

Fidelity Investments

Distribution Form Instructions

Evangelical Presbyterian Church 403(b) Defined Contribution Retirement Plan

Before you complete a Fidelity Investments Distribution Form, please read the following instructions. Each item listed below corresponds with the steps on the form and contains important information that you might want to consider before completing the form. If you need more information please call the Fidelity Retirement Service Center at 1-800-343-0860, Monday through Friday, from 8:00 a.m. to midnight Eastern time. **It is not necessary to include the instructions when returning the distribution form.**

STEP 1 PARTICIPANT INFORMATION

A. Your Information

Please enter your Social Security or U.S. tax identification number, date of birth (MM-DD-YYYY), first and last name, street address, city, state, and ZIP, and daytime and evening phone number.

Address Change: Please be aware that if the address provided on the distribution form is different from the address on Fidelity's records, Fidelity will change your address as indicated in Step 1 on the distribution form. No distributions from your account will be processed until 15 calendar days have elapsed from the date of the address change unless an approved signer has signed (see Step 9). All correspondence for your account will then be sent to the new address.

B. The Employer Sponsoring the Plan from Which You Are Requesting This Distribution

Enter the name of the employer sponsoring the plan(s) from which you are requesting this distribution. The distribution requires an authorized signature by the employer sponsoring the plan—see Step 9 for additional details.

C. Applicable Accounts

Check the box(es) of the applicable plan(s) from which you would like your distribution made, and provide the plan number(s) (if known).

STEP 2 REASON FOR DISTRIBUTION

You **must** indicate a **reason** for distribution. Check with your Plan Administrator to determine which distribution options are available under the terms of your employer's plan. Federal tax law and your retirement plan allow distributions only for certain events. Please note the appropriate reason on the enclosed distribution form.

Minister Housing Allowance: Minister Housing Allowance withdrawals are coded as “taxable amounts not determined” on IRS Form 1099-R. It is the minister's responsibility to meet the IRS guidelines on the amount of Housing Allowance that can be nontaxable. Distributions paid under an IRA or an income annuity are not eligible for a Minister's Housing Allowance under current tax law.

Attainment of age 59½: If you take a distribution, the 10% early withdrawal penalty does not apply.

Separation from service/termination from employment: Termination of employment from the plan sponsor from whose plan you are taking the distribution.

Disability: For elective deferrals in a 401(k) plan or mutual fund value in a 403(b) plan, under Internal Revenue Code Section 72(m)(7), an individual is deemed to be disabled if “unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or to be of long-continued and indefinite duration.” Proof of disability may be required by the IRS. The 10% early withdrawal penalty is not imposed on distributions taken due to disability that meets this IRS definition. In some situations, a different definition of disability may apply to your account value, for a qualified plan, for contribution sources that are not salary deferral sources.

In-service withdrawal: In-service withdrawals may not be available from some sources and/or funds. Check with your employer or Fidelity at 1-800-343-0860 to determine the available sources and/or funds. If you take a distribution before you reach age 59½, you may be subject to a 10% additional tax on early distributions from qualified retirement plans and 403(b) plans.

Financial hardship: Your plan sponsor determines the allowable reasons for a financial hardship distribution. Some of the possible reasons for a financial hardship distribution for you, your spouse, or your primary beneficiary* that fall under the IRS Safe Harbor guidelines are:

- Purchase of a primary residence
- Prevention of eviction
- Payment of certain unreimbursed medical bills
- Payment of post-secondary education tuition
- Repair of casualty damage to principal residence
- Funeral expenses

* Primary beneficiary is defined as an individual who is named as beneficiary under the plan and has an unconditional right to all or a portion of the participant's account balance under the plan upon the death of the participant.

When requesting a financial hardship distribution, if this form is used, employer signature is required. The IRS may assess the 10% early withdrawal penalty for a financial hardship distribution if you are under the age of 59½. Please indicate your reason for financial hardship on the line provided on the Distribution form.

If you are taking a distribution for a financial hardship reason, please note that you cannot choose a direct rollover or the systematic withdrawal plan.

Beneficiary Account: If you are a beneficiary, once your beneficiary account has been established, you may use this form to make withdrawals from it. If you are requesting a Rollover, please refer to the Beneficiary Rollover section in these instructions. If you have not established your beneficiary account with Fidelity, please contact Fidelity at 1-800-343-0860 for a **Beneficiary Distribution Form**.

QDRO Alternate Payee Account: If you are an alternate payee, once your QDRO alternate payee account has been established, you may use this form to make withdrawals from it. Plan restrictions may apply.

STEP 3 AMOUNT OF DISTRIBUTION

Check with your Plan Administrator to determine what distribution options are available under the terms of your Employer's Plan.

Full Withdrawal: Select this option to liquidate your entire account balance.

Partial Withdrawal: If you choose to distribute money from a specific fund(s), please provide the five-digit fund number. You can find this on the Web at www.fidelity.com or by contacting a Retirement Service Specialist at the number listed above.

Systematic Withdrawal Plan (SWP): If you would like to receive your distribution in the form of periodic payments, please fill in the amount you wish to receive and from which fund(s).

Specific Dollar Method: If you would like a specific amount sent to you on an installment basis, check the Specific Dollar Method and list the amount you would like to receive each time. Please indicate the date you would like to begin receiving distributions and at what intervals (monthly, quarterly, or annually). This method will continue until the full balance you have specified has been distributed. You may change or discontinue this option at any time in writing. Please allow five business days to process any change.

Specific Period Method: If you would like to pay out your entire account balance over a period of time, check the Specific Period Method.

If you choose the SWP option, you do not need to complete Step 4.

Fees may apply. See your prospectus or certificate for details. Please note that the applicable fees may lower your distribution amount.

STEP 4 METHOD OF DISTRIBUTION

Direct Rollover: Taxes will **not** be withheld if we make the check payable to another investment provider on your behalf.

After-tax: Unless you check the box "Exclude my after-tax money from the rollover and return it to me," we will include all after-tax contributions as part of your rollover. If you choose to exclude the after-tax contributions from your rollover, two checks will be issued. The first check will be made payable to the investment provider of your choice and sent to you for all pretax and after-tax earnings. The second check will be made payable and sent to you and will include after-tax contributions only. Please note your after-tax contributions may not be accepted by your new plan.

IRA: If you choose to roll this distribution to an IRA that contains money from other sources, you may forfeit the right to roll over the value of this distribution to another retirement plan in the future.

If you choose to rollover your after-tax contributions, it is your responsibility to keep track of your after-tax contribution amount. This is very important for future distributions from your IRA so that these funds will not be taxed again. If you choose to roll this distribution to purchase an Income Annuity, please call 1-800-343-0860 Monday through Friday, 8:00 a.m. to midnight Eastern time, to request an application and additional information.

Payable to Me: If you choose this option, the proceeds from the distribution will be made payable to you and sent per your instructions. See Step 7 for further information on mandatory tax withholding.

STEP 5 INDICATE HOW YOU WOULD LIKE TO RECEIVE THE PAYMENT(S)

Choose only one option to indicate how you would like to receive your distribution.

Direct Deposit to your existing Fidelity nonretirement account: If you do not currently have a Fidelity nonretirement account, visit [Fidelity.com](https://www.fidelity.com) or call 1-800-544-6666 to obtain the necessary account application.

Electronic Funds Transfer (EFT): EFT, also known as Direct Deposit, allows you to have a direct deposit of your distribution to the bank account of your choosing. If you choose this option, be aware that EFT requires a 15-day setup period prior to processing a distribution. Complete the EFT application and attach a voided check. Please go to [Fidelity.com](https://www.fidelity.com) for an EFT application. If your plan is not set up for distributions via EFT, you will receive your distribution by check.

By Check: If you choose this option, you should receive your check in 7–10 business days from the date of distribution. If you would like your check sent to an alternative address, please include a letter of instruction.

By Check sent by express delivery: If you choose this option, a check will be sent by express delivery service. This option is not available for the Systematic Withdrawal Plan. A fee of not more than \$35 will be deducted from your account. Checks sent by express delivery cannot be delivered to a P.O. Box. Express delivery is available in the U.S. and Canada. You should receive your check in 4–5 business days from the date of distribution.

STEP 6 SPOUSAL CONSENT

If you are married and you do not specify a distribution in the form of a qualified joint and 50% (or a higher percentage, if so provided under your Employer's Plan) survivor annuity, then your spouse must sign the consent portion of this form in the presence of a notary public or a representative of your Employer's Plan. The spousal consent is valid until you change your distribution election.

If you are single, please check the “**Single**” box and skip to Step 7.

If you are married, please check the “**Married**” box and obtain notarized spousal consent, which includes

- Your spouse's signature
- Your notary's signature
- Your notary's seal/stamp (based on his or her state requirements)
- The date your notary's commission expires

If your plan is not subject to the Qualified Joint and Survivor Annuity Rules, or you are specifying a qualified joint and survivor annuity as your method of distribution, your spouse does not have to sign.

STEP 7 INCOME TAX WITHHOLDING

Eligible Rollover Distributions:

- Separation from service
- Disability
- Partial distributions
- Full distributions
- Attainment of age 59½
- Specific period, if less than 10 years

Non-Eligible Rollover Distributions:

- Distributions which take place over a period of 10 or more years
- Financial hardships

Federal Income Taxes:

20% federal income tax will be withheld from your distribution if an **eligible** rollover distribution is not rolled over **directly** to another employer sponsored retirement plan, or an IRA. The federal income tax withholding is **mandatory** if you elect one of the following distribution options: total distribution, partial distribution, or specific period, if less than 10 years.

STEP 7 INCOME TAX WITHHOLDING (CONTINUED)

How to Elect More than Mandatory 20% Withholding for Federal Taxes:

If you would like Fidelity Investments to withhold more than the mandatory 20% federal income tax, please specify in Step 7.

State Income Taxes:

Please note that some states require Fidelity Investments to withhold state income taxes. We are unable to withhold additional state taxes.

Financial Hardships:

Unless otherwise directed by you, we will automatically withhold **10%** for federal income taxes. You may choose to elect out of federal income tax withholding at the time of your hardship distribution. Please mark the box "I elect not to have federal income taxes withheld from my distribution."

For more information about income tax withholding for distributions, please refer to IRS Form W-4P at www.irs.gov.

STEP 8 YOUR SIGNATURE

Please sign and date in the space provided in order to avoid delays in processing your request.

STEP 9 PLAN SPONSOR APPROVAL

Even if you are no longer employed by EPC Benefit Resources, Inc. you are still required to obtain their approval.

To obtain Plan Sponsor authorized signature, return the distribution form to EPC Benefits Resources, Inc. (Main Office) one of three ways:

- Fax: **(407) 930-4492**
- Scan and email to: **Benefits@epc.org**
- Mail to: **EPC Benefits Resources, Inc., 5850 TG Lee Boulevard, Suite 510, Orlando, FL 32822**

Upon receiving your distribution form, EPC Benefits Resources, Inc. Main Office will then forward your form to Fidelity Investments. Before sending your form to the EPC Benefit Resources, Inc. Main Office, please ensure it has been completed in entirety to avoid processing delays.

Please ensure that the individual signing your distribution form is not your local church administrator. The distribution form must receive authorized signature by the Plan Sponsor (Main Office).

Fidelity Investments Distribution Form Evangelical Presbyterian Church 403(b) Defined Contribution Retirement Plan



Instructions: Use this form if you wish to request a distribution from the Evangelical Presbyterian Church 403(b) Defined Contribution Retirement Plan. **Please complete steps 1 through 9 to avoid delays in processing your request.** Return this form one of three ways:

- Fax: (407) 930-4492
- Scan and email to: Benefits@epc.org
- Mail to: EPC Benefit Resources, Inc., 5850 TG Lee Boulevard, Suite 510, Orlando, FL 32822

Upon receiving your Distribution Form, EPC Benefits Resources, Inc. will provide Plan Sponsor authorized signature and return your form to Fidelity Investments for processing.

Questions: If you would like more information about distributions, including general tax implications, please call Fidelity Investments at 1-800-343-0860 Monday through Friday, from 8:00 a.m. to midnight Eastern time.

STEP 1 PARTICIPANT INFORMATION

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

Check here if you made any changes to the prefilled information below

Social Security #: - - Date of Birth: - -

Full Name:

I understand my check and all future correspondence related to this account will be mailed to the address below.

I am an EPC Minister EPC Other Employee

Address:

City and State:

Zip: -

Daytime Phone: - - Evening Phone: - -

B. The Employer Sponsoring the Plan from Which You Are Requesting This Distribution

The distribution requires an authorized signature by the EPC Benefit Resources, Inc. Plan Sponsor (Main Office). Please see the instructions for Step 9 for more details.

Name of Employer Sponsoring the Plan: **Evangelical Presbyterian Church** Plan number: **8 9 5 6 0**

C. Applicable Plans I would like a distribution from the following plan(s):

- 403(b) Plan



STEP 2 REASON FOR DISTRIBUTION

Please choose one: If you do not choose an option below, your distribution will be delayed.

- EPC Minister Housing Allowance**
- Attainment of age 59½**
- Separation from service**
- Disability** (as defined by the IRS)
- In-service withdrawal** Check with your employer before selecting this option. Most plans do not allow in-service withdrawals.
- Financial hardship** (employer authorization is required) Reason for hardship: _____

STEP 3 AMOUNT OF DISTRIBUTION

Full Withdrawal

Partial Withdrawal

Minister Housing Allowance partial withdrawals will be coded as “taxable amounts not determined” on IRS form 1099-R. It is the minister’s responsibility to meet the IRS guidelines on the amount of Housing Allowance that can be tax exempt.

Withdraw proportionally across all available investment options. \$,

OR

Withdraw from specific sources/investment options Check here if additional fund options are attached

Fund Number	Amount		Source(s)
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	OR <input type="checkbox"/> 100%	<input type="checkbox"/> Employer OR <input type="checkbox"/> Employee
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	OR <input type="checkbox"/> 100%	<input type="checkbox"/> Employer OR <input type="checkbox"/> Employee

Systematic Withdrawal Plan (Not available for reasons of financial hardship.)

Specific Dollar Method

Pay me \$, Monthly OR Quarterly OR Yearly

Beginning: - from Fund Number OR Withdraw proportionally across all available investment options

Specific Period Method

Beginning: - Monthly OR Quarterly OR Yearly, for years

Continued on next page.

STEP 4 METHOD OF DISTRIBUTION

Direct rollover (Not available for distributions for financial hardship reasons.)

Exclude my after-tax contributions from the rollover and return a check for that portion of my contributions to me.

To an IRA with Fidelity Fidelity Account #:

I understand that any money invested in Fidelity mutual funds will be rolled over in the same proportion to the same Fidelity mutual fund(s) in which I am currently invested. Any non-Fidelity assets will be rolled over to Fidelity Cash Reserves, a money market fund. I acknowledge that I have read the Fidelity Cash Reserves prospectus.

Note: If you do not have a Fidelity IRA, you must establish an account either online at www.fidelity.com or by submitting a Fidelity Investments Rollover IRA Application.

To Another Investment Provider* Before you complete this section, please check with your new employer to make sure your new plan accepts the assets you wish to roll over.

Is the new account: an IRA OR an employer-sponsored retirement account

Name of the receiving investment provider:

***A check will be made payable to the receiving investment provider on your behalf and will be mailed to you. You will need to mail the check to the receiving investment provider. Income taxes will NOT be withheld.**

To an Existing Retirement Plan at Fidelity Before you complete this section, please check with your new employer to make sure your new plan accepts the assets you wish to roll over. (Example: new employer's plan)

Name of the receiving plan:

To an Income Annuity Fidelity will mail a check from the proceeds of your account to the insurance company you select once we receive a completed annuity contract application signed by you and a letter of acceptance signed by the insurance company.

Payable to Me (See the instruction page for further information on mandatory tax withholding.)

I certify that I am eligible for the EPC Minister Housing Allowance.

STEP 5 INDICATE HOW YOU WOULD LIKE TO RECEIVE THE PAYMENT(S)

By check (You should receive your check in 7–10 business days from the date of distribution.)

By check sent by an express delivery service (NOT available for Systematic Withdrawal Plan.) I understand that a fee of not more than \$35 will be deducted from my account. **This check cannot be delivered to a PO Box.** Express delivery is available in the U.S. and Canada. (You should receive your check in 4–5 business days from the date of distribution.)

Deposit into a Fidelity nonretirement account. To open a new account, please go to www.fidelity.com or attach an account application.

Fidelity Account #:

I understand that all assets will be invested in Fidelity Cash Reserves, a money market fund. I acknowledge that I have read the Fidelity Cash Reserves prospectus. (Your money will be available in 5–7 business days from the date of distribution.)

Electronic Funds Transfer (EFT requires a 10-day set up period prior to processing a distribution.)
(Complete the EFT application (found on www.Fidelity.com) and attach a voided check. Include both with your distribution form.)

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STEP 6 SPOUSAL CONSENT

To be completed by the Participant:

Check off your **current** marital status. If you are married and you do not specify distribution in the form of a qualified joint and 50% survivor annuity (or a higher percentage, if so provided under your employer's plan), then your spouse must sign the consent portion of this form in the presence of a notary public. The spousal consent is valid until you change your distribution election.

Single—I certify under penalties of perjury that I am not married as of the date that this form is signed. I understand that if I marry after this date, but before distribution commences, the rules for married individuals will apply to me.

Married—I certify that I am married and that distributions must be made to me in the form of a qualified joint and survivor annuity, unless I have elected another form of distribution and my spouse signs the spousal consent section below in the presence of a notary public (or plan representative, if authorized by your plan).

To be completed by the Participant's spouse:

I hereby consent to the election of distribution as indicated by my spouse, to have benefits paid in the form specified rather than in the form of a qualified joint and survivor annuity. Further, I hereby acknowledge that I understand: (1) that the effect of my consent may result in the forfeiture of benefits I would be entitled to receive upon my spouse's death; (2) that my spouse's waiver of a qualified joint and survivor annuity is not valid unless I consent to it; and (3) that my consent is irrevocable unless my spouse revokes the waiver.

Signed (Spouse): _____ Date: - -

To be completed by a notary public:

Note: A signature guarantee cannot be substituted for a notary.

Sworn before me this day - -

In the State of , County of

Notary Public Signature:

Notary stamp must be in the above box.

My Commission Expires:

- -

STEP 7 INCOME WITHHOLDING

Payments subject to withholding are either eligible rollover amounts or non-eligible rollover amounts. Please see instructions for more information on mandatory withholding.

Federal Income Taxes

I elect **not** to have federal income taxes withheld from my taxable distribution. **Eligible rollover amounts not directly rolled over are subject to mandatory withholding of 20% for federal income taxes. A payee cannot elect out of this withholding.**

I elect to have a total of % withheld for federal income taxes.

State Income Taxes

I elect **not** to have state income taxes withheld from my distribution. (Please note that some states require state income taxes to be withheld.)

I elect to have state income taxes withheld according to state tax tables. (Please note that we are unable to withhold additional state taxes.)

Continued on next page. 

STEP 8 YOUR SIGNATURE

I certify that all information provided by me on this form is true and accurate. I certify under penalties of perjury that my Social Security number in Section 1 of this form is correct. If I am a nonresident alien, I have attached IRS Form W-8BEN and included my U.S. taxpayer identification number with this form in order to claim any applicable tax treaty benefits.

- To the extent my plan allows, I have chosen to directly roll over my eligible assets to an “unlike” plan at Fidelity, and I acknowledge that I am rolling eligible 401(a)/401(k) plan assets or 403(b) plan assets to a 401(a),401(k), 403(b) or governmental 457(b) plan, or IRA.
- To the extent I have chosen to directly roll over my eligible assets to a similar plan at Fidelity, I acknowledge that I am rolling eligible (1) 403(b) assets to a 403(b) plan or IRA, or (2) 401(a)/401(k) assets to a 401(a)/401(k) plan or IRA.
- To the extent I have chosen to directly roll over my eligible rollover amounts, I hereby direct Fidelity Management Trust Company (or its affiliate(s) and/or successor(s) appointed pursuant to the terms of such accounts as applicable) (“FMTC”) to roll over the amount indicated in Section 3 on this form to my account under another employer’s plan or IRA, except to the extent that my current employer’s plan or federal law prohibits such a rollover. In the event certain assets are not eligible to be rolled over, I hereby direct FMTC to retain the ineligible portion of my assets in the plan and to roll over the remainder as directed herein.

Your Signature: Date: --

STEP 9 PLAN SPONSOR APPROVAL

Approval of the distribution request is required from EPC Benefit Resources, Inc (Main Office), even if you are no longer employed by EPC Benefit Resources, Inc. Please complete section 9 and return in to the Main Office in order to obtain Plan Sponsor authorized signature.

On behalf of: (name of Participant)

Date of Hire: -- Termination Date: -- Vesting Percentage: %

Stop here and return this form to EPC Benefit Resources, Inc. for Plan Sponsor authorized signature. The Main Office will then forward your form to Fidelity Investments.

You can return this form one of three ways:

- Fax: (407) 930-4492
- Scan and email to: Benefits@epc.org
- Mail to: EPC Benefit Resources, Inc., 5850 TG Lee Boulevard, Suite 510, Orlando, FL 32822

FOR EPC BENEFIT RESOURCES, INC. MAIN OFFICE USE ONLY:

I acknowledge that the distribution requested on this form for the reason(s) indicated in Step 2 of this form is permitted under the terms of the employer’s plan. In addition, my name is on record with Fidelity to sign on behalf of the employer sponsoring this plan.

Authorized Signature: Date: --

Please print name of authorized individual signing above:

First and Last Name:

For Fidelity Use Only
COPY

Instructions for EPC Main Office Only

Return this form, unless otherwise directed, to: Fidelity Investments, PO Box 770002, Cincinnati, OH 45277-0090.

If you wish to overnight the form, please send it to Fidelity Investments, 100 Crosby Parkway, KC1E, Covington, KY 41015

