

Alameda Country Employees' Retirement Association
 475 14th Street, Suite 1000
 Oakland, CA 94612-1000



Member Name
 Address1
 Address2
 United States

**SAMPLE EFT ADVICE
 (DIRECT DEPOSIT)**

Date: 3/31/2015*

3rd month
 of the year

GROSS DISTRIBUTION		WITHHOLDINGS	
Base Amount	895.74	Federal Tax Withholding	8/1/0.00 28.75
MBRP – Medicare Part B Reimbursement Plan	104.90	CA-State Tax Withholding	8/1/0.00 0.00
Cost of Living	119.43		
		WITHHOLDINGS	
			28.75
		OTHER DEDUCTIONS	
		REAC Dues	1.00
		Delta Dental PPO 1 Party	37.07
		Kaiser 1 Party-HMO	278.70
		VSP 1 Party	5.52
GROSS DISTRIBUTION TOTAL	1120.07		
NON-TAXABLE SUBSIDIE**			
Delta Dental PPO 1 Party (Subsidy)	37.07		
Kaiser 1 Party-HMO (Subsidy)	249.84		
VSP 1 Party (Subsidy)	5.52		
		Member Monthly Retiree Associations/ Health Plans Costs	
		Contribution to the plan, which were taxed prior to 1/1/1985 or purchased payment made with check/cashier check after 1/1/1985.	
NON-TAXABLE SUBSIDIES TOTAL	292.43	OTHER DEDUCTIONS TOTAL	322.29

SUMMARY							
GROSS DISTRIBUTION*	1120.07	EXCLUDE FROM TAXATION****	104.90	POST-TAX CONTRIBUTIONS OR ROLLOVER DISTRIBUTIONS***	2.48	TAXABLE AMOUNT	1012.69
		1120.07-104.90-2.48=1012.69					
Total Distribution and Non-Taxable Subsidies	1412.50	Total Withholdings and Deductions	351.04	Net Amount	1061.46		
				1412.50 - 351.04 = 1061.46			

***"Gross Distribution" is the amount used for 1099R at year's end, with the exception of MBRP benefit payment, if applicable.
 ***"Non-Taxable Subsidies" are ACERA-Paid contributions paid toward health, dental and vision plan premiums, if applicable, and are not included in gross earning for 1099R at year's end.
 ****"Post-Tax contribution or Rollover Distribution" is the non-Taxable distributions of previously taxed contributions and or post-tax purchase of service or rollover distributions, if applicable.
 *****"Excluded from Taxation" is the non-taxable portion of a service-connected disability benefit, if applicable, and MBRP benefit, if applicable.

YEAR TO DATE				
GROSS DISTRIBUTION	TAXABLE	TAX FREE	FED TAX WITHHELD	CA STATE TAX WITHHELD
3360.21	2438.07	296.64	86.25	0.00

$1120.07 \times 3 (*Months) = 3360.21$	$812.69 \times 3 (*Months) = 2438.07$	$2734.71 - 2438.07 = 296.64$	$28.75 \times 3 (*months) = 86.25$
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SAMPLE CHECK STUB

3rd month
of the year

NAME:		DATE: 3/31/2015*	
GROSS DISTRIBUTION		WITHHOLDINGS	
Base Amount	1130.48	CA-State Tax Withholding	12.33
MBRP – Medicare Part B Reimbursement Plan	104.90		
Cost of Living	93.19		
		WITHHOLDING TOTAL	12.33
		OTHER DEDUCTIONS	
		ACRE DUES	3.00
		Delta Dental PPO 1 Party	37.07
		UnitedHealthCare 1 party-Med Adv.	332.00
		VSP 1 Party	5.52
GROSS DISTRIBUTION TOTAL	1328.57		
NON-TAXABLE SUBSIDIES**			
Delta Dental PPO 1 Party (Subsidy)	37.07		
UnitedHealthCare 1 party-Med Adv. (Subsidy)	249.84		
VSP 1 Party (Subsidy)	5.52		
NON-TAXABLE SUBSIDIES TOTAL	292.43	OTHER DEDUCTIONS TOTAL	377.59

ACERA
Monthly Health
Plans
Reimbursement

Member
Monthly Retiree
Associations/
Health Plans Costs

CHECK SUMMARY				
	<div style="border: 1px solid black; border-radius: 10px; padding: 2px; display: inline-block;"> $1328.57 - 104.90 - 0.04 = 1223.63$ </div>			
GROSS DISTRIBUTION*	1328.57	EXCLUDED FROM TAXATION***	104.90	TAXABLE AMOUNT
				1223.63
Total Distribution and Non-Taxable Subsidies	1612.50	Total Withholding And Deductions	389.92	Net Amount
				1222.58

Contribution to the plan, which were taxed prior to 1/1/1985 or purchased payment made with check/cashier check after 1/1/1985.

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YEAR TO DATE				
GROSS DISTRIBUTION	TAXABLE	TAX FREE	FED TAX WITHHELD	CA STATE TAX WITHHELD
3985.71	3670.89	289.32	0.00	36.99

1328.57 x 3(*months) = 3985.71

1223.63 x 3(*months) = 3670.89

3960.21 - 3670.89 = 289.32

12.33 x 3 (*months) = 36.99