



CHURCH OF THE BRETHREN PENSION PLAN

A not-for-profit ministry of Church of the Brethren Benefit Trust Inc.
1505 Dundee Avenue, Elgin, IL 60120-1619
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Fund Selection/ Fund Transfer

You may call the Pension Plan office and request changes by phone. The office must receive your phone call or this completed form on or before the last business day of the month to be effective the first of the following month.

_____			_____
<i>Name</i>			<i>Social Security Number</i>
_____			_____
<i>Address</i>			<i>Daytime Phone Number</i>
_____	_____	_____	_____
<i>City</i>	<i>State</i>	<i>Zip Code</i>	<i>Home Phone Number</i>

- To change the way your future contributions are divided among the four investment funds, see Section I.
- To transfer some or all of your present accumulation to another fund or funds, see Section II.

Section I: Fund Selection – Future Contributions

To initiate a change in fund selection —

- Fill in the appropriate blanks below with whole percentages. (For example, use 33%, not 33¹/₃%) Make sure the total equals 100%.
- Sign the form and return it to the Pension Plan office at the above address.
(An unsigned form is invalid and will be returned to you.)

Note: You may initiate a fund selection as often as once a month. The new selection affects contributions received in the Pension Plan office on or after the first business day of the month following receipt of the signed form.

I hereby request that contributions made to my Pension Plan account be distributed among the investment funds as follows —

_____ %	Common Stock Fund	_____ %	Bond Fund
_____ %	Balanced Fund	_____ %	Community Investment Fund*
_____ %	Short-Term Fund		

*****Disclaimer Notice*****
If you wish to allocate more than one percent of your total account to the Community Investment Fund, you must sign a disclaimer stating that you understand the risk.

_____	_____
<i>Signature</i>	<i>Date Signed</i>

Section II: Fund Transfer – Accumulation

To initiate a transfer —

- Fill in the blanks below using “dollar amounts,” or using “all” and “percents” (See samples.) Unless you say otherwise in Other Instructions, the transfer will involve on proportionate basis all the types of money in your Pension Plan account (i.e., employer contributions, personal tax-deferred contributions, investment return).
- Sign the form and return it to the Pension Plan office.
(An unsigned form is invalid and will be returned to you.)

Note: *You may initiate a fund transfer as often as once a month. The transfer will be made on the first business day of the month following receipt of a signed form.*

Sample 1

To transfer \$2,000 from the Common Stock Fund to the Balanced Fund and \$2,000 from the Common Stock Fund to the Short-Term Fund:

**Transfer from:
(use \$ amount or all)**

Common Stock Fund	\$4,000
Balanced Fund	_____
Short-Term Fund	_____
Bond Fund	_____
Comm. Inv. Fund	_____

**Put into:
(use \$ amount or %)**

Common Stock Fund	_____
Balanced Fund	\$2,000
Short-Term Fund	\$2,000
Bond Fund	_____
Comm. Inv. Fund	_____

Sample 2

To transfer all money from the Short-Term Fund to the Balanced Fund and Common Stock Fund in designated percentages:

**Transfer from:
(use \$ amount or all)**

Common Stock Fund	_____
Balanced Fund	_____
Short-Term Fund	All
Bond Fund	_____
Comm. Inv. Fund	_____

**Put into:
(use \$ amount or %)**

Common Stock Fund	50%
Balanced Fund	50%
Short-Term Fund	_____
Bond Fund	_____
Comm. Inv. Fund	_____

I hereby request that (some or all of) the accumulation in my Pension Plan account be transferred as of the first business day of the month after receipt of this form, as follows —

Transfer from (use \$ amount or all):

Common Stock Fund	_____
Balanced Fund	_____
Short-Term Fund	_____
Bond Fund	_____
Comm. Inv. Fund	_____

Put into (use \$ amount or %)

Common Stock Fund	_____
Balanced Fund	_____
Short-Term Fund	_____
Bond Fund	_____
Comm. Inv. Fund	_____

Other instructions _____

Signature

Date Signed