

Adventist Retirement Plan Parsonage Allowance Designation Form

Group ID 93406-01 or 93406-02

Pastors who wish to designate distributions made from the Adventist Retirement Plan as Parsonage Allowance must complete this form and have it authorized by both their local employer and the ARP office. *Beginning October 1, 2010 pastors may preserve a parsonage allowance whether taking a periodic pension payment or a lump sum distribution from this plan. NOTE: Allowance claimed is limited to the **least** of annual fair rental value, amount expended on eligible housing costs, or amount designated as parsonage allowance.* Once EMPOWER receives this form from the ARP office, all 1099-R tax forms issued to an authorized pastor will reflect 100% of distributions as parsonage allowance eligible. Since the parsonage allowance exclusion is limited by law, you may wish to consult your tax advisor.

Employee Information:

Name: _____ SSN: _____

Address: _____

City: _____ State: _____ ZIP: _____

After completing this section, send to current or last denominational employer for authorization. Do not send this form to EMPOWER.

Employer Authorization: (by the employee's last denominational employer)

This is to confirm that the above named employee is parsonage allowance eligible in distributions from the Adventist Retirement Plan because of the following qualifications:

1. The retired employee was determined to be eligible for and received the parsonage allowance exclusion from the last denominational employer prior to retirement, or
2. The retired employee did not receive the parsonage allowance from the last denominational employer prior to retirement but at least one-half of total service credit was earned in ministry* during which time ministerial credentials were held.

** Service in ministry for this purpose includes pastoral/chaplaincy ministry by a person holding ministerial credentials, the functioning of ordained ministers in the conduct of religious worship, the administration and maintenance of the Church and its integral agencies and the performance of teaching and administrative duties at theological seminaries. It also includes service of ordained ministers who teach or have positions involving administrative and over-all management duties in parochial schools, colleges, or universities which are integral agencies of the Church.*

Name of Employing Organization: _____

Authorized Signature: _____ Date: _____

Print or Type Name of Authorized Signature: _____

After authorizing that the employee is eligible to preserve a parsonage allowance in retirement distributions as defined above, mail this form to:

Adventist Retirement Plan
ATTN: Kristina Dahabura
9705 Patuxent Woods Drive
Columbia, MD 21046
Fax: 443-259-4880

Adventist Retirement Plan Authorization

ARP administration hereby confirms that the above-named person is parsonage allowance exclusion eligible for purposes of periodic distributions from ARP.

Authorized ARP Signature: _____ Date: _____

Print or Type Name of Authorized ARP Signature: _____

Questions about this form may be directed to the Adventist Retirement Plan at (443) 391-7330