

## WEA Member Benefits IRA Contribution

**To use this form, you must already have an established IRA account with WEA Member Benefits. If you do not, your check will be returned to you.** Otherwise, 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 2025	IRS Criteria—Roth IRA 2025
<ul style="list-style-type: none"> <li>• Must have earned income or file a joint tax return with a spouse who has earned income.</li> </ul>	<ul style="list-style-type: none"> <li>• Must have earned income or file a joint tax return with a spouse who has earned income, <b>and</b></li> <li>• Adjusted gross income cannot exceed \$150,000 for a single person for a full contribution, <b>or*</b></li> <li>• Adjusted gross income cannot exceed \$236,000 for a married couple filing a joint tax return for a full contribution. *</li> </ul>
<p>*The amount you can contribute is reduced gradually and then eliminated when your adjusted gross income exceeds \$165,000 (single) or \$246,000 (married filing jointly).</p>	

IRA CONTRIBUTION LIMITS		
Year	Under Age 50	Age 50 or Older
2025	\$7,000	\$8,000
2026	\$7,500	\$8,600

Send this form with your check made payable to:

**WEA Member Benefits**

Mailing address:

**Matrix Trust (Phx)**  
**P.O. Box 21196**  
**New York, NY 10087-1196**

### 2. Contribution Information—print legibly

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Address \_\_\_\_\_ Date of Birth \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Email \_\_\_\_\_

Would you like to receive status updates on your request via text message? YES  NO  Mobile Number (\_\_\_\_\_) \_\_\_\_\_  
Message and data rates may apply.

In the table below, fill in the contribution amount(s) that you want to contribute to the applicable tax year. Make checks payable to WEA Member Benefits. SEP IRA contributions must be made with Employer funds. **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 – (N9910A)		\$
Roth IRA Account – (N9910B)		\$
SEP IRA Account – (N9910C)		\$
<b>Total Amount (minimum \$20.00)</b>		<b>\$</b>

\*If you do not indicate tax year on form, 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/yourMONEY](http://weabenefits.com/yourMONEY) 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 *SmartPlan*, use this form for additional contributions up to your allowable limit.