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Last 4 digits of SSN/TIN

☐ Qualified 401(k) plan (Profit sharing, money purchase, safe harbor or Thrift Savings plan).

☐ Non-Roth

☐ Pretax amount: \$

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All contributions and earnings, excluding Roth contributions and earnings.

☐ After-tax amount: \$

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☐ Roth (employee contributions and earnings)

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☐ 403(b) plan (Tax sheltered annuity or tax deferred annuity).

☐ Non-Roth

☐ Pretax amount: \$

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All contributions and earnings, excluding Roth contributions and earnings.

☐ After-tax amount: \$

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☐ Roth (employee contributions and earnings)

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☐ Governmental 457(b) plan (Deferred compensation).

☐ Pretax amount: \$

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All contributions and earnings, excluding after-tax contributions and earnings.

☐ After-tax amount: \$

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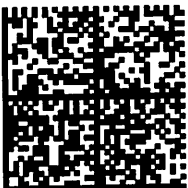
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Last 4 digits of SSN/TIN

☐ IRA (Only pretax amounts may be rolled over.)

☐ Check here if you are rolling your money from a terminated SIMPLE IRA within the first 2 years of participation. You understand that this rollover money will be restricted like employee deferral money for distribution purposes. If you do not check this box, we assume you are not rolling in money from terminated SIMPLE IRA within the first 2 years of participation.

Instructions and authorization from the Owner/Account holder to current trustee or custodian

As owner of the account referenced below, I hereby authorize you, _____
to liquidate: *enter company name*

☐ 100% - Approximate amount: \$ _____, _____, _____.

OR

☐ Part: \$ _____, _____, _____ of my account and transfer the proceeds to my new employer sponsored plan:

☐ Immediately.

OR

☐ At maturity, if applicable.

☐ An in-direct 60-day rollover from a (if an exception(s) applies, please indicate reason(s) for late contribution type below the plan type):

NOTE: Only Roth earnings can be in-directly rolled over. Roth contributions cannot be in-directly rolled over. If Roth contributions are received as an in-direct rollover, they will be returned to you.

☐ Qualified 401(a) (Pension plan, profit sharing, money purchase, defined benefit or ESOP plan).

☐ Qualified 401(k) plan. (Profit sharing, money purchase, safe harbor or Thrift Savings plan).

☐ Non-Roth

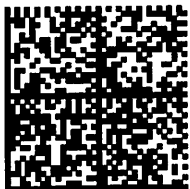
☐ Pretax amount: \$ _____, _____, _____.

All contributions and earnings, excluding Roth earnings.

☐ After-tax amount: \$ _____, _____, _____.

☐ Roth (employee earnings)

\$ _____, _____, _____.



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Last 4 digits of SSN/TIN

☐ 403(b) plan (Tax sheltered annuity or tax deferred annuity).

☐ Non-Roth

☐ Pretax amount: \$

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All contributions and earnings, excluding Roth earnings.

☐ After-tax amount: \$

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☐ Roth (employee earnings)

\$

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☐ Governmental 457(b) plan (Deferred compensation).

☐ Pretax amount: \$

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All contributions and earnings, excluding after-tax contributions and earnings.

☐ After-tax amount: \$

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☐ IRA (Only pretax amounts may be rolled over.)

Instructions and authorization from the Owner/Account holder to current trustee or custodian

As owner of the account referenced below, I hereby authorize you, enter company name
to liquidate:

☐ 100% - Approximate amount: \$

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OR

☐ Part: \$

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 of my account and transfer the
proceeds to my new employer sponsored plan:

☐ Immediately.

OR

☐ At maturity, if applicable.

☐ An in-direct rollover of a loan offset (401(k), 403(b) or Governmental 457(b) plan). May be in-directly rolled over prior to your tax filing deadline for the year in which the loan was offset.

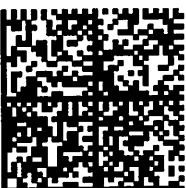
Reasons for late contribution

My in-direct rollover is outside of the 60-day limit for depositing the money after receiving the distribution. I intended to make an in-direct rollover within the 60 days but was unable to do so for the following reason(s). Check all that apply:

☐ An error was committed by the financial institution making the distribution or receiving the contribution.

☐ The distribution was in the form of a check, and the check was misplaced and never cashed.

☐ The distribution was deposited into and remained in an account I mistakenly thought was a retirement plan or IRA.



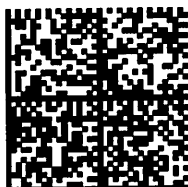
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Last 4 digits of SSN/TIN

☐	My principal residence was severely damaged.
☐	One of my family members died.
☐	I, or one of my family members was seriously ill.
☐	I was incarcerated.
☐	Restrictions were imposed by a foreign country.
☐	A postal error occurred.
☐	The distribution was made on account of an IRS levy, and the proceeds of the levy have been returned to me.
☐	The party making the distribution delayed providing information that the receiving plan or IRA required to complete the rollover despite my reasonable efforts to obtain the information.

Step 3: Previous provider (recordkeeper) information

Name of previous provider (recordkeeper):	Name of provider (recordkeeper)		(DEFINED Benefit)	
	ADVENTIST RETIREMENT PLAN			
	Address			
	9705 PATUXENT WOODS DR			
	City	State	ZIP code	
	COLUMBIA	MD	21046	
	Account number			
	- N/A -			
	Fax number			



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Last 4 digits of SSN/TIN

Step 4: Required documentation

Please provide a copy of the most recent account statement if you are requesting:

- A direct or in-direct rollover from:
 - An IRA.
 - An employer sponsored plan.

The account statement must include the Internal Revenue Code (Code) plan type, plan name, the cost basis of any after-tax contributions, and if applicable, the amount of the in-direct rollover attributable to loan offset (including the cost basis of any loan offset amounts). Also, provide the Roth first contribution date and Roth contribution and earnings amounts, if applicable.

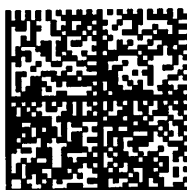
If you have already received a distribution check, a copy of the original distribution check stub must be attached.

If you are requesting any of the above transactions except a direct or in-direct rollover from an IRA, and you do not have the information needed on the statement, please have your previous plan administrator complete the applicable fields below. Also, provide the signature of the previous employer as plan administrator.

The name of the distributing plan is

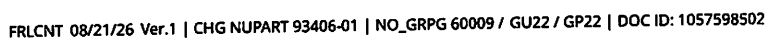
(hereinafter referred to as the "plan"). The plan administrator of the plan certifies to the best of their knowledge that:

(1) The plan is designated or intended to be tax qualified under the Code and meets the requirements of a: ☐ Qualified 401(a) plan. ☐ Qualified 401(k) plan. ☐ 403(b) plan. ☐ 457(b) governmental plan.					
(2)	Amount of loan offset (report cost basis information in the fields below): \$				
(3)	Employer/employee pretax contributions and earnings: \$				
(4)	<table border="0"><tr><td>After-tax contributions: \$ </td><td>After-tax cost basis: \$ </td></tr><tr><td>After-tax earnings: \$ </td><td>12/31/86 after-tax cost basis: \$ </td></tr></table> All amounts will be considered employee pretax contributions and earnings if this section is not completed.	After-tax contributions: \$	After-tax cost basis: \$	After-tax earnings: \$	12/31/86 after-tax cost basis: \$
After-tax contributions: \$	After-tax cost basis: \$				
After-tax earnings: \$	12/31/86 after-tax cost basis: \$				
(5)	<table border="0"><tr><td>12/31/86 values: \$ </td><td>12/31/88 values: \$ </td></tr></table> Note: If no historical account value information is provided, all amounts will be considered as attributable to post-December 31, 1988 values.	12/31/86 values: \$	12/31/88 values: \$		
12/31/86 values: \$	12/31/88 values: \$				



Last 4 digits of SSN/TIN

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Last 4 digits of SSN/TIN

Step 5: Participant acknowledgments

Empower Advisory Group, LLC - If you have elected to have your account professionally managed by Empower Advisory Group, LLC and this form is submitted, your rollover will be invested according to your current investment allocation on file.

General information - Only certain types of withdrawals are eligible for rollover treatment, and that is solely your responsibility to ensure such eligibility. By signing below, you affirm that the funds you are rolling over are in fact eligible for such treatment.

You authorize these funds to be rolled over into your employer's plan and to be invested according to your current investment allocation on file. **All funds rolled into the Adventist Retirement Plan are subject to the terms of the Adventist Retirement Plan.**

If you do not have a current investment allocation on file, we will allocate the assets to the default investment options selected by your plan. If no default investment option is selected, the funds will be returned to the payor.

You acknowledge and agree that if the former asset custodian remits additional residual amounts related to this transaction, such assets will be allocated to your current investment allocation on file. If your initial assets are received more than one year after we reviewed and approved this Rollover Form, we will require that you submit a new Rollover Form for review and approval.

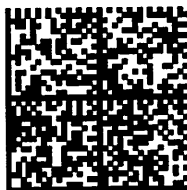
You must call us at 1-888-737-4480 or access your account at **empowermyarp.com** in order to make changes or transfer monies from the default investment option(s). The assets will be processed on the date that both the form and the assets are received in good order. This completed form must be received by us at the address below. Assets will not be invested until after approval is granted. Forms and documentation received after market close will be reviewed for approval the following business day.

The current provider may require that you furnish additional information before processing the transaction requested on this Rollover Form. We are not responsible for determining the status of any transactions you have requested. It is entirely your responsibility to provide the current provider with any information that they may require, and/or to notify us of any information that the current provider may wish to obtain in order to effect the transaction.

Withdrawal restrictions - The Internal Revenue Code and/or your employer's plan document may impose restrictions on the availability of certain monies (amounts contributed and accruing after December 31, 1988) under 403(b) tax sheltered annuities. The restricted monies cannot be distributed to participants before the occurrence of one of the following: attainment of age 59½; severance of employment from the employer (due to total disability, retirement, termination or otherwise); financial hardship as defined under present or future IRS regulations (in which case only elective deferrals may be withdrawn); or death of participant.

Account corrections - It is your obligation to review all confirmations and quarterly statements for discrepancies or errors. You understand that you are responsible for promptly communicating any errors for correction to us.

Outstanding loan balance - An outstanding loan balance cannot be included in the transaction requested on this Rollover Form. However, you may pay off the outstanding loan balance before this Rollover Form is submitted. After the loan is paid off, you may submit this Rollover Form. If you do not pay off the outstanding loan balance, you may rollover the amount of the loan offset from the plan prior to your tax filing deadline. Consult a tax advisor with questions.



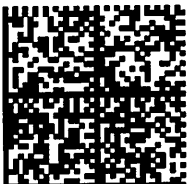
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Last 4 digits of SSN/TIN

Certification for late rollover contribution - Pursuant to Internal Revenue Service *Procedure 2016-47*, you certify that your in-direct contribution which you have described on this form missed the 60-day rollover deadline for the reason(s) you selected. You are making this contribution as soon as possible after the reason(s) you indicated no longer prevent you from making the contribution. You understand that this certification concerns only the 60-day requirement for an in-direct rollover and that, to complete the in-direct rollover, you must comply with all other tax law requirements for a valid rollover and with our rollover procedures.

Pursuant to Revenue *Procedure 2016-47*, unless we have actual knowledge to the contrary, we may rely on this certification to show that you have satisfied the conditions for a waiver of the 60-day rollover requirements for the amount identified on this form. We may not rely on this certification in determining whether the contribution satisfies other requirements for a valid rollover.

You declare that the representations made with respect to your certification for late rollover contribution on this Rollover Form are true. The IRS has not previously denied a request for a waiver of the 60-day rollover requirements with respect to a rollover of all or part of the distribution to which this contribution relates. You understand that in the event you are audited, and the IRS does NOT grant a waiver for this contribution, you may be subject to income and excise taxes, interest and penalties. If the contribution is made to an IRA, you understand we will be required to report the contribution to the IRS. You also understand that you should retain a copy of this signed certification with your tax records.



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Last 4 digits of SSN/TIN

Step 6: Signatures and consent

My consent

My signature indicates that I have read, understand the effect of my election and agree to all pages of this Rollover Form. I affirm that all information is true and correct.

If a rollover is requested, I certify that:

- 1) The distribution was not a: series of periodic installment payments, required minimum distribution, hardship or unforeseeable emergency distribution, excess contribution(s), Roth IRA assets or taken for reasons of:
1) qualified birth or adoption; 2) domestic abuse victim; 3) qualified disaster recovery; or 4) Emergency personal expense withdrawal (not applicable to the repayment amounts of these withdrawals).
- 2) If an in-direct 60-day rollover, the rollover contribution is being made to the plan within 60 days from the date I received my distribution.
- 3) Any in-direct rollover of a loan offset from a prior employer plan at the point of my separation or the plan's termination is being made to the plan prior to my tax filing deadline (including extensions) for the year in which the loan was offset.
- 4) The entire rollover amount (including an in-direct rollover of a loan offset, if applicable) that is being rolled over would be included in my income if it were not being rolled over.
- 5) The entire amount (including an in-direct rollover of a loan offset, if applicable) is being rolled over from an "eligible retirement plan" within the meaning of Code Section 402.

I am encouraged to discuss rolling over money from one account to another with my financial advisor/planner and to consider any potential fees and/or limitations of available investment options.

I understand that an election to roll over to this plan from another plan or IRA may result in significant tax consequences to me. I am responsible for any income tax or penalties for the election I made on this Rollover Form. I acknowledge that you have not provided me with any tax or investment advice. I acknowledge that if I need financial or tax advice related to this transaction, it is my responsibility to consult with my personal financial and/or tax advisor.

Any person who presents a false or fraudulent claim is subject to criminal and civil penalties.

My signature

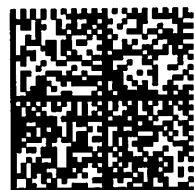
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An original, handwritten signature is required on this form.

Signature date (Required)

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(mm/dd/yyyy)



Verify and send

Make sure that you have completed each step, and send your request following the instructions below.

If you have already contacted your previous provider (recordkeeper) to initiate your transaction OR if you have already received the distribution, you should send the payment with the form and the documentation following these instructions:

If you have already received the check, and it has NOT been cashed:	Endorse the check to: Empower Trust Company, LLC
If you have already received the check, and it has been cashed:	Consider sending in a cashier's check or certified check made payable to: Empower Trust Company, LLC
Include on the check:	Your name, Individual ID number (<i>found on your statement</i>), Adventist Retirement Plan and 93406-01.
Regular Mail:	Empower Trust Company, LLC PO Box 560877 Denver, CO 80256-0877
Express Mail:	US Bank 10035 East 40th Avenue Suite 100 Attn Lockbox # 560877 DN-CO-OCLB Denver, CO 80238

If you have NOT already contacted your previous provider (recordkeeper) to initiate your transaction OR if you have NOT already received the distribution, you should send the form and documentation only following these instructions:

Electronically:	Log into your account at empowermyarp.com and click <i>Account</i> at the top of the page and then select <i>Overview</i> from the drop-down menu. From the left navigation menu, select <i>Upload documents</i> .
Regular Mail:	Empower, PO Box 173764, Denver, CO 80217-3764
Express Mail:	Empower, 8515 E. Orchard Road, Greenwood Village, CO 80111

After your request has been received and processed, we will contact you to initiate your distribution from the other provider (recordkeeper).

If you are sending the payment only via wire (form must be sent to us prior to us receiving the wire):

Wire instructions: (<i>If using wire instructions, form should be sent prior to the wire using one of the methods above.</i>)	Bank: US Bank Account of: Empower Trust Company, LLC Account Number: 103655774323 Routing transit number: 102000021 Attention: Financial Control Reference: Your name, Social Security number, Adventist Retirement Plan and 93406-01.
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