

WEAC IRA Contribution

Thank you for choosing the WEAC IRA. Please fill out the form below and send it along with your check.

To verify that you are eligible to contribute to an IRA, refer to the eligibility requirements below. If you have any questions about your eligibility, please contact one of our consultants at 1-800-279-4030 or ask your tax advisor.

1. IRA Eligibility Requirements and Contribution Limits

| IRS Criteria—Traditional IRA 2017 | IRS Criteria—Roth IRA 2017 |
|--|---|
| <ul style="list-style-type: none"> • Must be under age 70½ on December 31 of the contribution year, and • Must have earned income or file a joint tax return with a spouse who has earned income. | <ul style="list-style-type: none"> • Must have earned income or file a joint tax return with a spouse who has earned income, and • Adjusted gross income cannot exceed \$118,000 for a single person for a full contribution, or* • Adjusted gross income cannot exceed \$186,000 for a married couple filing a joint tax return for a full contribution.* |
| <p>*The amount you can contribute is reduced gradually and then eliminated when your adjusted gross income exceeds \$133,000 (single) or \$196,000 (married filing jointly).</p> | |

| IRA CONTRIBUTION LIMITS | | |
|-------------------------|-----------------|--------------------|
| Year | Under Age 50 | Age 50 or Older |
| 2016 | \$5,500 | \$6,500 |
| 2017 | \$5,500 | \$6,500 |

Send this form with your check made payable to:

WEA Member Benefits

Mailing address:

Newport Trust Company
P.O. Box 645451
Pittsburgh, PA 15264-5252

✂ Cut on dotted line—keep top portion for your records. Submit bottom portion with your payment.

2. Contribution Information

Social Security No. _____

WEAC ID No. (if applicable) _____

Name _____

Daytime Phone (_____) _____

E-Mail Address _____

Evening Phone (_____) _____

In the table below, fill in the contribution amount(s) for the WEAC IRA account(s) that you want to contribute to and the applicable tax year. Make checks payable to: WEA Member Benefits. **Please write the applicable tax year and account type* on your check. Please submit one check for each contribution.**

| Name of Account – Account Type | Tax Year* | Contribution Amount |
|---------------------------------------|-----------|---------------------|
| Traditional IRA Account – WEATRAD* | | \$ |
| Roth IRA Account – WEAROTH* | | \$ |
| SEP IRA Account –WEASEP* | | \$ |
| Total Amount (minimum \$20.00) | | \$ |

*If you do not indicate year, your contribution will be credited to the year in which your contribution was received.

3. Investment Allocation

We will use your existing allocation information on file. If you wish to have a contribution credited using different allocations, you must first change your allocations on file. You can do this by accessing your account at weabenefits.com/your money or by calling us at 1-800-279-4030.

Envelopes must be postmarked no later than April 15 to qualify for the previous calendar year's contribution. If April 15 falls on a weekend or holiday, then envelopes must be postmarked by the following business day. If you have questions, please call us toll-free at 1-800-279-4030.

If you are currently participating in *Trust Advantage* or *SmartPlan*, use this form for additional contributions up to your allowable limit.