

Roth Individual Retirement Account (IRA) Contribution Election

PART 1. ROTH IRA OWNER

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

PART 2. ROTH 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 ROTH IRA CONTRIBUTIONS

Roth 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 [irs.gov](https://www.irs.gov) or by calling (800) TAX-FORM (1-800-829-3676).

REGULAR CONTRIBUTION

The total amount you may contribute to a Roth 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. Your contribution may be further limited if your income exceeds certain limits. If you also maintain a Traditional IRA, the maximum contribution to your Roth IRA is reduced by any contributions you make to your Traditional 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 a Roth 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 the information I provided 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 Roth IRA, and I authorize the deposit to be invested in the manner described above.

X _____
Signature of Roth IRA Owner

_____ Date (mm/dd/yyyy)

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

X _____
Signature of SchoolsFirst FCU Representative

_____ Date (mm/dd/yyyy)

Name of SchoolsFirst FCU Representative

Representative's User ID