



# CHURCH OF THE BRETHREN PENSION PLAN

A not-for-profit ministry of Church of the Brethren Benefit Trust Inc.  
929 East Main Avenue Suite 235 • Puyallup, WA 98372  
866-723-0001 • Fax 253-268-3896  
[www.brethrenpension.org](http://www.brethrenpension.org) • [BPPServiceCenter@nwretirement.com](mailto:BPPServiceCenter@nwretirement.com)

# 2021 Pension Plan Remittance Form

(ACH Electronic Payment)

Member Name \_\_\_\_\_  
SSN \_\_\_\_\_  
Person Sending Remittance \_\_\_\_\_  
Email \_\_\_\_\_  
Daytime Phone \_\_\_\_\_

Plan #: \_\_\_\_\_ Church Code: \_\_\_\_\_

Employer _____ (church, district, camp, etc.)
Church Address _____ _____

**Electronic transfers are posted on the first business day of each month or quarter.  
Indicate your requested frequency by checking the box below.**

**Complete this form annually or if salary and/or housing allowance changes.**

**Notify Brethren Pension Plan IMMEDIATELY of ANY CHANGE in employment so that the appropriate adjustment can be made to your ACH withdrawal.**

**Reminder: there is a \$50 fee to process a remittance by check. ACH payments are free.**

### Pension Base Calculation

- A. Base cash salary \_\_\_\_\_ (A)
- B. If additional housing allowance (in lieu of parsonage) is designated by the congregation, use actual amount. (If parsonage is provided, use the annual fair rental value of the parsonage.) \_\_\_\_\_ (B)
- C. **Total Annual Pension Base (A) + (B)** \_\_\_\_\_ (C)

### Contribution Calculation

On lines (D), (E), and (F) multiply the Total Annual Pension Base (C) by the percentage elected in your supplement to determine the annual employer and member contribution figures. (As a guideline, Annual Conference recommends 11% employer, 4% member, and 1% for CWAP.) **Add the amount for your ACH withdrawal to the Quarterly or Monthly Contribution columns, not both. The Annual Contribution column is for calculation purposes only.**

This remittance is for:  Quarterly Contributions  Monthly Contributions  Other (period ending \_\_\_\_\_)

### Recommended Contribution

Fill in all lines below, even if 0%

	Annual Contribution For calculation purposes only	For Quarterly Contribution <small>Divide Annual Contribution by 4 to determine Quarterly Contribution</small>	For Monthly Contribution <small>Divide Annual Contribution by 12 to determine Monthly Contribution</small>
D. Employer (ERB1) _____% or recommended 11%	\$ _____	\$ _____	\$ _____ (D)
E. Employer – 1% CWAP*	\$ _____	\$ _____	\$ _____ (E)
F. Member – <input type="checkbox"/> Tax Deferred (BEF1) _____% or recommended 4%	\$ _____	\$ _____	\$ _____ (F)
<input type="checkbox"/> Roth (RTH1) _____% or recommended 4%	\$ _____	\$ _____	\$ _____ (F)

### Additional Contribution

- G. Member –  Tax Deferred (BEF2) Optional: \_\_\_\_\_% or dollar amount \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ (G)
- Roth (RTH2) Optional: \_\_\_\_\_% or dollar amount \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ (G)

**Total Contribution (ACH withdrawal amount) (D) + (E) + (F) + (G)** \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

\* Per Annual Conference action, a Church Workers' Assistance Plan contribution is required of employers for all employees of local churches, districts, and camps.

\_\_\_\_\_  
Signature of Employer Representative

\_\_\_\_\_  
Date

Brethren Pension Plan Service Center  
929 East Main Avenue, Suite 235  
Puyallup, WA 98372

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