

Addendum to Adoption Agreement: Discretionary Contribution Election Form for Clergy

United Methodist Personal Investment Plan (UMPIP)

INSTRUCTIONS

This Addendum should be used by the following UMPIP Plan Sponsors to specify Discretionary Contributions to be made for Clergy Under Episcopal Appointment to their organization:

- Conferences,
- Local Churches,
- District offices,
- Conference-Elective Entities, and
- Other Conference-Responsible Units.

Plan Sponsors must have made a Discretionary Contribution election on the *UMPIP Adoption Agreement for Conference Sponsorship of Clergy* or the *UMPIP Adoption Agreement for Local Church/Salary-Paying Unit Sponsorship of Clergy*, whichever is appropriate, before submitting this form.

Read these Instructions and complete all parts of the Addendum.

Part 1 – Plan Sponsor Information

Provide all the information requested in Part 1 of the Addendum.

Part 2 – Discretionary Contributions

2.1 Eligible Group and Contribution Type. Specify which Clergy Employees will be eligible to receive Discretionary Contributions based on Appointment Percentages and the contribution formula for each group.

2.2 Compensation Definition. Specify the definition of compensation used for the purpose of calculating Discretionary Contributions. If the Discretionary Contributions are not based on a percentage of Participant Contributions or compensation, for example a flat-dollar amount, check the “Not applicable” box.

Part 3 – Remittance Frequency

Specify the frequency with which Discretionary Contributions will be remitted.

Part 4 – Effective Date

Specify the beginning effective date for Discretionary Contributions. Generally, this date will be January 1 of the year for which the Discretionary Contributions will be made. If the Discretionary Contributions are based on a partial year beginning after January 1, enter that effective date. For example, if Discretionary Contributions are 3% of compensation from July 1, 2018 through December 31, 2018, enter July 1, 2018 as the effective date.

Part 5 – Duration

Plan Sponsors may make Discretionary Contributions:

- 1) Indefinitely until an Addendum is resubmitted with an amended Discretionary Contribution formula, or the Adoption Agreement is amended to eliminate Discretionary Contributions, or
- 2) Only for one calendar year, including a one-time contribution.

Plan Sponsors electing to make Discretionary Contributions only for one calendar year must submit a new Addendum for each subsequent year for which a Discretionary Contribution is made.

Part 6 – Signature

An authorized representative of the Plan Sponsor must execute the Addendum. In addition, a second representative of the Plan Sponsor must sign and date the Addendum certifying that the first representative is authorized to execute the Addendum on behalf of the Plan Sponsor. The Plan Sponsor must retain a copy of its Board Resolution and/or governing committee meeting minutes to authorize UMPIP to be adopted or amended, and be prepared to provide such documents to Wespath upon request. A signed copy of the Addendum will be sent to the contact person named in Part 1 of this Addendum, to be retained for the Plan Sponsor's records. Instructions for remitting Discretionary Contributions will also be sent to this contact person's e-mail address.

Part 7 – Wespath Signatures

By signing the Addendum in Part 7, Wespath signifies acceptance of the Plan Sponsor's completed Addendum. A signed copy of the Addendum will be sent to the e-mail address specified in Part 6 to be retained for the Plan Sponsor's records. Instructions for remitting Discretionary Contributions will also be sent to this e-mail address.

Addendum to Adoption Agreement: Discretionary Contribution Election Form for Clergy

United Methodist Personal Investment Plan (UMPIP)

Part 1 – Plan Sponsor Information

Plan Sponsor _____ Employer # _____

Address _____ Annual Conference _____

Contact person(s) name _____ Title _____

Telephone # _____ Email _____

Part 2 – Discretionary Contributions

2.1 Eligible Group and Contribution Type

[indicate choice(s) below]:

2.1a Clergy Appointed full-time

<input type="checkbox"/> Matching	<input type="checkbox"/> Non-Matching	<input type="checkbox"/> Conditional	<input type="checkbox"/> Other
<input type="checkbox"/> _____% (1% or greater) of Participant Contributions up to _____% (1% or greater) of compensation*, with a maximum match of _____% of compensation*	<input type="checkbox"/> _____% (1% or greater) of compensation* <input type="checkbox"/> \$ _____	<input type="checkbox"/> _____% (1% or greater) of compensation* if the Participant contributes at least _____% (1 – 4%) of compensation*	Describe on lines below. Formula subject to acceptance by Wespath.

2.1b Clergy Appointed to ANY less than full-time Appointment

(If you make an election in 2.1b, skip to Part 2.2)

<input type="checkbox"/> Matching	<input type="checkbox"/> Non-Matching	<input type="checkbox"/> Conditional	<input type="checkbox"/> Other
<input type="checkbox"/> _____% (1% or greater) of Participant Contributions up to _____% (1% or greater) of compensation*, with a maximum match of _____% of compensation*	<input type="checkbox"/> _____% (1% or greater) of compensation* <input type="checkbox"/> \$ _____	<input type="checkbox"/> _____% (1% or greater) of compensation* if the Participant contributes at least _____% (1 – 4%) of compensation*	Describe on lines below. Formula subject to acceptance by Wespath.

*Compensation as defined for this purpose in Part 2.2.

2.1c Clergy Appointed three-quarter time

<input type="checkbox"/> Matching	<input type="checkbox"/> Non-Matching	<input type="checkbox"/> Conditional	<input type="checkbox"/> Other
<input type="checkbox"/> _____% (1% or greater) of Participant Contributions up to _____% (1% or greater) of compensation*, with a maximum match of _____% of compensation*	<input type="checkbox"/> _____% (1% or greater) of compensation* <input type="checkbox"/> \$ _____	<input type="checkbox"/> _____% (1% or greater) of compensation* if the Participant contributes at least _____% (1 – 4%) of compensation*	Describe on lines below. Formula subject to acceptance by Wespath.

2.1d Clergy Appointed half-time

<input type="checkbox"/> Matching	<input type="checkbox"/> Non-Matching	<input type="checkbox"/> Conditional	<input type="checkbox"/> Other
<input type="checkbox"/> _____% (1% or greater) of Participant Contributions up to _____% (1% or greater) of compensation*, with a maximum match of _____% of compensation*	<input type="checkbox"/> _____% (1% or greater) of compensation* <input type="checkbox"/> \$ _____	<input type="checkbox"/> _____% (1% or greater) of compensation* if the Participant contributes at least _____% (1 – 4%) of compensation*	Describe on lines below. Formula subject to acceptance by Wespath.

2.1e Clergy Appointed one-quarter time

<input type="checkbox"/> Matching	<input type="checkbox"/> Non-Matching	<input type="checkbox"/> Conditional	<input type="checkbox"/> Other
<input type="checkbox"/> _____% (1% or greater) of Participant Contributions up to _____% (1% or greater) of compensation*, with a maximum match of _____% of compensation*	<input type="checkbox"/> _____% (1% or greater) of compensation* <input type="checkbox"/> \$ _____	<input type="checkbox"/> _____% (1% or greater) of compensation* if the Participant contributes at least _____% (1 – 4%) of compensation*	Describe on lines below. Formula subject to acceptance by Wespath.

2.1f Clergy Appointed less than one-quarter time

<input type="checkbox"/> Matching	<input type="checkbox"/> Non-Matching	<input type="checkbox"/> Conditional	<input type="checkbox"/> Other
<input type="checkbox"/> _____% (1% or greater) of Participant Contributions up to _____% (1% or greater) of compensation*, with a maximum match of _____% of compensation*	<input type="checkbox"/> _____% (1% or greater) of compensation* <input type="checkbox"/> \$ _____	<input type="checkbox"/> _____% (1% or greater) of compensation* if the Participant contributes at least _____% (1 – 4%) of compensation*	Describe on lines below. Formula subject to acceptance by Wespath.

2.2 Compensation Definition (choose one):

- Compensation as defined in UMPIP
- Other _____ (subject to approval by Wespath)
- Not applicable

*Compensation as defined for this purpose in Part 2.2.

Part 3 – Remittance Frequency (choose one):

Monthly Annually One time Other _____

Part 4 – Effective Date

Discretionary Contributions will be effective beginning _____ 1, 20 ____.

Part 5 – Duration

Discretionary Contributions will be made (choose one):

Indefinitely
 Only for the year 20 ____ .

Part 6 – Signature

By signing this Addendum, the undersigned on behalf of the Plan Sponsor named in Part 1:

- Complete and submit this form to Wespeth no later than May 1 of the year following the effective date specified in Part 4.
- Remit Discretionary Contributions no later than June 1 of the year following the year for which these contributions are to be made.
- The Plan Sponsor Acknowledgments on the *UMPIP Adoption Agreement for Conference Sponsorship of Clergy* or the *UMPIP Adoption Agreement for Local Church/Salary-Paying Unit Sponsorship of Clergy*, whichever is appropriate.

The undersigned also certifies that he or she is authorized to execute this Addendum on behalf of the Plan Sponsor and that the appropriate governing board and/or officers have authorized the Addendum.

Authorized representative’s signature _____ Date _____
Print name of signatory _____ Title _____

The undersigned, on behalf of the plan sponsor named in Part 1, hereby certifies that the signatory above is authorized to execute this Addendum on behalf of the Plan Sponsor.

Second representative’s signature _____ Date _____
Print name of signatory _____ Title _____

Part 7 – Wespeth Signatures

Wespeth hereby accepts this Addendum submitted by the Plan Sponsor named in Part 1.

Authorized signature _____ Date _____
Authorized signature _____ Date _____

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

Email scanned copy to: retservices@wespeth.org or

Fax to: 1-847-866-4635 or

Mail to: Wespeth
Attention: Retirement Services
1901 Chestnut Avenue
Glenview, IL 60025-1604

Be sure to keep a copy for your records.