

The Pension Boards
United Church of Christ, Inc.



Rollover/Exchange Form Instructions

for the Pension Boards – United Church of Christ (PBUCC) Tax Sheltered Annuity (TSA)

Reference the instructions below while completing the form. For additional assistance, please contact Fidelity Investments via PBUCC Members Services at 1-800-642-6543, Monday through Friday, 8:30 a.m. to midnight Eastern time (excluding New York Stock Exchange holidays, except Good Friday).

1. YOUR INFORMATION

Please provide your information in this section.

2. INVESTMENT PROVIDER YOU ARE MOVING MONEY FROM

Please review your most recent statement for this name and address, and include a copy of the statement with this form. **Please contact your previous investment provider to see if additional paperwork is required.**

3. ACCOUNT(S) OR CONTRACT(S) TO MOVE

Account or Contract Number: This number is available on your previous investment provider account statement. If you are unable to locate this number on your statement, please contact the investment provider. If you do not provide an account or contract number, we will use your Social Security number or U.S. Tax Identification number to request the assets to be moved.

Type of Account or Contract: If you are unsure of the type of account or contract, please contact the Previous Investment Provider or refer to your statement. Select at least one.

The Account or Contract Number is from: Please see the descriptions below that relate to each of the four transactions. If you choose “A Previous Employer,” provide the name of that employer.

A Previous Employer. For 403(b) and 401(a)/(k) plans, this is a rollover transaction. For governmental 457(b) plans, this is a rollover unless Fidelity receives direction to process as a transfer.

A Rollover IRA. This is a rollover transaction. After-tax value may not be rolled from an IRA.

A Traditional IRA or SEP IRA. This is a rollover transaction. Roth IRAs and Coverdell IRAs cannot be accepted.

Liquidation Amount: Specify the amount of money you want moved to your Fidelity account. If you choose “Full Liquidation/100%,” Fidelity will request your full balance. If you choose “Partial Liquidation,” Fidelity will request the dollar amount or percentage you specify. **If you do not specify an amount, Fidelity will move/liquidate 100%.** If you are moving 457(b) assets, please be aware that governmental 457(b) assets must be moved into a governmental 457(b) plan, and nongovernmental 457(b) assets must be moved into a nongovernmental 457(b) plan. Transfers from nongovernmental 457(b) plans are not provided for on this form. Talk with your plan sponsor or call Fidelity to discuss transfers from nongovernmental 457(b) plans. Rollovers from 403(b) plans, 401(a)/401(k) plans, and IRAs to governmental 457(b) plans must be recordkept in separate rollover sources to limit the distributions that may be subject to a 10% early distribution penalty.

4. YOUR FIDELITY ACCOUNT INFORMATION

If you do not have a retirement account with Fidelity for the employer listed here, you must complete the enrollment process. For help with enrollment, please contact Fidelity via PBUCC Members Services at 1-800-642-6543.

Employer Sponsoring Your Fidelity Retirement Account: The employer name appears on your Fidelity account statement or in your enrollment paperwork.

Plan Type with this employer: This information is required to ensure that Fidelity credits your assets to the proper account. Please contact Fidelity via PBUCC Members Services at 1-800-642-6543 if you do not know your plan type.

Plan Number: Please provide the plan number if you have multiple retirement plan accounts with Fidelity. Please contact Fidelity via PBUCC Members Services at 1-800-642-6543 to obtain the plan number.



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5. INVESTMENT INSTRUCTIONS

Would you like the assets invested in your current investment selection? If “Yes” is selected, your assets will be allocated to your current investment selection on file with Fidelity. If you do not select “Yes,” please list the fund names, fund codes (if known), and percentages. **Please ensure that the percentages equal 100%.** Please list any additional funds on a separate page and attach it to this form.

Fund Name: List the fund name(s) you want your assets credited to.

Fund Code: Provide the four-digit fund code(s) (if known).

Note: If no investment options are selected, your investment instructions are incomplete or invalid, or the percentages listed are less than or exceed 100%, your entire contribution will be defaulted to the investment elections on file with Fidelity. If you have no investment elections on file, your entire contribution will be defaulted to the investment option specified in the agreement currently in place with Fidelity for the Plan.

6. EMPLOYER PLAN ACCEPTANCE

Employer Authorized Signature: An authorized signature from the employer that sponsors your Fidelity retirement account is required.

7. SIGNATURE AND DATE

Please read the legal information provided in this section and then sign and date the form. We are unable to process your request without your signature and the date.

Rollover/Exchange Form Checklist:

Use this checklist to ensure your request is complete:

Remember to return all pages of this form.

- Include your most recent account statement from your previous investment provider.
- Indicate the amount or percentage of money you are moving to Fidelity.
- Sign and date Section 7 of this form.
- Please contact your previous provider to see if additional paperwork is required.
- Return completed form in a legible condition.

Ways to Return This Form to The Pension Board - United Church of Christ:

Digitally by Email:

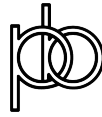
Email: info@pbucc.org

Regular Mail

The Pension Boards - United Church of Christ, Inc.
475 Riverside Drive, New York, NY 10115

Questions?

Call Fidelity via PBUCC Members Services at 1-800-642-6543, business days (except NYSE holidays) from 8:30 a.m. – midnight ET.



Rollover/Exchange Form Instructions

for the Pension Boards – United Church of Christ (PBUCC) Tax Sheltered Annuity (TSA)

Instructions: Use this form to move assets to your Fidelity employer-sponsored retirement account from a previous investment provider. You may also use this form to consolidate multiple employer-sponsored retirement accounts currently at Fidelity. **If you do not have a retirement account with Fidelity, you must also complete an Account Application/Enrollment Form or, when available, enroll online at netbenefits.com/atwork.** If your current employer does not offer a retirement plan record kept by Fidelity, your employer needs to establish a retirement plan prior to your vendor or contract exchange, or rollover to a Fidelity account. An incomplete form may delay the processing of your request. Use a separate form for each investment provider.

Unless otherwise instructed by your employer, please return this completed form, along with a copy of a recent statement:

Or use one of these alternate methods:

Digitally by Email:

Email: info@pbucc.org

Regular Mail

The Pension Boards - United Church of Christ, Inc.
475 Riverside Drive, New York, NY 10115

Questions? Call Fidelity Investments via PBUCC Members Services at 1-800-642-6543, Monday through Friday, 8:30 a.m. to midnight Eastern time (excluding New York Stock Exchange holidays, except Good Friday), for assistance with completing this form.

1. YOUR INFORMATION

Please use a **black** pen and print clearly in **CAPITAL LETTERS**.

Social Security # or Tax ID #: Date of Birth:

First Name: Middle Initial:

Last Name:

Mailing Address:

City: State:

ZIP Code:

Daytime Phone: Evening Phone:

Email:

2. INVESTMENT PROVIDER YOU ARE MOVING MONEY FROM

Name of investment provider you are moving money from:
(e.g., AIG Retirement, TIAA-CREF, Vanguard, Voya, Lincoln):

Please include a copy of your most recent account statement from your investment provider.

Provider Street Address:

City: State:

ZIP Code:

Provider Phone: Ext:

Please contact your previous investment provider to see if additional paperwork is required. Use a separate form for each investment provider.



3. ACCOUNT(S) OR CONTRACT(S) TO MOVE

Please provide information about the account(s)/contract(s) you wish to move to Fidelity. If no account or contract numbers are provided, we will use your Social Security number or U.S. Tax ID number to request the assets to be moved. Please make additional copies of this page and the next page if you have more than two accounts/contracts to move.

3A. FIRST ACCOUNT/CONTRACT (if more than one account/contract, please complete section 3B in addition to section 3A)

1. Account/Contract #:

Type: 403(b) Include Roth 403(b) balance 401(a)/(k) Include Roth 401(k) balance
(select at least one) 457(b) governmental Include Roth 457(b) governmental balance IRA

2. Please check the box that most accurately reflects the transaction that you are requesting. Note that your selection will dictate how we process this transaction. Please read Section 3 of the instructions for more details.

A Previous Employer

Previous Employer Name:

A Rollover IRA

A Traditional IRA or SEP IRA

3. Liquidation Amount Full Liquidation/100% Partial Liquidation % OR \$
(select one)

Unless otherwise specified, I request the previous investment provider to liquidate 100% of my account.

3B. SECOND ACCOUNT/CONTRACT (if applicable)

1. Account/Contract #:

Type: 403(b) Include Roth 403(b) balance 401(a)/(k) Include Roth 401(k) balance
(select at least one) 457(b) governmental Include Roth 457(b) governmental balance IRA

2. Please check the box that most accurately reflects the transaction that you are requesting. Note that your selection will dictate how we process this transaction. Please read Section 3 of the instructions for more details.

A Previous Employer

Previous Employer Name:

A Rollover IRA

A Traditional IRA or SEP IRA

3. Liquidation Amount Full Liquidation/100% Partial Liquidation % OR \$
(select one)

Unless otherwise specified, I request the previous investment provider to liquidate 100% of my account.

I certify that \$ _____ of this rollover contribution was earned while performing the duties of a minister (as described in Section 107 of the Internal Revenue Code.) I understand that for the housing allowance exemption, it is my responsibility to track actual housing expenses and to determine the fair rental value of my housing. ***If you are unsure of the exact dollar amount but 100% of the amount of the rollover was earned while performing the duties of a minister, please write "ALL" in the line above.*** (This amount is updated to the Rollover/Transfer-Housing Allowance source, the remaining amount to the Rollover/Transfer-No Housing Allowance source.)

Your Signature:

Date:

Print Name:

Date:

4. YOUR FIDELITY ACCOUNT INFORMATION



If you do not have a retirement account with Fidelity for the employer listed below, or you do not know the plan number or type, please contact Fidelity via PBUCC Members Services at 1-800-642-6543.

Employer Sponsoring Your Fidelity Retirement Account:

(This name appears on your Fidelity statement, or in your enrollment paperwork.)

City & State of Employer:

Are you still employed with this Employer? Yes No

4A. Fidelity Account Information for 3A or 3B

Plan Type: 403(b) 401(a)/(k) 457(b) governmental

Plan Number (if known):

(55984 for U.S. Plan, 82883 for Puerto Rico Plan)

Member ID:

5. INVESTMENT INSTRUCTIONS

Would you like the assets invested in your current investment selection?

Yes

No (specify below)

Fund Name(s):

Fund Code:

OR

OR

OR

OR

 %
 %
 %
 %

Total = 100%

If no investment options are selected, your investment instructions are incomplete or invalid, or the percentages listed are less than or exceed 100%, your entire contribution will be defaulted to the investment elections on file with Fidelity. If you have no investment elections on file, your entire contribution will be defaulted to the investment option specified in the agreement currently in place with Fidelity for the Plan.

6. EMPLOYER PLAN ACCEPTANCE

An authorized signature from the employer that sponsors your Fidelity retirement account is required.

Plan Sponsor (PBUCC) Authorized Signature:

Date:

Plan Sponsor (PBUCC) Authorized Printed Name:



7. SIGNATURE AND DATE

By signing this form:

- I hereby direct the investment provider identified on this form in Section 2 to liquidate the designated amount of the account(s) listed on this form, and to release the proceeds to my account under my employer's plan, except to the extent my current employer or any of my former employers prohibit such release. In the event of such prohibition, I hereby direct said investment provider to retain the portion of my account(s) that cannot be released in a separate account or contract and to release the remainder.
- I hereby agree to the terms and conditions stated in this form, including the instructions, and certify that I am requesting a vendor or contract exchange, or rollover, of my retirement plan assets in accordance with applicable IRS and plan rules.
- I certify under the penalties of perjury that my Social Security number or U.S. Tax Identification number on this form is correct.
- I certify that the information provided on this form is true, accurate, and complete to the best of my knowledge.
- I acknowledge that I have read the prospectus(es) for any mutual fund in which I invest and agree to the terms.
- I hereby agree that if my assets will be sent to Fidelity in installments, the first installment may be invested according to my instructions on this form. All subsequent installment payments as well as any residual balances not received within 30 days will be invested according to the investment elections currently in place with Fidelity for the Plan at the time my assets are received by Fidelity.

For 403(b)-to-403(b) vendor or contract exchanges:

- I understand that any balances I am exchanging from a 403(b)(1) annuity into a 403(b)(7) custodial account may be subject to more restrictive withdrawal provisions.
- I understand that if I exchange a contribution source that is not allowed by the Plan, the value associated with the unacceptable source will be returned to the investment provider named in Section 2.
- I direct Fidelity to treat all monies as pretax contributions made subsequent to 12/31/88 unless my prior investment provider provides Fidelity with account balances as of 12/31/88 and post-1988 salary reduction contributions.
- I direct Fidelity to treat the entire balances as subject to minimum distribution requirements unless my prior investment provider provides Fidelity with account balances as of 12/31/86.
- I direct Fidelity to allocate the entire balance to the most restrictive source in the current employer's plan unless my prior investment provider provides Fidelity with the sources of the exchanged amount under the previous plan.

Your Signature:

Date:

Print Name:

Date:

The trademarks and service marks appearing herein are the property of their respective owners.