

Checklist for Determining 403(b) Hardship Withdrawals

The Presbyterian Church in America 403(b)(9) Retirement Plan (“Plan”) provides for hardship withdrawals in two situations:

- A Plan participant who has not terminated service with his or her employer and who is not yet entitled to receive benefits under the Plan may receive a hardship withdrawal first from all or a portion of his or her Salary Reduction Contributions and Roth Contributions (excluding any earnings on such accounts), and then from his or her Employer Basic Contributions and Employer Matching Contributions. Spousal consent is required.
- A Plan participant who is a PCA Teaching Elder who has been “without call” for a minimum of sixty (60) days may elect to receive benefits under the Plan to pay for basic living expenses that constitute an immediate and heavy financial need. Spousal consent is required.

Please note the following:

- All hardship withdrawals are reported to the IRS on Form 1099-R.
- A hardship withdrawal will generally constitute taxable income (subject to the rules for Roth Contributions). In addition, if you are not yet age 59½, the hardship withdrawal will generally be subject to a 10% early distribution penalty. You should consult your tax advisor regarding how the income tax rules will apply to you.
- You must retain documentation to support your claim of a financial hardship. You must also provide copies of your documentation to PCA Retirement & Benefits, Inc. (please see below for examples).

PART 1 – Checklist

Please complete the following questions to determine if you qualify for a hardship withdrawal. If you answer no to any of the following questions, you are not eligible for a hardship withdrawal. All available distributions must be obtained before a hardship withdrawal may be taken.

1. Is the expense one of the following permitted hardship expenses?	Check Appropriate Box	
	YES	NO
• Uninsured medical expenses for you, your spouse, your child or your tax dependent		
• Purchase of your principal residence		
• Tuition, related educational fees and room and board expenses for post-secondary education for you, your spouse, your child or your tax dependent		
• Prevent eviction from your principal residence or foreclosure on the mortgage on your principal residence		
• Payments for burial or funeral expenses for your parent, your spouse, your child or your tax dependent		
• Expenses for repair of damage to your principal residence that would qualify for the casualty deduction under Code § 165 (determined without regard to the requirement that the loss is attributable to a Federally declared disaster or the requirement that the loss exceed 10% of adjusted gross income)		
• Expenses and losses (including loss of income) incurred by you on account of a disaster declared by FEMA (your principal residence or place of employment must be located in the disaster area)		
• For a PCA Teaching Elder who has been “without call” for at least sixty (60) days: basic living expenses that constitute an immediate and heavy financial need		



2. Do you have documentation to support your expense?

Check Appropriate Box

YES

NO

The amount of the withdrawal cannot exceed the amount necessary to satisfy the immediate and heavy financial need (including any amounts necessary to pay federal, state or local income taxes expected to result from the withdrawal).

Examples of documentation to retain in your tax file and that you must forward to PCA Retirement & Benefits, Inc. along with this form prior to your withdrawal request being processed:

- Uninsured medical expenses - copies of bills and insurance claim statements/explanations of benefits showing that insurance does not cover the requested amount
- Purchase of a principal residence - copy of purchase agreement or a builder's contract
- College tuition - copy of bill for tuition, fees and room and board
- To prevent eviction or foreclosure on your principal residence - copy of eviction or foreclosure notice indicating imminent eviction or foreclosure
- Burial or funeral expenses - copy of death certificate and copy of bill from cemetery or funeral home
- Damage to principal residence - evidence of casualty, copy of repair bill, and proof that insurance proceeds did not cover the expense
- Expenses and losses on account of disaster declared by FEMA - copy of bill for repair expenses; letter from employer confirming loss of income
- PCA Teaching Elder taking withdrawal for basic living expenses: (a) letter from Stated Clerk confirming "without call" status; and (ii) estimated budget of required need

3. Have you obtained all available distributions (other than hardship withdrawals) under all plans whether qualified or non-qualified, maintained by your employer?

Check Appropriate Box

YES

NO

Participant's Signature

Date

Spouse's Signature **(Required if married.)**

Date

Part 2 - Distribution Dates - Please read carefully

- Completed requests will be processed and a check will be sent generally within 10 business days of receipt.
- Until your request is processed, your account will be subject to the investment performance of your chosen investments. If you are concerned about market fluctuations, please make the appropriate changes to your investments.



Part 3 – Participant Information – Required

Name (First, MI, Last)			Date of Birth	
Address		City	State	Zip
Home Phone		Cell Phone		

Part 4 – Hardship Categories – Please indicate the category of your financial need.

In compliance with the Internal Revenue Code and the Plan, hardship withdrawals can be made only under certain conditions. A Plan participant who has not terminated service with his or her Employer and who is not yet entitled to receive benefits under the Plan may take a hardship withdrawal first of all or a portion of his or her Salary Reduction Contributions and Roth Contributions (excluding any earnings on such accounts), and then from his or her Employer Basic Contributions and Employer Matching Contributions. A Plan participant who is a PCA Teaching Elder who has been “without call” for a minimum of sixty (60) days may elect to receive benefits under the Plan to pay for basic living expenses that constitute an immediate and heavy financial need. Hardship withdrawals can be requested only to satisfy an immediate and heavy financial need related to the following categories. Please indicate which of the following categories is applicable to your request:

Uninsured medical expenses incurred by you, your spouse, your child or other tax dependent.

Purchase of your principal residence.

Payment of up to the next 12 months of tuition related educational fees and room and board expenses for post-secondary education for you, your spouse, your or other tax dependent.

Prevent eviction from your principal residence or foreclosure on the mortgage on your principal residence.

Payments for burial or funeral expenses for your deceased parent, spouse, child or other tax dependent.

Expenses for the repair of damage to your principal residence that would qualify for the casualty deduction under Code § 165 (determined without regard to the requirement that the loss is attributable to a Federally declared disaster or the requirement that the loss exceed 10% of adjusted gross income).

Expenses and losses (including loss of income) incurred by you on account of a disaster declared by FEMA (your principal residence or place of employment must be located in the disaster area).

For a PCA Teaching Elder who has been “without call” for a minimum of sixty (60) days: basic living expenses that constitute an immediate and heavy financial need.

Part 5 - Hardship Certifications – Please read the following and sign below.

By my signature below, I acknowledge that I have read, understand and agree to all pages of this Hardship Withdrawal Form and affirm that all information that I have provided is true and correct. I certify that:

- The withdrawal is not in excess of my immediate and heavy financial need (including any amounts necessary to pay any federal, state, or local income taxes or penalties reasonably anticipated to result from the withdrawal).
- I have obtained all distributions (other than hardship withdrawals) available under the Plan and all other plans, whether qualified or non-qualified, maintained by my employer.
- I have insufficient cash or other liquid assets reasonably available to meet the financial need.

Participant’s Signature

Date



Part 6 – Withdrawal Amount and Tax Withholding – Required.

Federal: Please select one of the following Federal income tax withholding options:	
Withhold Federal income taxes at the following rate _____% (If no election is made, taxes will be withheld at the standard 10%)	Please select one of the following options: Total Account Withdrawal Partial Withdrawal Amount \$ _____
Do not withhold Federal income taxes	
State: State income tax withholding is mandatory in some states. If you live in a State in which State income tax withholding is not mandatory, you can make the following election:	
If permitted by my State, do not withhold State income taxes.	

Please note that a hardship withdrawal will generally constitute taxable income (subject to the rules for Roth Contributions), regardless of whether you have income tax withheld. In addition, if you are under age 59½, the hardship withdrawal will generally be subject to a 10% early distribution penalty. You should consult your tax advisor regarding how the income tax rules will apply to you.

Part 7 – Signatures to Authorize Withdrawal – Required.

Please read the following statement and sign below. If you are legally married, **your spouse must sign** the spousal consent statement in this section.

I have read and understand the information regarding potential tax consequences related to this withdrawal. I understand the administrative constraints related to this request and acknowledge that the Presbyterian Church in America will retain no further liability to me or my beneficiaries upon completion of this withdrawal. All decisions regarding this payout are my own.

Certification (Required) – Participant must check one of the following:

I hereby certify that I am currently married.

- Spouse must complete Spousal Consent Section on following page.

I hereby certify that I am married but cannot locate my spouse.

- Do not complete Spousal Consent Section on following page.

I hereby certify that I am not married and that there are no plan benefits payable to a former spouse under a Qualified Domestic Relations Order.

- Do not complete Spousal Consent Section on following page.



Part 8 - Spousal Consent – Required if Married

As spouse of the above-named employee, I have read this consent form and the withdrawal form to which it relates. I understand that my consent is required for my spouse to receive the distribution as stated on this form. The Plan will not make this distribution unless I sign this consent form.

I understand that, if this consent form is signed and the requested distribution is made to my spouse, the amount available to provide benefits to me on my spouse’s death may be reduced. I understand that my consent may not be revoked or withdrawn once given. With this knowledge, I hereby consent to this distribution as requested by my spouse.

Spouse’s Signature

Date Signed

Notarized: (Required)

Expires:

Sworn to and witnessed by me, this _____ day of _____ (month), _____ (year).

Notary Public

Date Signed

Employee’s Signature – Required

I have read and properly completed the above information and fully understand the elections I have made.

Spouse’s Signature

Date Signed

Notarized: (Required)

Expires:

Sworn to and witnessed by me, this _____ day of _____ (month), _____ (year).

Notary Public

Date Signed

For requests of \$100,000 and greater: Medallion Signature Guarantee for participant and for spouse if married.

Please have each signature separately guaranteed by a bank, savings and loan association, trust company, credit union, broker-dealer, or another 'eligible guarantor institution' as defined under the rules adopted by the Securities and Exchange Commission. These institutions often participate in signature guarantee medallion programs such as the Securities Transfer Agent Medallion Program (STAMP). **A notary public cannot provide a signature guarantee.**

Return Form and Documentation to:

PCA Retirement & Benefits
1700 N. Brown Road, Ste 106
Lawrenceville, GA 30043

Fax: 678-825-1261
Email: retirement@pcarbi.org