

Incoming 403(b) Exchange/Transfer—Personal Investment Plan (PIP)

Part 1 – Participant Information. To be completed by the participant.		
Name	Social Security (last 5 digits) #	
Mailing address	Primary phone # <u>()</u>	
	E-mail	
Country of citizenship		
Part 2 – Exchange/Transfer Request. To be completed by the participant.		
This agreement is between Wespath Benefits and Investments (Wespath) ar	nd the participant named above.	
I elect to complete a full or partial exchange from the following existing Inte contract as allowed under IRS regulations to PIP, a 403(b) plan administered		
Surrendering financial institution's name		
Surrendering financial institution's address	Contract #	
	Phone #	
Choose one of the following:		
☐ I elect a transfer of the full cash value of this contract (liquidate all fund	ds).	
$f \square$ I elect a partial transfer of this contract. Cash value to be transferred is	:\$	
My signature on this form means that I have read and understand this form, on the second page. I hereby request and authorize the partial or full withdrinancial institution contract and the transfer of the cash value to PIP, a Code by Wespath.	rawal (as indicated above) of the surrendering	
Participant signature	Date	
Please mail this form with a copy of a recent statement for this account to V	Vespath's Retirement Services department at	

Please mail this form with a copy of a recent statement for this account to Wespath's Retirement Services department at the above address. Also provide a copy of the most recent plan document that controls assets in the surrendering Code section 403(b) plan. You may need to request this document from the plan administrator. Wespath will send this form to the surrending financial institution on your behalf.

Note: Prior to submitting this form to Wespath, you should contact the financial institution or your employer (if applicable) to determine whether any fees will be assessed for termination of the investment contract with them. Also, you should inquire whether you will need to complete their paperwork in addition to Wespath's exchange/transfer form, or if there are other special requirements, such as a Medallion stamp or notarization. If their forms are required, please complete and send them, along with this exchange/transfer form and other relevant paperwork, to Wespath.

Part 3 – Exchange/Transfer Certification. To be completed by a representation	ative of the surrendering financial institution.	
Name of surrendering financial institutionName of prior plan (if applicable)Amount of transfer \$		
The surrendering contract is:		
 □ Code section 403(b)(1) annuity contract □ Code section 403(b)(7) custodial account □ Code section 403(b)(9) retirement income account 		
The surrendering contract contains the following amounts: \$ represents the current after-tax account valu \$ represents the pre-1987 after-tax contribution \$ represents the post-1986 after-tax contribution \$ represents the current before-tax account value \$ represents the 12/31/88 before-tax account value \$ represents the post-1988 before-tax account value \$ represents the post-1988 before-tax account value \$ represents the post-1988 before-tax contribution	ons of the amount being transferred ons of the amount being transferred lue of the amount being transferred value of the amount being transferred	
If only a portion of the balance is being distributed, before-tax and a pro-rata basis.	after-tax contributions must be distributed on	
By signing below, the authorized representative of the surrendering is correct.	g financial institution certifies that the above information	
Name of representative	Title	
Signature	Date	
Mailing address	Primary Phone # <u>(</u>)	
Please return the original form and the check made payable to "Wespath-UMC, FBO <participant name="">" in the envelope provided.</participant>		

Part 4 – Participant Terms and Conditions

- By implementing this transfer, your new contract may be subject to the same or more stringent restrictions on early distribution as was your prior contract.
- You must be enrolled in PIP before this transfer can be accepted. It is not necessary that you be contributing to PIP or have an account balance in PIP.
- The designated cash surrender value of the contract being surrendered may be subjected to sales and administrative charges by the surrendering financial institution.
- You are relying on advice received from your tax adviser relating to federal and state income tax questions associated with this transfer and not upon any information furnished, or representations made, by Wespath or its employees.
- Transferred amounts are credited to your UMPIP account and will be immediately invested among the investment funds according to your investment election for future contributions. If you do not have an investment election on file, your account balance will be invested by the LifeStage Investment Management Service.

If you are **NOT** completing this document online, please complete it and return to Wespath by one of the following methods:

- E-mail (scanned copy) to contributionsteam@wespath.org or
- Fax to **1-847-866-5191** or
- Mail to Wespath Benefits and Investments Contributions Team
 1901 Chestnut Avenue, Glenview, IL60025

Be sure to keep a copy for your records.

This form includes and/or is requesting personally identifiable information (PII) and/or protected health information (PHI). You are encouraged to make elections and beneficiary designations online at **benefitsaccess.org**. When possible, managing your benefits online is the recommended approach to keep your PII and PHI safe and secure.

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