WEA Member Benefits™
Every member financially secure.

Producer Code: ___________

P.O. Box 7893 • Madison, WI 53707-7893
1-800-279-4030
Fax: (608) 237-2529

IRA Account Application

(Select account type[s].)

❒ **Traditional**
❒ **Roth**
❒ **SEP** (Must include IRS Form 5305. Visit www.irs.gov.)
❒ **Minor** (Request Form 3088 from WEA Member Benefits)

❒ **Inherited IRA**:
Name of Deceased: ______________________
Deceased Social Security No.: ______________________
Relation to Deceased: ______________________
Deceased Date of Birth: ______________________
Date of Death: ______________________
Please provide death certificate.

1. Applicant Information

Social Security No. ______________________

Name ______________________
Last First Middle

Address ______________________
____
City State ZIP

Phone (________) ______________________

E-Mail Address ______________________

Date of Birth ______________________

Employer Name ______________________

Retirement Date (if applicable) ______________________

WEAC ID No. (if applicable) ______________________

Marital Status ◯ Single ◯ Married ◯ Widowed
Gender ❑ Male ❑ Female
Wisconsin Resident ❑ Yes ❑ No (WI RESIDENCY REQUIRED)

We will verify your eligibility for the IRA. If you are related to an eligible person, please indicate below:

❒ I am a {❒ Spouse ❒ Parents-in-law ❒ Domestic partner ❒ Parent ❒ Child} of an eligible person: ______________________
(PRINT ELIGIBLE PERSON'S NAME)

2. Personal Identification and Verification Record (This section must be completed.)

To help the government fight the funding of terrorism and money laundering activities, Federal Law requires us to obtain, verify, and record information that identifies each person who opens an account. We will verify the information provided below.

Are you an agent for a foreign or offshore private banking/trust account? ❒ yes ❒ no

Type of identification (choose one):

❒ Driver's license ❒ Passport ❒ Government ID

Identification Issued by: ______________________ Date Issued: ______________________

Document ID#: ______________________ Expiration Date: ______________________

3. Enrollment Information—I will fund my IRA via the following method:

❒ **Check attached** in the amount of $__________ for tax year __________.

❒ **SmartPlan**—Enclose a personalized voided check for this account, NOT a deposit slip.
Please submit a completed *SmartPlan IRA Authorization or Modification(s)* form with this application.

❒ ***Trust Advantage*** (if available in your school district)—per paycheck deduction of $_______($20 monthly minimum).
A *Payroll Deduction Authorization* form must be given to your payroll coordinator.

❒ **Direct transfer/rollover from WEA TSA Trust or other company account.**
Please submit a completed *Request for Transfer/Rollover to IRA* form with this application.

❒ **Rollover check attached in amount of $____________ from a distribution** within the past 60 days from my employer's plan or another IRA. Please submit a completed *Request for Transfer/Rollover to IRA* form with this application.

4. Choose an Investment Strategy

Allocations must be in whole numbers and must total 100% or your allocation will default to the age appropriate target retirement fund as published by Vanguard. The allocations below will apply to all future money for any type of contribution received by WEA Member Benefits until you change them.

You may combine investment choices from Option 1 and Option 3, and the sum of the percentages must equal 100%. If you choose Option 2, the other options are not available, and you must attach the *Risk Profile Questionnaire*.

OPTION 1—Target Retirement Funds
For those who prefer to have their investment portfolio managed for them.

VANGUARD TARGET RETIREMENT FUNDS	
Vanguard Institutional Target Retirement Income	________%
Vanguard Institutional Target Retirement 2015	________%
Vanguard Institutional Target Retirement 2025	________%
Vanguard Institutional Target Retirement 2035	________%
Vanguard Institutional Target Retirement 2045	________%
Vanguard Institutional Target Retirement 2060	________%

OPTION 2—Model Portfolios
Select one model only and attach the *Risk Profile Questionnaire*.

Model Portfolios

- ○ Conservative Model
- ○ Moderately Conservative Model
- ○ Moderate Model
- ○ Moderately Aggressive Model
- ○ Aggressive Model

OPTION 3—Hands-On Investing
For those who prefer to manage their own investment portfolio.

FIXED INCOME	
Prudential Guaranteed Investment	________%
Pioneer Bond K	________%
LARGE-CAP STOCK MUTUAL FUNDS	
Vanguard Equity Income	________%
Vanguard Institutional Index Institutional Plus	________%
Parnassus Core Equity Institutional	________%
Fidelity Contrafund	________%
T. Rowe Price Growth Stock	________%
MID-CAP STOCK MUTUAL FUNDS	
T. Rowe Price Mid-Cap Value	________%
Vanguard Mid-Cap Index Institutional	________%
T. Rowe Price Mid-Cap Growth	________%
INTERNATIONAL STOCK MUTUAL FUNDS	
Oppenheimer Developing Markets Institutional	________%
Fidelity Diversified International	________%
Vanguard Total International Stock Index	________%
SMALL-CAP STOCK MUTUAL FUNDS	
PGIM QMA Small-Cap Value	________%
Vanguard Small-Cap Index Institutional	________%
ClearBridge Small Cap Growth Institutional	________%
SPECIALTY MUTUAL FUNDS	
T. Rowe Price New Era	________%
PIMCO All Asset Institutional	________%

5. Prohibition of Telephone Access

All of your retirement accounts will be authorized for person-to-person telephone transactions unless you check the box below. Neither WEA Member Benefits nor its agents will be liable for any actions taken in compliance with such instructions they believe to be genuine.

☐ I do **NOT** authorize WEA Member Benefits to act upon telephone instructions regarding my account(s). I understand that WEA Member Benefits will accept and act upon only written instructions from me regarding my account(s).

If you do not check this box, please provide a password which will allow WEA Member Benefits to discuss your account or take investment instructions from another person you have authorized to transact on your behalf: ____________________ (up to 10 characters—no symbols or special characters allowed).

6. Beneficiary Information (See *Choosing Your Beneficiaries* brochure before completing this section.)

No matter how you complete this designation, if you are married at the time of your death, your spouse may have enforceable claims on your account pursuant to Wisconsin's marital law. You may wish to consult your attorney on this matter. If no beneficiary is chosen, your account will be paid to your estate. Please see Step 5 of the IRA Enrollment Booklet for further information**.**

Name	Date of Birth	Relationship	Percentage	◯ Primary Beneficiary ◯ Contingent Beneficiary
Name	Date of Birth	Relationship	Percentage	◯ Primary Beneficiary ◯ Contingent Beneficiary
Name	Date of Birth	Relationship	Percentage	◯ Primary Beneficiary ◯ Contingent Beneficiary
Name	Date of Birth	Relationship	Percentage	◯ Primary Beneficiary ◯ Contingent Beneficiary
Name	Date of Birth	Relationship	Percentage	◯ Primary Beneficiary ◯ Contingent Beneficiary
Name	Date of Birth	Relationship	Percentage	◯ Primary Beneficiary ◯ Contingent Beneficiary

(List additional beneficiaries on a separate page—include your account ID number, signature, and date on all additional pages.)

7. Signature and Date (Required)

I understand the eligibility requirements for the type of IRA deposit I am making, and I state that I qualify to make the deposit. I received a copy of the *IRA Account Application, Plan Agreement, Financial Disclosure,* and the IRA disclosure statement. I understand that the terms and conditions that apply to this IRA are contained in this *IRA Account Application* and the *Plan Agreement.* I agree to be bound by those terms and conditions. Within seven (7) days from the date I open this IRA, I may revoke it without penalty by mailing or delivering a written notice to WEA Member Benefits. I acknowledge that WEA Member Benefits does not provide tax, investment, or legal advice.

I acknowledge that I have read the mutual fund prospectus(es) of any of the investments I have selected.

I assume complete responsibility for all of the following: (1) determining that I am eligible for an IRA each year I make a contribution; (2) ensuring that all contributions I make are within the limits set forth by the tax laws; and (3) the tax consequences of any contributions (including rollover contributions and conversions) and distributions.

Taxpayer Certification: Under penalty of perjury, I certify that the Social Security number provided in *Applicant Information* section is the correct federal taxpayer identification number. I also certify that all information provided in this application is accurate to the best of my knowledge.

Applicant's (or Guardian's, if Minor) Signature ________________________________Date___________________

If applicant is a minor, the Guardian must complete the Indemnification Agreement to Establish an Individual Retirement Account for a Minor.

For internal use only. Face-to-face meeting conducted by: ____

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Investor Suitability Profile Questionnaire

Please be aware that if you are changing employers this application will not combine your prior employer's plan into your new employer's plan. If you wish to combine the two plans, please contact us for the necessary form.

INTERNAL USE ONLY: ◯ OHC ◯ PIA ◯ RIA ◯ 3-Year

1. Investor Information

Social Security No. (last four digits) ____________________

Name ______________________________
Last First Middle

Address ______________________________

____
City State ZIP

Birthdate: ______________________________

Employer Name ______________________________

Occupation ______________________________

Email Address: ______________________________

Phone (________) ______________________________

Marital Status: ◯ Single ◯ Married

My current annual income from all sources is:

- ◯ Less than $25,000
- ◯ $25,000–$70,000
- ◯ More than $70,000

My tax bracket is:

- ◯ 0%–12%
- ◯ 22%–24%
- ◯ *Over 32%*

My investment experience pertains to:
(You can choose more than one response)

- ◯ Savings and fixed deposits
- ◯ Bonds
- ◯ Unit trusts
- ◯ Equities
- ◯ Other(s). Please specify: ______________________________

My net worth, excluding home, furnishings, and autos:

- ◯ Under $50,000
- ◯ $50,000–$100,000
- ◯ $100,000–$250,000
- ◯ $250,000–$500,000
- ◯ $500,000–$1,000,000
- ◯ Over $1,000,000

What is your primary investment objective?

- ◯ Capital preservation
- ◯ Capital gain
- ◯ Retirement planning
- ◯ Children education
- ◯ Other(s). Please specify: ______________________________

2. Investor Profile

Time Horizon (Your current situation and future income needs)

My current age is:

- ◯ Less than 45 (5 points)
- ◯ 45–55 (4 points)
- ◯ 56–65 (3 points)
- ◯ 66–75 (2 points)
- ◯ Over 75 (1 point)

When do you expect to start drawing income?

- ◯ Not for at least 20 years. (5 points)
- ◯ In 10 to 20 years. (4 points)
- ◯ In 5 to 10 years. (3 points)
- ◯ Not now, but within 5 years. (2 points)
- ◯ Immediately. (1 point)

Long-Term Goals and Expectations (Your views of how an investment should perform over the long term)

What is your goal for this investment?

- ◯ To grow aggressively. (5 points)
- ◯ To grow significantly. (4 points)
- ◯ To grow moderately. (3 points)
- ◯ To grow with caution. (2 points)
- ◯ To avoid losing money. (1 point)

Assuming normal market conditions, what would you expect from this investment over time?

- ◯ To typically keep pace with the stock market. (5 points)
- ◯ To slightly trail the stock market, but provide a good profit. (4 points)
- ◯ To trail the stock market, but provide a moderate profit. (3 points)
- ◯ To have some stability, but make modest profits. (2 points)
- ◯ To have a high degree of stability, but make small profits. (1 point)

Suppose the stock market performs poorly over the next decade. What would you expect from this investment?

- To lose money. (5 points)
- To make very little or nothing. (4 points)
- To eke out a little gain. (3 points)
- To make a modest gain. (2 points)
- To be little affected by what happens in the stock market. (1 point)

Short-Term Risk Attitudes (Your attitude toward short-term volatility)

Which of these statements best describe your attitude about the next three years' performance of this investment?

- I don't mind if I lose money. (5 points)
- I can tolerate a loss. (4 points)
- I can tolerate a small loss. (3 points).
- I'd have a hard time tolerating any losses. (2 points)
- I need to see a least a little return. (1 points)

Which of these statements best describe your attitude about the next three months' performance of this investment?'

- Who cares? One calendar quarter means nothing. (5 points)
- I wouldn't worry about losses in that time frame. (4 points)
- If I had a loss of greater than 10%, I'd be concerned. (3 points).
- I can only tolerate small short-term losses. (2 points)
- I'd have a time stomaching any losses. (1 points)

Total Score: ______________________

3. Investor Profile Results

Total Score

- 7–10 = Conservative
- 11–17 = Moderately Conservative
- 18–24 = Moderate
- 25–31 = Moderately Aggressive
- 32–35 = Aggressive

Conservative: As a conservative investor, your portfolio will be invested in the most risk-averse areas such as cash and fixed-income securities. This approach offers a high degree of stability and should minimize the chances of substantial short-term volatility. The overall return, while not guaranteed, should fall within a narrow range of possibilities. However, particularly for time periods greater than five years, these returns may underperform the returns achievable from a higher-risk approach.

Moderately Conservative: As a moderately conservative investor, your portfolio will be invested primarily in areas such as cash and fixed-income securities with only a modest exposure to equities. This approach concentrates on stability rather than maximizing return and should limit the chances of substantial short-term volatility. The overall return, while not guaranteed, should fall within a narrow range of possibilities. However, particularly for time periods greater than five years, these returns may underperform the returns achievable from a higher-risk approach.

Moderate: As a moderate investor, your portfolio will include investments in equities, balanced by exposure to more risk-averse areas of the market such as cash, fixed-income securities and real estate. This approach aims to achieve a balance between stability and return, but is likely to involve at least some short-term volatility. The overall return, while not guaranteed, although the range of possible outcomes should not be extreme. In most, circumstances, particularly for time periods greater than five years, these returns should outperform the returns achievable from a more conservative approach but may underperform the returns achievable from a higher-risk approach.

Moderately Aggressive: As a moderately aggressive investor, your portfolio will be invested primarily in equities. This approach concentrates on achieving a good overall return on your investment while avoiding the most speculative areas of the market. Significant short-term fluctuations in value can be expected. The eventual return for the time period over which you invest could fall within a relatively wide range of possibilities. In most circumstances, particularly for time periods greater than five years, these returns should outperform the returns achievable from a more conservative approach.

Aggressive: As an aggressive investor, your portfolio will be invested in equities and will include exposure to more speculative areas of the market. The aim is to maximize return while accepting the possibility of large short-term fluctuations in value and even the possibility of longer-term losses. The eventual return for the time period over which you invest could fall within a wide range of possibilities. In most circumstances, the return should outperform the returns achievable from a more conservative approach.

4. Acknowledgement (To be completed by investors.)

1. I confirm that the information disclosed is true, complete, and accurate.
2. I confirm that this information has been explained and I understand the features and risks of the category(ies) of funds that is/are suitable for me.
3. I acknowledge receipt of a copy of the *Product Highlight Sheet* and relevant disclosure documents which have been given to me.

If applicable:

☐ I decline to provide certain information required for product suitability assessment and I understand that this may adversely affect my suitability assessment.

☐ I have decided to purchase another fund(s) that is/are not recommended by the outcome of this risk tolerance questionnaire. Please state the new fund(s)

If you choose not to complete and return this questionnaire you are acknowledging that you may not be in the most appropriate model portfolio and accept all responsibility for your investment elections.

____

Investor's Signature

____

Date

____

Reviewer's Signature

____

Date