

# Enrollment Application

## 403(b)(9) Retirement Plan for Southern Baptist Self-employed Ministers and Chaplains

### PARTICIPANT INFORMATION

Miss  Dr.  
Participant name:  Ms.  Mr. First: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_  
 Mrs.  Rev.  
Social Security number: \_\_\_\_\_ Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Gender:  Male  Female Marital status:  Married  Single  
Daytime telephone: (\_\_\_\_) \_\_\_\_\_ E-mail address: \_\_\_\_\_  
Home address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_  
Spouse first name: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_  
Spouse Social Security number: \_\_\_\_\_ Spouse birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 I am a NAMB-endorsed chaplain or evangelist.

### CONTRIBUTION INFORMATION

I am a (choose one of the three options below):

**A. Chaplain** and (choose one of the two options below):

1. My employer provides me a W-2 and they will salary reduce my 403(b) contributions. (Choose one, two or all of the options below.)

I will make tax-sheltered contributions of: \$ \_\_\_\_\_

I will make employer contributions of: \$ \_\_\_\_\_

I will make Roth elective deferral contributions of: \$ \_\_\_\_\_

Roth elective deferral contributions are irrevocable once the amount is withheld and paid to the Plan; and any change can only be prospective. Tax-sheltered contributions and Roth elective deferral contributions are not eligible for a tax deduction.

2. My employer provides me a W-2; however, they will **not** salary reduce my 403(b) contributions. (Choose one or both of the options below.)

I will make employer contributions of: \$ \_\_\_\_\_

I will make Roth elective deferral contributions of: \$ \_\_\_\_\_

Roth elective deferral contributions are irrevocable once the amount is withheld and paid to the Plan; and any change can only be prospective. Roth elective deferral contributions are not eligible for a tax deduction.

**B. Self-employed minister** (receives 1099 income) and (choose one or both of the options below):

I will make employer contributions of: \$ \_\_\_\_\_

I will make Roth elective deferral contributions of: \$ \_\_\_\_\_

Roth elective deferral contributions are irrevocable once the amount is withheld and paid to the Plan; and any change can only be prospective. Roth elective deferral contributions are not eligible for a tax deduction.

**C. Foreign missionary** who is an ordained, licensed or commissioned as a minister and serves outside the United States. I will make after-tax employer missionary contributions of: \$ \_\_\_\_\_

After-tax employer missionary contributions are not eligible for a tax deduction.

**Total Contributions:** \$ \_\_\_\_\_



**CHOOSE YOUR FUNDS**

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Use one of the three options below to choose your investment funds.

**OPTION 1 – DATE TARGET FUNDS**

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Choose the (one) fund with the target date that best represents your desired retirement date (not applicable if you completed Option 2 or Option 3).

- MyDestination 2005 Fund
- MyDestination 2015 Fund
- MyDestination 2025 Fund
- MyDestination 2035 Fund
- MyDestination 2045 Fund

**OPTION 2 – ASSET ALLOCATION FUNDS**

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Choose the (one) fund that best represents your investor profile (not applicable if you completed Option 1 or Option 3).

- Conservative** – Conservative Allocation Fund (25% equities, 75% fixed income).
- Moderately conservative** – Balanced Allocation Fund (50% equities, 50% fixed income).
- Moderately aggressive** – Growth Allocation Fund (75% equities, 25% fixed income).
- Aggressive** – Aggressive Allocation Fund (100% equities).

**OPTION 3 – BUILD YOUR OWN PORTFOLIO**

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Use Option 3 if you choose to mix your own portfolio from the **Select Funds** and/or any of the other funds available (not applicable if you completed Option 1 or Option 2).

Investment Fund: _____	Percentage: _____	%
Investment Fund: _____	Percentage: _____	%
Investment Fund: _____	Percentage: _____	%
Investment Fund: _____	Percentage: _____	%
Total (must equal 100%):		%

Please write in the space below for more than four fund choices.

You have the right to make plan investment elections for contributions made on your behalf to the retirement plan. GuideStone has a designated fund to which contributions are made if you do not specify an investment election. All contributions will be placed in this fund until you change your election and you have sole responsibility for this default election.

*Participants are prohibited from exchanging out of the Capital Preservation Fund to a “competing fund” without first investing in a “non-competing fund” for a period of at least 90 days. Also, simultaneous exchanges are not allowed. For more complete information, visit [www.GuideStone.org](http://www.GuideStone.org) or call 1-888-98-GUIDE (1-888-984-8433).*

**REQUIRED SIGNATURE**

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This election will remain in effect until I revoke it in writing or until I call a Customer Relations specialist. By signing this form, I am accepting the terms of the Plan.

Participant signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Return your completed form to: Retirement Operations**  
GuideStone Financial Resources  
2401 Cedar Springs Road  
Dallas, TX 75201-1498

**Or you may fax your form to: 214-720-2105**

# Eligibility Requirements and Participant Responsibilities

## 403(b)(9) Retirement Plan for Southern Baptist Self-employed Ministers and Chaplains

By enrolling in the Plan, you certify that you have read and currently meet the eligibility requirements for the Plan. You also certify that you have read, understand and accept your responsibilities as a participant in the Plan.

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### General directions for completing the enrollment application

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- You can save time by calling **1-888-98-GUIDE** (1-888-984-8433) and enroll by phone, or enroll online at our Web site *www.GuideStone.org*.
- This form must be typed or completed in ink. If you make any changes to the written information, initial the changes.
- Use this form to enroll in the *403(b)(9) Retirement Plan for Southern Baptist Self-employed Ministers and Chaplains* (the Plan). To make contributions to the Plan, you must be a self-employed minister or a non self-employed minister. See the last page of this form for the eligibility requirements. It is your responsibility to determine whether or not you are eligible to participate in the Plan.
- If your employment situation changes and you are no longer eligible to participate in the Plan, **it is your responsibility to notify GuideStone immediately of your change in status**. There may be adverse tax consequences if you continue to participate in the Plan, but do not meet and continue to meet the eligibility requirements.

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### You must meet the following eligibility requirements

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- **Ministerial requirements:** You are a duly ordained, licensed or commissioned Southern Baptist minister of the gospel\* **and**
- **Employment status requirements:** You are receiving income from performing services as a Southern Baptist minister.

**Is this 1099 MISC self-employment income?**

If “**yes**,” you are eligible to participate in this Plan.

If “**no**,” go to the next question.

**Is this W-2 income from performing services for your employer?**

If “**yes**”:

- Is your employer a branch of the U.S. Armed Forces; or
- Is your employer a for-profit organization, or a tax-exempt organization but **not** tax-exempt under Code Section 501(c)(3) ; or
- Is your employer a tax-exempt organization under Code Section 501(c)(3), with whom you **do not** share common religious bonds or convictions?

Then, you are eligible to participate in this Plan.

If “**no**,” you are not eligible to participate in this Plan.

**Is this W-2 income from performing services for your employer, and your employer is a tax-exempt 501(c)(3) organization, with whom you share common religious bonds or convictions?**

If “**yes**,” you are not eligible to participate in this Plan. (Please contact GuideStone to discuss your alternatives.)

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### Responsibilities

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- To remit contributions to GuideStone Financial Resources.
- To maintain service, compensation and contribution records.
- To report to government agencies, as appropriate.
- To provide prompt notice to GuideStone Financial Resources when the participant’s ministry ceases to be within the bounds of the Southern Baptist Convention.
- Any other duties necessary or applicable with respect to the Plan and not specifically set forth as a duty of GuideStone Financial Resources within the plan.

If your employment situation changes and you are no longer eligible to participate in the *403(b)(9) Retirement Plan for Southern Baptist Self-employed Ministers and Chaplains*, you must notify GuideStone immediately of your change in status. There may be adverse tax consequences if you participate in the Plan but fail to meet the eligibility requirements.

\* If you are currently employed with a Southern Baptist Church, please contact a GuideStone Customer Relations specialist, to discuss the benefits of participating in the Church Retirement Plan at **1-888-98-GUIDE** (1-888-984-8433).