Pension Fund of the Christian Church

APPLICATION FOR PENSION FUND IRA CONSOLIDATION

Complete this *Application for Pension Fund IRA Consolidation* to consolidate two or more Traditional IRAs and/or two or more Roth IRAs that you already maintain with Pension Fund. You must be either (i) the owner of all IRAs that you are consolidating or (ii) the beneficiary of all inherited IRAs that you are consolidating from the same deceased IRA owner. If you maintain both your own IRAs and inherited IRAs with Pension Fund, complete a separate Application to consolidate each type. You cannot use this Application to convert a Traditional IRA to a Roth IRA. Instead, complete the *Application for Pension Fund IRA Conversion*.

- PLEASE TYPE OR PRINT CLEARLY -

I. IRA OWNER INFORMATION

IRA Owner Name ____
(first) (middle) (last/family name)

☐ ***Check here if there has been a change to your contact information on file.***

Home Address ______________________________ Member Ref. No.______________

City ______________________ State ____________ Country ____________ Zip Code _______-_______

Primary Phone Number (_______) ______________ E-Mail Address ______________________

II. BENEFICIARY INFORMATION – COMPLETE FOR INHERITED IRA CONSOLIDATION ONLY

Original Owner Name ____
(first) (middle) (last/family name)

Individual/Trust Beneficiary Name ____
(first) (middle) (last/family name)

☐ ***Check here if there has been a change to your contact information on file.***

Mailing Address ____

City ______________________ State ____________ Country ____________ Zip Code _______-______

Primary Phone Number (_____) ______________ E-Mail Address ______________________

If the beneficiary is a minor, provide the following information for the minor's parent or legal guardian:

Name ______________________________ Last four digits of Social Security No./ITIN __ __ __ __
(first, middle, last/family name)

Mailing Address ____

City ______________________ State ____________ Country ____________ Zip Code________-____________

Primary Phone Number (______) ____________ E-Mail Address ______________________

Relationship to Minor Child ____

III. IRA CONSOLIDATION

When you consolidate your Pension Fund IRAs (including inherited IRAs from the same IRA owner), Pension Fund will transfer the assets in your transferring IRA(s) to your surviving IRA. You must indicate below the IRAs you wish to consolidate and the IRA that will be the "surviving" IRA.

I elect to consolidate the following Traditional IRAs:

☐ All Traditional IRA accounts

☐ The following Traditional IRAs:

no.______________________

no.______________________

I elect to consolidate the following Roth IRAs:

☐ All Roth IRA accounts

☐ The following Roth IRAs:

no.______________________

no.______________________

no.________________________ no.________________________

The surviving Traditional IRA shall be: **The surviving Roth IRA shall be:**

no.________________________ no.________________________

IV. NOTICE TO REVIEW BENEFICIARY DESIGNATIONS

Consolidation of your IRAs will impact your current beneficiary designations. To ensure that your IRA assets pass according to your wishes, you are encouraged to review your current beneficiary designation for your surviving IRA and complete a new *Beneficiary Designation Form* if necessary.

IMPORTANT: If you do not make a new beneficiary designation, Pension Fund will apply the current beneficiary designation associated with your surviving IRA account number to your entire consolidated IRA.

V. IRA OWNER CERTIFICATION AND SIGNATURE

By signing this Application, I make the following certifications:

- I certify that the information provided on this Application is accurate.
- I understand that, as a result of the consolidation of my Pension Fund IRAs identified in Section III, all future account statements and distributions from such IRAs will be made from a single "surviving" IRA identified in Section III.
- I understand that if I am consolidating my Traditional IRAs, I continue to be responsible for determining and tracking the cost basis in my surviving IRA.
- I understand that the beneficiary designations in effect for my surviving IRA will apply to all Pension Fund IRAs that are consolidated in Section III, and it is my responsibility to review my beneficiary designations and make any desired changes by submitting a new *Beneficiary Designation Form*. To the extent that I have not made a beneficiary designation under my surviving IRA, or if the beneficiaries I have designated fail to survive me, I understand that my benefits under my surviving IRA will be paid to my estate.

IRA Owner/Beneficiary Signature ________________________________ **Date** ________/________/________

Pension Fund of the Christian Church
P.O. Box 6251, Indianapolis, Indiana 46206-6251
Toll Free Phone: 1.866.495.7322 • Phone: 317.634.4504 • Fax: 317.634.4071
E-mail: pfcc1@pensionfund.org • Website: www.pensionfund.org