





Section 1: Employee Information and Marital Status

Employee Enrollment Form Defined Contribution (RSVP and Lay DC) Plans

All information must be provided. Indicate w	where not applicable with	N/A.	
Legal Name First	MI	Last	
Mailing Address Street			
City	State	ZIP	Country
Home Phone		Mobile Phone	
Email			
Social Security #		Date of Birth*	
Gender Male Female	Marital Status	Single Marri	ed
Spouse's Legal Name First	MI	Last	
Gender Male Female			
Social Security #/TIN #		Date of Birth	
Date of Marriage			
Section 2: Employment Information All information must be provided. Indicate w		N/A.	
Employer Name			
Mailing/Billing Address Street			
City	State	ZIP	
Employee's Title	Hire Date		
Hours expected to work per year	Enrollment Effective Date		
Section 3: Compensation Other than a one-time payment, list all amou	unts on an annual basis .	For explanations, s	ee the instructions on the next page.
\$ Base salary (excluding housing) and scheduled taxable cash payments \$ One-time payment	\$ Cash housing allowand		Employer-provided housing? Yes No (Check Yes if employer provides physical housing for the employee)

^{*}Please provide a copy of your driver's license, passport, or birth certificate as proof of your date of birth.

Plan enrolling in: **RSVP** Lay DC This is a New Enrollment Transfer from previous employment On the appropriate line below, enter the amount (in whole dollars or as a percentage) you would like deducted from your compensation on a pre-tax basis and contributed to the RSVP or Lav DC Plan. per payroll period % of your compensation per payroll period If you choose not to make contributions, please check the box below. By checking this box, you understand that you are choosing **not** to make contributions to the RSVP or Lay DC Plan and, therefore, will not be entitled to receive any matching contributions (if applicable) under the terms of the RSVP or Lay DC Plan and your employer's RSVP or Lay DC Plan Adoption Agreement. You will still be entitled to receive the base employer contribution (if applicable) under the terms of your employer's RSVP or Lay DC Plan Adoption Agreement even if you do not contribute. If you do not insert a dollar or percentage amount above, or do not check the box above, you will be deemed to have elected the default contribution rate of 4% of your compensation per payroll period. You can change the amount deducted from your compensation at any time by calling Client Services at (866) 802-6333 or accessing your Fidelity Investments account online at Fidelity NetBenefits® at www.cpg.org/myaccount **Section 5: Investment Options** To help you meet your investment goals, the RSVP and Lay DC Plan offer you a range of investment options. Upon enrollment, your contributions will be defaulted to the applicable Fidelity Freedom® Income Fund — Class K, a target retirement date fund that assumes your retirement age will be age 65. In order to modify your investment option, access your Fidelity Investments account at Fidelity NetBenefits® at www.cpg.org/myaccount • Click on "Change Investment" on the left side of the You will be able to view the investments available to you and access information about the investments and their past performance. Click on "investment Election" to select the investment option(s) you choose. Please note that your total allocation must equal 100% in order for your selections to be implemented. If Fidelity does not have a date of birth or an invalid date of birth on file, your contributions may be invested in the Fidelity Freedom[®] Income Fund—Class K. Section 6: Employee Signature This is a legal document; so make all your selections thoughtfully and clearly. Please be certain your Social Security number is correct because all contributions are maintained using this number. Be certain birth dates are correct, as any error may delay vour benefits. By signing this form you (1) permit The Church Pension Fund, Fidelity Investments, any other vendor with whom you have established a 403(b) account, and your employer to share information regarding your account to ensure compliance with all applicable laws; and (2) authorize your employer to withhold contributions from your compensation as indicated in Section 3. Employee's Signature Date Section 7: Employer Signature Please review the entries on this application before signing to verify that all entries are complete and correct. By signing this form, you are verifying its accuracy. Employer's Signature Date Print Name Title Email

Submit the completed and signed form to:

Section 4: Employee Contribution

The Church Pension Fund, 19 East 34th Street, New York, NY 10016, Attn: Client Services or email to *benefits@cpg.org*. If you have any questions, call us at (866) 802-6333, Monday–Friday, 8:30AM–8:00PM ET (excluding holidays).



Instructions for Employee Enrollment Form Defined Contribution (RSVP and Lay DC) Plans

Use this form to:

• Enroll in The Episcopal Church Retirement Savings Plan (RSVP) or The Episcopal Church Lay Employees' Defined Contribution Retirement Plan (403(b)) (Lay DC Plan).

Who should complete the form:

• Clergy enrolling in the RSVP and lay employees enrolling in the Lay DC Plan or the RSVP. You must be participating in the Clergy Pension Plan or Lay Defined Benefit Plan to enroll in the RSVP.

Instructions

Please complete the attached Employee Application and return it to your employer. Completing this form accurately helps to ensure that funds will be properly allocated to your retirement account. By signing this document, you agree to allow The Church Pension Fund, Fidelity Investments, any other vendor with whom you have a 403(b) account, and your employer to share information with respect to your account in order to ensure proper administration of the Plan in accordance with applicable laws.

After your application has been processed, you will receive "Your Guide to Getting Started." Should your personal information change, please notify The Church Pension Fund as soon as possible. A Personal Information Change Form can be downloaded from **www.cpg.org**

Section 1: Employee Information and Marital Status

Complete the information completely. Missing information may delay your enrollment.

Section 2: Employment Information

Complete the information about your employment. (Your employer can assist you in completing this information.)

 Enrollment Effective Date: This is the effective date of your enrollment into the plan, usually the first date of the month following employment.

Section 3: Compensation

Your employer can assist you in completing this information.

Compensation is used to determine Total Assessable Compensation,* which is the basis for determining the amount paid by employers in assessments for the defined benefit pension plans (Lay DB and Clergy Pension Plan) and/or the compensation used to calculate employer and employee contributions to the defined contribution plans (Lay DC and RSVP). Note that the definition of compensation for a defined benefit plan versus a defined contribution plan is different. See below for information on how compensation is calculated for the RSVP and Lay DC Plan.

Enter the amounts described below. **Please complete all fields**, even if the compensation for that category has not changed. Except for One-Time Payments, show all amounts on an annual basis.

- Base salary (excluding housing) and scheduled taxable cash payments: Includes base salary (excluding the amount designated as a housing allowance in accordance with the U.S. tax code or a similar law of a local jurisdiction), Social Security tax reimbursements, employer-paid tuition for dependents (if taxable), and other scheduled taxable income.
- Cash housing allowance and/or utilities: Includes cash payments that are paid on a regular basis and are excludible from an employee's gross income for income tax purposes under the U.S. tax code or a similar law of a local jurisdiction. (For example, the amount of a cleric's base salary that has been designated as a housing allowance.) Also includes amounts paid by the employer to cover the cost of utility bills, including but not limited to fuel, gas, and electricity, or amounts paid on the employee's behalf.

- Employer-provided housing: Indicate whether physical housing, either owned or rented directly by the employer, is provided to the employee.
- ~ Employer-provided housing is considered compensation even if no cash compensation is paid.
- ~ If a home is owned or rented directly by the employee, it should not be reported as employer-provided housing regardless of whether (1) the employer pays the mortgage or rent directly to the mortgage holder or landlord or (2) the employer reimburses the employee for the full amount of the mortgage or rent payments. (In this case, report the amount of the mortgage or rent as (1) a cash housing allowance, if excludible from the employee's gross income for income tax purposes, or (2) as scheduled taxable cash payments, if includible in the employee's gross income for income tax purposes.)
- One-time payments: Includes one-time cash payments, such as bonuses or overtime, that are taxable. Also includes one-time cash payments that are excludible from an employee's gross income for income tax purposes under the U.S. tax code or a similar law of a local jurisdiction. (For example, the portion of a cleric's bonus that has been designated as a housing allowance.)

How Compensation is calculated

- For **Employer** Contributions to the RSVP and Lay DC Plan—Compensation used to calculate employer contributions to the defined contribution plans is the sum of the following four components:
- ~Base salary (excluding housing) and scheduled taxable cash payments
- ~Cash housing allowance and/or utilities
- ~ Employer-provided housing
- ~One-time payments
- For **Employee** Contributions to the RSVP and Lay DC Plan—Compensation used to calculate employee contributions to the defined contribution plans is the sum of the following (note that these definitions are different than the definitions provided above):
- ~Base salary (excluding housing): Includes base salary (excluding the amount designated as a housing allowance in accordance with the U.S. tax code or a similar law of a local jurisdiction).
- ~Other taxable cash payments (excluding utilities and severance): Includes Social Security tax reimbursements, employer-paid tuition for dependents (if taxable), other scheduled taxable income, and one-time cash payments, such as bonuses or overtime, that are taxable. Utilities (even if they are taxable) and any form of severance (including pay continuation following a termination of employment) should be excluded in all cases.

Section 4: Employee Contribution

Enter the amount you would like deducted from your compensation and contributed to the RSVP or Lay DC Plan using whole dollar or percentage amounts.

For participants in the Lay DC Plan:

- If you do not want to contribute to the Lay DC Plan, you will need to indicate that in this section by checking the box provided. By checking the box, you understand that you are choosing not to make contributions to the Plan and, therefore, will not be entitled to receive any matching contributions (if applicable) under the terms of the Lay DC Plan and your employer's Lay DC Plan Adoption Agreement.
- If you do not insert a dollar or percentage amount, or do not elect to check the box, you will be deemed to have elected the default contribution rate of 4% of your compensation. You can change the amount deducted from your compensation at any time by calling Client Services at (866)-802-6333, contacting Fidelity Investment at (877) 208-0092, or accessing Fidelity NetBenefits® at www.cpg.org/myaccount.

Section 5: Investment Options

Review the information and go to Fidelity NetBenefits® at **www.cpg.org/myaccount** to learn about your investment options and make your selections.

Sections 6 & 7: Employee's & Employer's Signature

Sign and date the application. Please review the entries on this application before signing to verify that all entries are complete and correct and that you understand how contributions will be made to the RSVP or lay DC Plan. By signing this form, you are verifying its accuracy.

Submit the completed and signed form to:

The Church Pension Fund, 19 East 34th Street, New York, NY 10016, Attn: Client Services or email to *benefits@cpg.org*. If you have any questions, call us at (866) 802-6333, Monday–Friday, 8:30AM–8:00PM ET (excluding holidays).