



Complete this *Application for Rollover Contribution to TDRA* to rollover money from your former employer's retirement plan or a traditional IRA to your 403(b) account under the Tax-Deferred Retirement Account of the Pension Fund of the Christian Church (Disciples of Christ) ("TDRA"). You must already have a TDRA account or contemporaneously complete and return a *TDRA Enrollment Form* with this Application before you can rollover money to the TDRA. You may complete a rollover in one of two ways:

- **Direct Rollover:** You may instruct the plan administrator of a distributing plan to directly transfer the *pre-tax* amounts payable to you from the distributing plan to the TDRA.
- **Indirect Rollover:** You may deposit the *pre-tax* amounts you already received from a distributing plan or IRA to the TDRA within 60 days of the date you received the money from the distributing plan or IRA. If you miss the 60-day rollover deadline, you may be eligible to self-certify that you meet an exception to the 60-day rollover requirement by completing the *Certification for Late Rollover Contribution Form*.

**IMPORTANT:** You cannot rollover any portion of a distribution that is necessary to satisfy the minimum required distribution requirements under the distributing plan or IRA. You must satisfy any minimum required distribution requirements prior to a rollover, or leave the required minimum distribution amount in the distributing plan or IRA and withdraw it prior to the distribution deadline.

**Complete a separate Application for each rollover.**

**- PLEASE TYPE OR PRINT CLEARLY -**

**I. MEMBER INFORMATION**

Name \_\_\_\_\_ Account No. \_\_\_\_\_  
(first) (middle) (last/family) (if also opening a TDRA, write "TBA")

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

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_ - \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**II. ROLLOVER INFORMATION**

Rollover is a (check one only):

- DIRECT ROLLOVER from an employer retirement plan (401(a), 401(k), 403(b), or governmental 457(b)). **Attach a copy of the most recent account statement from the distributing plan.**
- INDIRECT ROLLOVER of a distribution paid to you from an employer retirement plan (401(a), 401(k), 403(b), or governmental 457(b)) or an IRA. **Attach a copy of the distribution statement from the distributing plan or IRA reflecting the gross amount of the distribution and any federal and state taxes withheld. If you are making an indirect rollover past the 60-day deadline, also attach a Certification for Late Rollover Contribution Form.**

If you are a minister, check one:  100% or  \$ \_\_\_\_\_ of my rollover represents income for services performed while a minister and in the exercise of my ministry.

Name of Distributing Plan or IRA \_\_\_\_\_ Account/Contract No. \_\_\_\_\_

Name of Custodian/Trustee/Administrator \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_ - \_\_\_\_\_

Phone Number \_\_\_\_\_ Approximate Account Value \$ \_\_\_\_\_

**Rollover Instructions for Custodian/Trustee/Administrator of the Distributing Plan (for Direct Rollovers Only).** Please roll over the full or partial value of the account or contract identified above as a direct rollover to the TDRA, a section 403(b)(9) retirement income account plan maintained by Pension Fund of the Christian Church, as follows:

- Liquidate and process a partial distribution of \$ \_\_\_\_\_ or \_\_\_\_\_ % of my account or contract as a direct rollover to my TDRA account.
- Liquidate and process a distribution of my entire account or contract as a direct rollover to my TDRA account.

**MAKE CHECK PAYABLE TO: Pension Fund of the Christian Church**  
**For the benefit of [Insert Name of Account or Contract Holder]**

**III. MEMBER CERTIFICATION AND SIGNATURE**

By signing this Application, I make the following certifications:

- I certify that all of the following are true:
  - The distribution is from an eligible retirement plan under Code Section 402(c)(8), which includes an IRA and a 401(a), 401(k), 403(a), 403(b), or governmental 457(b) plan; and
  - The distribution is an eligible rollover distribution under Code Section 402(c)(4); and
  - The distribution consists only of amounts that would be taxable to me if directly distributed to me, which means that the rollover does not include non-deductible contributions to an IRA or after-tax contributions to an employer retirement plan; and
  - The distribution does not include amounts necessary to satisfy my minimum distribution requirement under the distributing plan or IRA, if applicable; and
  - If I am making an indirect rollover, the distribution is being contributed to my 403(b) account under the TDRA within 60 days after my receipt of the distribution from the eligible retirement plan, or I certify that my circumstances meet an exception to the 60-day rollover requirement, as provided in the attached *Certification for Late Rollover Contribution Form*.
- I understand that I am responsible for any tax consequences arising from this transaction and for any fees imposed by the distributing plan or IRA. I also understand that Pension Fund will rely on the representations I have made on this Application, and I hereby release Pension Fund from any liability regarding the accuracy of these representations.
- I have attached a copy of the:
  - √ most recent account statement from the distributing plan, if I am making a direct rollover.
  - √ distribution statement from the distributing plan or IRA reflecting the gross amount of the distribution and the federal and state taxes withheld, if I am making an indirect rollover.

My signature on this Application authorizes the custodian/trustee/administrator of the distributing plan or IRA to release any and all information regarding my account to Pension Fund in any form requested by Pension Fund.

**Member Signature** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Return the completed Application, supporting financial statements, and either a check from the current trustee or custodian (direct rollover) or your personal check (indirect rollover) to Pension Fund at the address below.**

**IMPORTANT:** Retain a copy of this completed Application for your records.

**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](mailto:pfcc1@pensionfund.org) • Website: [www.pensionfund.org](http://www.pensionfund.org)

In reliance on the above certifications, Pension Fund agrees to accept the above rollover for the benefit of the above member, which will credited to the member's TDRA account.

**Pension Fund Representative** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

[Do not write in this box – for Pension Fund use only]