Pension Fund of the Christian Church

APPLICATION FOR TDRA CONSOLIDATION

Complete this *Application for TDRA Consolidation* to consolidate two or more TDRA accounts that you maintain with Pension Fund.

- You must be either (i) the member with respect to all of the TDRAs that you are consolidating or (ii) the beneficiary of all inherited TDRAs that you are consolidating from the same deceased member. If you maintain both your own TDRAs and inherited TDRAs with Pension Fund, complete a separate Application to consolidate each type.
- Do not use this Application to convert a pre-tax TDRA to a Roth TDRA. Instead, complete the *TDRA Application for In-Plan Roth Rollover*.
- If you are a TDRA member, you must be at least age 59½ to consolidate accounts. In addition, if you are an active TDRA member, you may only consolidate TDRA accounts associated with one or more former employers.

NOTE: You cannot use this Application to (i) consolidate pre-tax TDRAs with Roth TDRAs or (ii) consolidate TDRAs that are not fully vested.

- PLEASE TYPE OR PRINT CLEARLY -

I. MEMBER INFORMATION

Member Name _____
(first) (middle) (last/family name)

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

Home Address _____

City _____ State _____ Country _____ Zip Code _____-_____

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

II. BENEFICIARY INFORMATION – COMPLETE FOR INHERITED TDRA CONSOLIDATION ONLY

Original Member 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. TDRA CONSOLIDATION

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

Pre-Tax TDRAs are your TDRA accounts that hold your pre-tax elective deferrals, rollover contributions, employer contributions, and all earnings thereon. Roth TDRAs are your TDRA accounts that hold your Roth elective deferrals, Roth rollover contributions, in-Plan Roth rollovers, and all earnings thereon.

NOTE: You may only consolidate pre-tax TDRAs if they are vested. If you are an active member, you may only consolidate accounts associated with one or more former employers.

I elect to consolidate the following pre-tax TDRAs:

☐ All pre-tax TDRA accounts

☐ The following pre-tax TDRAs:

no._____

no._____

no._____

The surviving pre-tax TDRA shall be:

no._____

I elect to consolidate the following Roth TDRAs:

☐ All Roth TDRA accounts

☐ The following Roth TDRAs:

no._____

no._____

no._____

The surviving Roth TDRA shall be:

no._____

IV. NOTICE TO REVIEW BENEFICIARY DESIGNATIONS

Consolidation of your TDRAs will impact your current beneficiary designations. To ensure that your TDRA assets pass according to your wishes, you are encouraged to review your current beneficiary designation for your surviving TDRA 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 TDRA account number to your entire consolidated TDRA.

V. MEMBER 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 TDRAs identified in Section III, all future account statements and distributions from such TDRAs will be made from a single "surviving" TDRA identified in Section III. I further understand that consolidated TDRAs other than the "surviving" TDRA will be closed.
- I understand that the beneficiary designations in effect for my surviving TDRA will apply to all TDRAs 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 TDRA, or if the beneficiaries I have designated fail to survive me, I understand that my benefits under my surviving TDRA will be paid to my spouse, or if I am not married at my death, to my estate.

Member/Beneficiary Signature _____ **Date** _____/_____/_____

Pension Fund of the Christian Church
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