

**Traditional IRA Contribution Election**

**PART 1. IRA OWNER**

Name (First/Mi/Last) \_\_\_\_\_  
 Social Security Number \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Phone \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Member Number \_\_\_\_\_ Share ID \_\_\_\_\_

**PART 2. IRA TRUSTEE OR CUSTODIAN**

SchoolsFirst Federal Credit Union  
 Attn: IRA Services  
 P.O. Box 11547  
 Santa Ana, CA 92711-1547  
 Phone: 800.462.8328  
 Fax: 714.258.4185

**Overnight Address:**  
 SchoolsFirst FCU  
 Attn: IRA Services  
 1200 Edinger Ave.  
 Tustin, CA 92780

**PART 3. CONTRIBUTION INFORMATION**

Contribution Amount \$ \_\_\_\_\_  
 Contribution Date \_\_\_\_\_  
 Contribution for Tax Year \_\_\_\_\_

**RULES AND CONDITIONS APPLICABLE TO TRADITIONAL IRA CONTRIBUTIONS**

The IRA contribution rules are often complex. The general rules are listed below. If you have any questions regarding a contribution, please consult with a competent tax professional or refer to IRS Publication 590-A, *Contributions to Individual Retirement Arrangements (IRAs)*, for more information. This publication is available on the IRS website at [www.irs.gov](http://www.irs.gov) or by calling 1-800-TAX-FORM.

**REGULAR CONTRIBUTION**

The total amount you may contribute to a Traditional IRA for any tax year cannot exceed the lesser of the published annual limit or 100 percent of your earned income and other eligible compensation. If you also maintain a Roth IRA, the maximum contribution to your Traditional IRA is reduced by any contributions you make to your Roth IRA.

- You may make a contribution for the prior year up until your tax filing deadline for that year, **not including extensions**. Designating a contribution for the prior year is irrevocable.
- If you are age 50 or older by the end of the year, you may be eligible to make an additional catch-up contribution to an IRA for that tax year.

**PART 4. DEPOSIT INFORMATION** (Complete this section as applicable)

Share Term	Amount
_____	_____
_____	_____
_____	_____

**DEPOSIT METHOD**

Cash or Check  
 Internal Account  
 Member Number \_\_\_\_\_ Share ID \_\_\_\_\_

**PART 5. SIGNATURES**

I certify that all of the information provided by me is accurate and may be relied upon by the trustee or custodian. I certify that the contribution described above is eligible to be contributed to the IRA and I authorize the deposit to be invested in the manner described above.

**X** \_\_\_\_\_  
 Signature of IRA Owner Date (mm/dd/yyyy)

Witnessed and accepted by SchoolsFirst FCU as agent for custodian by:

**X** \_\_\_\_\_  
 Signature of SchoolsFirst Representative Date (mm/dd/yyyy)

\_\_\_\_\_  
 Name of SchoolsFirst Representative Representative User ID