Wespath

1901 Chestnut Avenue
Glenview, Illinois 60025-1604
wespath.org

Contribution Election—Information and Instructions

Alaska and Pacific Northwest Conferences

United Methodist Personal Investment Plan (UMPIP)

Information

This form allows you to elect to make before-tax, Roth and/or after-tax contributions to your United Methodist Personal Investment Plan (UMPIP) account.

UMPIP is a 403(b) plan, subject to contribution limits under the Internal Revenue Code. Your total before-tax and Roth contributions for the year to UMPIP (and any other qualified retirement plans) cannot exceed the lesser of your compensation or the annual limit. You can view current year contribution limits at **wespath.org/r/cl** or scan this QR code with your phone's camera:

You cannot withdraw contributions from UMPIP unless you have a financial hardship as defined under UMPIP, attain age 59½, are disabled as defined under UMPIP, retire, terminate employment and/or terminate your relationship with the annual conference.

Instructions

Part 1 – Personal Information
Complete the PDF version of this form electronically or use a black pen and print clearly in CAPITAL LETTERS. If you enter a new address that should be used to update your participant record, ensure that you also update your account information at **benefitsaccess.org**, or contact Wespath at **1-800-851-2201**.

Part 2 – Before-Tax Contribution

Automatic Enrollment
Your plan sponsor has adopted automatic enrollment. Review the *Automatic Enrollment Notice* to determine if this feature applies to you. If you have been automatically enrolled in UMPIP and wish to change your before-tax contribution election, or if you are about to be automatically enrolled and wish to make a before-tax contribution election that is different than the automatic contribution rate described in the *Automatic Enrollment Notice*, indicate that election on the form.

Your compensation (including the value of any parsonage or housing allowance) will be reduced before withholding taxes are calculated. When you receive distributions from UMPIP, your before-tax contributions and earnings will be taxable.

Automatic Contribution Escalation
Your plan sponsor has elected automatic contribution escalation. Review the *Automatic Enrollment Notice* to determine your eligibility for this feature and learn how it works. Check the box to indicate whether you elect to have automatic contribution escalation apply to your before-tax contributions. If you do not make an election and are eligible for automatic contribution escalation, this feature will be applied to your contributions as the default election.

Part 3 – Roth Contribution
Indicate the dollar amount or percentage that you elect to have withheld from your compensation as a Roth contribution and contributed to UMPIP.

Your compensation (including the value of any parsonage or housing allowance) will be reduced after withholding taxes are calculated. When you receive distributions from UMPIP, your qualified Roth contributions are non-taxable. See the *Roth Contribution Guide* at **wespath.org/roth** for more information about the tax implications of Roth account distributions.

Part 4 – After-Tax Contribution
Indicate the dollar amount or percentage that you elect to have withheld from your compensation as an after-tax contribution and contributed to UMPIP. Note that in most cases a Roth contribution will be more beneficial for a participant than an after-tax contribution. See the *Roth Contribution Guide* at **wespath.org/roth** for more information.

Your compensation (including the value of any parsonage or housing allowance) will be reduced after withholding taxes are calculated. When you receive distributions from UMPIP, your after-tax contributions are non-taxable but the earnings on those contributions are taxable.

Part 5 – Signature
Read the statement and, if you agree, sign and date the form. Then, return it to your employer. Keep a copy of the submitted form for your records.

Part 6 – Acceptance by the Employer/Salary-Paying Unit
Your employer must sign and date this form and return it to the conference office as indicated.

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Alaska and Pacific Northwest Conferences

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Part 1 – Personal Information

Name _____ Social Security # (last 5 digits) ____ ____ ____ ____ ____

Mailing address _____ Primary phone # (_____) _____

_____ E-mail _____

☐ Clergy ☐ Lay ☐ Bishop

Part 2 – Before-Tax Contribution

Review the Instructions for important information about automatic enrollment and automatic contribution escalation.

Choose one:

☐ **Percentage of compensation:** _____% of compensation

☐ **Dollar amount:** $_____ per month (cannot exceed your monthly compensation)

☐ I elect **not** to make before-tax contributions (*Skip to Part 3*)

Automatic Contribution Escalation

Choose one if this feature applies to you—see Instructions:

☐ I elect to have automatic contribution escalation apply to my before-tax contributions (default)

☐ I elect **not** to have automatic contribution escalation apply to my before-tax contributions

Part 3 – Roth Contribution

Choose one:

☐ **Percentage of compensation:** _____% of compensation

☐ **Dollar amount:** $_____ per month (cannot exceed your monthly compensation)

☐ I elect **not** to make Roth contributions (default)

Part 4 – After-Tax Contribution

Choose one:

☐ **Percentage of compensation:** _____% of compensation

☐ **Dollar amount:** $_____ per month (cannot exceed your monthly compensation)

☐ I elect **not** to make after-tax contributions (default)

Part 5 – Participant Signature

I have read the instructions, and understand and accept the actions I have taken with this Contribution Election. I acknowledge that:

- The indicated before-tax, Roth and/or after-tax contributions will be withheld from my pay and contributed to my UMPIP account.
- If my plan sponsor has elected automatic contribution escalation and I am eligible for the escalation, my before-tax contribution percentage will increase each year up to a maximum percentage as specified in the *Automatic Enrollment Notice*, unless I elected not to have automatic contribution escalation apply to my before-tax contributions in Part 2.
- I cannot withdraw contributions from UMPIP unless I have a financial hardship as defined under UMPIP, attain age 59 ½, am disabled as defined under UMPIP, retire, terminate employment and/or terminate my relationship with my annual conference.
- This agreement will remain in effect with my current plan sponsor/salary-paying unit until I submit a new form.

Print Name _____

Signature _____ Date _____

Part 6 – Acceptance by the Employer/Salary-Paying Unit

Effective date of this contribution _____ 1, 20____.

This date must be the first day of a month on or after the participant signed this form.

Employer name _____ Employer # _____

Employer address _____ Phone # (_____) _____

Authorized representative _____ Title _____

Authorized signature _____ Date _____

Please complete this form and return to Bruce Galvin via:
- E-mail (scanned copy) to **bruce.galvin@pnwumc.org** or
- Mail to Bruce Galvin
  14001 3rd Ave NW, Seattle, WA 98177

The plan sponsor/salary-paying unit should keep the original form for its payroll records.