UTAH CODE ANN.
§ 67-22-2, § 49-12-203,
§ 49-13-203, & § 49-19-403

1. Please type or print clearly in black ink.

EMPLOYER INSTRUCTIONS: 2. Complete Section A, give to the employee to verify information, sign and return. Keep a copy for your records and forward original to the Retirement Office. Add the position to your annual Exemption plan where applicable.

EMPLOYEE INSTRUCTIONS: 3. Review section A for accuracy. Read and complete Section B. Your signature is required to complete the request for exemption. Return this form to your employer.

4. If you or your employer will be contributing to a Defined Contribution plan please set up allocations and deferrals at our web site www.urs.org through the myURS member log in.

SECTION A - EMPLOYEE INFORMATION AND EXEMPT CLASSIFICATION - TO BE COMPLETED BY EMPLOYER

Employee Name (first, middle, last)		Date of Birth (mm/dd/yyyy)		Social Security Number	
Employee Mailing Address		City	State	Zip	Date Hired
Name of Employing Agency		Agency Number		Employee Position	

☐ **Legislator - Utah Code Ann. § 49-19-403**

As a legislator who is eligible for retirement coverage, I elect to forfeit the benefits provided by membership in the URS Defined Benefit System and instead, I elect to participate in a URS Defined Contribution Plan. I choose to exempt from membership as of _____.

(Date)

☐ **Governor - Utah Code Ann. § 49-19-403**

As a governor of the state of Utah who is eligible for retirement coverage, I elect to forfeit the benefits provided by membership in the URS Defined Benefit System and instead, I elect to participate in a URS Defined Contribution Plan. I choose to exempt from membership as of _____.

(Date)

☐ **Other State Officers and Employees - Utah Code Ann. § 49-12-203(4) & 49-13-203(4)**

As an officer of the state of Utah or as an employee of the Governor's Office of Planning and Budget, Governor's Office of Economic Development, Commission on Criminal and Juvenile Justice, the Governor's Office, or the State Treasurer's Office, or appointees of the Utah National Guard, I elect to forfeit the benefits provided by membership in the URS Defined Benefit System and participate in a URS Defined Contribution Plan. I choose to exempt from membership as of _____.

(Date)

☐ **At-Will Employee**

As a person appointed by the Speaker of the House of Representatives, the House of Representatives minority leader, the President of the Senate, the Senate minority leader; or an employee of the Governor's Office of Economic Development, who has been hired directly from a position not covered by a system, I choose to exempt from membership in Utah Retirement Systems as of _____.

(Date)

☐ **Exempt Full-Time Student, Spouse of Full-Time Student, Trainee - Utah Code Ann. § 49-12-203(4) & 49-13-203(4)**

As a full-time student, the spouse of a full-time student or as an individual employed in a trainee relationship, I choose to exempt from membership in the URS Defined Benefit System. I agree to notify my employer and the Retirement Office immediately should my status change in any way, making me ineligible for continuing exemption. I choose to exempt from membership as of _____.

(Date)

The employer certifies this employee is eligible for service credit for the reason noted above. The employer makes a continuing certification the employee is eligible for service credit. The employer must notify the Retirement Office when the employee becomes ineligible or terminates employment.

Authorized DHRM Signature (required)	Date
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SECTION B - DEFINED BENEFIT - EMPLOYEE SECTION

I understand by exempting, I will not accrue service credit toward a monthly retirement benefit during the period of exemption.

Employee Signature (required)	Date
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PERTINENT INFORMATION FOR EXEMPTIONS

Exemption Time Frames

Exemption elections are subject to certain timing restrictions. Generally, exemptions may only be made when an employee initially begins employment with an employer and prior to participation in any retirement plan of the employer. Once an employee has participated with any plan of the employer, employees are prohibited from making a participation election, including to elect exemption or revoke an exemption, throughout the duration of their employment with that employer, regardless of position changes, promotions, or a termination and rehire.

Service Accrual

Employees don't accrue service credit towards a defined benefit retirement during the period of exemption.

Exemption Cancellations

Generally, an exempt employee may not elect to revoke or cancel any exemption. Once the exemption election has been made and the plan participation has begun, the employee must remain in that plan for the duration of the employee's employment with that employer unless an employee changes positions to one that is not eligible to exempt. Employees who are in a position that no longer qualifies for exemption from specific coverage or vesting shall be returned to the participation or vesting requirements of the system in which they should be participating.

Transfer of Contributions

Employees who exempt are not eligible for a refund of member contributions, because they have not separated from employment; however, they may request a direct transfer of member contributions, if any, to a qualified defined contribution plan administered by our office. Contact the Retirement Benefits Department (801-366-7770 or 800-695-4877) for more information.