



The new church minister must also complete and return a Pension Plan Enrollment Form.

Participation in the Program is approved for up to a 12 month period, and can be renewed for up to four separate 12 month periods, for a total of 60 months of participation. During each 12 month period, the amount of the gift is reduced and the dues paid by the new congregation increase according to the following chart below.

The New Church Gift Pension Program will pay its percentage allocation of dues based on the lesser of (i) the minister's actual salary per month or (ii) a deemed salary of \$1,500 per month. The new congregation will pay its percentage allocation of dues based on the minister's actual salary. The new congregation's percentage allocation of dues can be paid by the new congregation, the minister (as pre-tax or after-tax member dues), or both. If the minister is self-employed, the minister can pay the new congregation's percentage allocation of dues directly to Pension Fund on a pre-tax or after-tax basis from his or her ministerial income only.

Completed Months of Participation	Dues Program Pays	Dues New Congregation Pays
1-12	11%	3%
13-24	9%	5%
25-36	7%	7%
37-48	5%	9%
49-60	3%	11%

A minister is immediately vested in the dues paid by the new congregation (including member dues, if any). A minister will vest in the dues made by Pension Fund under the New Church Gift Pension Program when the criteria under either (1) or (2) is satisfied:

1. The minister participates in the New Church Gift Pension Program and the new congregation, or if self-employed, the minister, remitted the required dues under the program for the entire 60 month period.
2. If the new congregation closes prior to the conclusion of the 60 month period, the Regional Minister with respect to which the minister is under care notifies Pension Fund in writing that the minister continues employment as an ordained, commissioned, or licensed minister in the Stone-Campbell tradition with standing.

If one of the above vesting criteria is not satisfied, all dues made by Pension Fund under the New Church Gift Pension Program on behalf of the minister will be forfeited. Dues paid by the new congregation (including member dues, if any) or by a self-employed minister will not be forfeited, and the minister will be entitled to benefits under the Pension Plan as a member pursuant to its written terms based on those dues.

Applications for the Program are accepted year round, and approval is for the 12 month period beginning with the month following approval of your completed Application and enrollment in the Pension Plan. A new Application must be submitted each 12 month period to continue participation in the Program.

Please complete Sections I, II and III. Then forward this Application for certification and signature under Sections IV and V to an authorized representative of your Region and to an elected leader of your new congregation

- PLEASE TYPE OR PRINT CLEARLY -

I. MINISTER'S INFORMATION

Minister's Name _____ Social Security No./ITIN _____
(first) (middle) (last/family)

Home Address _____

City _____ State _____ Country _____ Zip Code _____

Home Phone Number (_____) _____ Work Phone Number (_____) _____ Cell Phone Number (_____) _____

E-Mail Address _____

II. NEW CHURCH INFORMATION

Name of New Congregation _____

Mailing Address _____

City _____ State _____ Country _____ Zip Code _____ - _____

Name of Church Officer _____ Officer's Phone Number (_____) _____

Church Officer's Title (Chairperson, Treasurer, etc) _____ Officer's Email _____

Current average weekly worship attendance _____ How long has minister in Sec.1 been serving the new congregation? ____ Years & ____ Months

Minister's Monthly Salary on which Pension Plan dues will be paid: \$ _____/month **NOTE: This is the amount on which dues will be paid according to the chart at the top of this application. Any salary adjustments must be reported immediately to Pension Fund.**

III. MINISTER CERTIFICATION AND SIGNATURE

By signing this Application, I make the following certifications:

- I certify that I am eligible to participate in the New Church Gift Pension Program, that I understand and agree to the terms of the Program, including the applicable vesting schedule, and that I am committed to fulfilling all of the requirements for Program participation.
- I understand that the terms of my participation in the Pension Plan are governed by the Pension Plan, and that if there is any conflict between the Program and the Pension Plan, the Pension Plan will control.
- I acknowledge that I am required to immediately notify Pension Fund if I do not satisfy the Program's minimum requirements at any time during the 12 month period that this Application covers.
- I understand that I must submit a new Application each year to continue participation in the Program.
- I understand that, unless already on file with Pension Fund, I am required to provide with this Application a completed Pension Plan Enrollment Form.

Minister's Signature _____ Date ____/____/____

IV. REGIONAL CERTIFICATION AND SIGNATURE

I certify that the individual identified in Section I is a credentialed minister in good standing with the following region: _____.

Regional Representative Signature _____ Date ____/____/____

Printed Name _____ Phone Number (____) _____

Title _____

Date of region's formal recognition/receiving of the new congregation ____/____/____

Is it recognized as a "congregation in formation"? Y N If No, how is the congregation recognized? _____

V. CONGREGATIONAL CERTIFICATION AND SIGNATURE

I certify that the individual identified in Section I is the minister of the congregation identified in Section II. I further certify that the congregation will pay Pension Plan dues in accordance with the chart shown on the first page.

Congregational Representative Signature _____ Date ____/____/____

Printed Name _____ Phone Number (____) _____

Title _____

Pension Fund of the Christian Church

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