



REFERENCE GUIDE

UNITED CHURCH OF CHRIST LIFETIME RETIREMENT INCOME PLAN

QCCO PLAN ADOPTION AGREEMENTS AND HEALTH AND WELFARE AGREEMENT

Effective as of September 1, 2023

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This document provides a reference to assist employers in completing the applicable Adoption Agreement documents (QCCO and Health and Welfare) demonstrating their intent to adopt The United Church of Christ Lifetime Retirement Income Plan Document.

The Pension Boards, in addition to maintaining the plan document for The United Church of Christ Lifetime Retirement Income Plan, is required by the IRS to have an Adoption Agreement outlining the benefits of the plan for each employer, which must be signed by an authorized signer for the employer. In order to demonstrate compliance with this requirement, all employers must review, complete, and sign an Employer Adoption Agreement and Employer Health & Welfare Adoption Agreement (if applicable) and return the documents to the Pension Boards.

Upon completion, employers will receive a copy of the completed user adoption agreement.

QUALIFIED CHURCH-CONTROLLED ORGANIZATION (“QCCO”)

To access the QCCO Adoption Agreement, log into the Employer Portal on the Pension Boards website, <https://employers.pbucc.org> – from the left-hand side menu of the page, click on QCCO Adoption Agreement.

On the next page, select the QCCO form link option, and follow the Authentication process and Getting Started questions.

Once the Adoption Agreement is displayed, use the guide below to assist you in completing the form.

SECTION ONE – EMPLOYER INFORMATION

Part A: Adopting Employer

Complete or update the contact information for the organization:

Adopting Employer ID: 5 digit ID number assigned to your organization by the Pension Boards.

***Note**, if your organization is new to the Pension Boards, there may not yet be an Employer ID number assigned. Leave the Employer ID space blank. An ID number will be assigned once the completed document is returned.*

Name: Full name of the organization

Address, City
and State: Business Mailing address

Phone number: Business contact number for the organization

Email address: Employer Email Address.

***Note**, Pension Boards systems maintains only one email address per organization. The email address you provide will replace any other email address previously on record. This email address will be used for all official communications and service authorization/access.*

Part B: Organization Type

Select only **one** option:

1. UCC church, Conference, Association, or other organization that is treated as a church.
2. Qualified Church Controlled Organization (QCCO) by or associated with the UCC.
3. Self-employed minister or chaplain working in a ministerial capacity.

SECTION TWO – EFFECTIVE DATES

Part A: Indicate if this document is the first adoption agreement submitted by the organization or a restatement of a previous adoption agreement.

Select and complete only **one** option.

1. This document is the initial Adoption Agreement signed by the adopting employer and indicates the initial effective date.
2. This document is a restatement of a previous adoption of the plan by the adopting employer and provides the effective date for this agreement.

SECTION THREE: CONTRIBUTION TYPE ELECTIONS

Indicate employee eligibility for contributions. For each contribution type in the chart, select Yes if employees are eligible to participate or No, if they will not be eligible to participate.

Employer Contributions: If clergy or non-clergy staff are eligible for employer contributions, Click, “Yes” and indicate the percentages for Employer and Matching Contributions. If not eligible, click “no”.

The United Church of Christ Senate voted to recommend a contribution rate of 14% for employees. This rate is encouraged, but not required.

Pre-Tax Contributions by Members: Select “yes” if staff are eligible to make pre-tax contributions, “no”, if they are not eligible.

After-Tax Contributions by Members: Select “yes” if staff are eligible to make after-tax contributions. Select “no”, if they are not eligible.

Note 1: Member eligible for Pre-Tax and After-Tax contributions, set their own contribution rates via NetBenefits. Employers cannot provide this information to Fidelity on their behalf.

Note 2: Members over the age of 50 before the end of a Plan Year, are eligible to make catch-up contributions in addition to the annual Federal maximum contribution amounts allowed.

IRS Catch-Up Contributions:

Clergy Matching Contributions: Click “Yes” to indicate clergy staff are eligible to receive matching employer contributions and indicate the percentage of their annual compensation eligible for matching contributions. If clergy staff are not eligible for matching contributions, click “no”.

Non-Clergy Matching Contributions: Click “Yes” to indicate non-clergy staff are eligible to receive matching employer contributions and indicate the percentage of their annual compensation eligible for matching contributions. If non-clergy staff are not eligible for matching contributions, click “no”.

Clergy Designated Roth2 Contributions: *(available in 2024)* Select, “Yes” if clergy employees are eligible as members to designate Roth2 contributions, select, “No” if ineligible.

Non-Clergy Designated Roth2 Contributions: *(available in 2024)* Select, “Yes” if non-clergy employees are eligible as members to designate Roth2 contributions select, “No” if ineligible.

Employers offering Roth MUST offer Pre-Tax contributions by Members.

SECTION FOUR: IN-SERVICE WITHDRAWALS & LOANS

Select distribution types that that may be requested by members:

Select any or all that apply:

1. Select Hardship Distribution, if employed members may elect Hardship Distributions under the rules provided in the Hardship Distribution Policy attached as appendix C of the form.
2. Select Loans, if employed members are eligible for loans under the rules provided in the Loan Policy attached as Appendix D in the form.
3. Select Qualified Birth or Adoption Distributions if employed members are eligible.

Note: Employed Members must have TSA or member contributions on account to request a Distribution. Members with only employer contributions are not eligible.

SECTION 5: ADOPTION AND EXECUTION

To complete the agreement, an officer or authorized representative of the organization must read the document, review the designated elections and agree to the plan and provisions of the Adoption Agreement on behalf of the organization by signing the document and returning it to the Pension Boards.

The officer or authorized representative should use the spaces provided to sign and print their name, provide their title and indicate the effective date of the agreement.

If possible, use the date the form is executed as the effective date.

NOTE: Complete information requested in Appendix A and if applicable, Appendix B before submitting this agreement.

The adopting employer should maintain an executed copy of this document for their records.

If you have any questions, contact the Pension Boards at info@pbucc.org or at 800-642-6543.

APPENDIX A: Payroll Frequency

Payroll Frequency information is not part of the Adoption Agreement; however, it is required to calculate plan contribution amounts.

In Appendix A, Select the payroll frequency for your organization: Weekly, Bi-Weekly, Monthly or Twice Monthly.

Enter the date of the last paycheck issued. Example, if your payroll frequency is weekly and your pay day falls on Friday, the date of your last check would be last Friday's date.

NOTE: Please report any future changes in payroll frequency to the Pension Boards at 800-642-6543

APPENDIX B: Eligibility Requirements

If employee eligibility is contingent on additional requirements as listed in the chart; age, length of service, hours, etc., designate these requirements in the spaces provided.

If the organization does not require any of the restrictions listed, you do not need to fill out Appendix B.

Important: Appendix B: Eligibility Requirements is provided for the employer to document and manage criteria that determine employee eligibility to participate in the plan. **The Pension Boards takes no action on the data provided in this chart.** It is the Employer's responsibility to notify the Pension Boards when an employee is eligible for plan entry and monthly contributions.

When an employer notifies the Pension Board that an employee is eligible, plan entry will occur on the 1st of the month following the month that the Pension Boards is notified of a member's eligibility.

Indicate all that apply for each contribution type:

Age: For employees under the age of 21, check the box and indicate at what age an employee will become eligible.

Length of Service: If employees are required to work a certain number of months before eligibility, check the box and insert the number of months required (no greater than 12).

Weekly Hours: Check the box If employees are required to work 20 hours or more to be eligible contributions.

Non-Resident Aliens with No U.S. Income: If there is a non-resident alien U.S. Income requirement for participation, check the box.

Excluded Employees: If there are any employee types not eligible to participate, enter them into the designated space.

EMPLOYER HEALTH & WELFARE ADOPTION

Use this link to access the Health & Welfare Adoption Agreement,
<https://employers.pbucc.org/index.php/master/1280-adoption-agreements-doc>

After 9/1 you can access the Health & Welfare Adoption Agreement from the Employer Portal, <https://employers.pbucc.org> – from the left-hand side menu of the page, click on Health & Welfare Adoption Agreement.

On the next page, select the Health & Welfare Adoption Agreement form link option, and follow the Authentication process and Getting Started questions.

Once the Adoption Agreement is displayed, the below provides a guide to assist in completing the form.

SECTION ONE – EMPLOYER INFORMATION

PART A: Complete the contact information for the employer. If you are new to the Pension Boards, leave the Employer ID blank. One will be assigned to you once the completed document is returned.

PART B – Related Employers.

List employer who is eligible to adopt and participate in the plan. Include employer name and 5-digit PBUCB employer ID number. If the employer is not participating in the plan, the employer must complete an adoption agreement.

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SECTION TWO – EFFECTIVE DATES

1. Select if first time the Adoption Agreement is being completed.
2. Select If this is a reinstatement or change to the original Adoption Agreement.

SECTION THREE – EMPLOYER PLAN ELECTION (Select all applicable options)

This section list all the health benefits plans offered through the Pension Boards.

- Medical
- Dental
- Vision
- Life Insurance and Disability Benefits
- Flexible Spending Account

SECTION FOUR – ELIGIBILITY & CONTRIBUTION REQUIREMENT

PART A- C – HEALTH, LIDI, FSA PLANS (Select only one)

- 1- Select if all employees (clergy and lay) are eligible to participate, effective the 1st of the month following hire date.
- 2- Selected if there are specific requirements that need to be met to be eligible for participation, for example, waiting or probational period, (must work 60 continuous days) or if an employee contribution is required (for example, the employee would pay 20% of the premium and employer pays 80%).

SECTION FIVE – EMPLOYER RESPONSIBILITIES – Please read

This is the employer's responsibility and agreement to abide by the plan rules and provisions. Employer agrees to terms and conditions under the plan.

SECTION SIX – AMENDMENTS – Please read

This section highlights terms and conditions when the plan may be amended.

ADOPTION AND EXECUTION

Update with the effective employer's name and appropriate signatures.

COMPLETING AND SUBMITTING THE FORMS

Once you have completed a form, including signing the form, select the DONE option that appears at the bottom or upper right-hand side of the screen.

If any of the required fields are left blank, it will prompt you to the appropriate section to completed.

Once all the completed fields are filled, a pop up will appear asking you to confirm you are done and the form is good to go.

On the next screen that is displayed you will have several options:

- Send me a copy – select this option if you would like a PDF copy of the agreement emailed to you.
- Download document – select this option if you would like a PDF copy saved to your documents
- Save to pdfFiller – select this option if you want to save a copy of the document as a pdf. You will need to create a pdfFiller account if you don't have one.

We strongly recommend that you send a copy of the document to your email or download the document for your records.

After making your selections, select the Continue option on the screen. This will submit your document to the Pension Boards for processing.

You will receive a confirmation that your documents have been received. If you are a new employer you will receive your Employer ID via email once it is processed by Member Services.