SCHOOLSFIRST

Plan Loan Authorization Form

Plan Administration, LLC

FAX COMPLETED FORMS TO: 714.258.4262

A Plan loan allows you to borrow against your retirement plan, at a rate determined by your investment provider, and pay yourself back over time. The IRS limits a 403(b) plan loan to \$50,000 or one half of your account value including existing loans. If you are interested in taking a loan against a 403(b) account funded under your current or previous employer's 403(b) plan, submit this form along with your investment provider paperwork to SchoolsFirst Plan Administration for authorization. Please be aware that IRS taxes and penalties may apply if you default on a loan.

Note: Please allow 5-7 business days for review and authorization. Missing or incomplete documentation will result in a delay of your request.

1 Participant In	formation	5		, ,	
First Name	Last Name	Social Se	curity Number (REQUIRED)	Date	of Birth
Street Address	City		State Z	ip Code Phone	e Number
School District Listed As I	Employer on this Account (REQUIRED)	Participan	t Email Address		
Financial Advisor		Financial	Advisor Phone Number		
2 Investment P	rovider Information				
Name of the Investment Pro	vider You are Requesting the 403(b) Loan Fro	om A	ccount Number	Phone Nu	mber
Investment Provider Address	s (Street or P.O. Box)		City	State	Zip Code
3 Forwarding In	nstructions				
authorized form faxed	alid fax number for the Invest to. If no fax number is provided be rsonal information and will not be	elow your forms will be			
Fax Number			Attention (if applicable)		
4 Current and P	Previous Loans				
Answer the following q	uestions concerning current and prev	ious loans:			
1. Do you currently have or have you had in the past 12 months a 403			a), or 457(b) loan(s)?		□Yes □No
2. Have you ever d	efaulted on a previous 403(b), 401(a)), or 457(b) plan loan?			□Yes □No
E Current Loon	and Account Balances				
	457(b) and/or 401(a) accounts you ha	ave under the same spo	onsoring school district plar	listed above. Enter	r an annroximate
	balance (if any) for each account. Lo				
	Investment Provider Name	Current Account Value	Current Outstanding Loan Amount (if any)	Highest Loan Ba (in last 12 mon	
Example	XYZ Annuity Company	\$ 30,000.00	\$ 6,000.00	\$ 6,000.00	⊠Yes □No
Account 1					Yes No
Account 2					□Yes □No
Account 3					□Yes □No
6 Participant Ap					
to administer the Plan in pertaining to my account have provided is accurate	mation contained on and attached to th accordance with the Internal Revenue C is as necessary to administer the Plan in e. I also acknowledge that the value of my request is being authorized and pro	Code. I authorize the inv cluding account balance, my account is based on	estment providers indicated loan balance, loan status, ar	on this form to released loan history. I cer	se non-public information tify that the information I
				\$	
Participant Signature (REQUIRED)			ite	Request	ed Loan Amount
SchoolsFirst Plan Administri into by your company and	rst Plan Administration Us ration represents this loan of 403(b) amoun SchoolsFirst Plan Administration, provided the Authorized Loan Amount box. Schools	nts is permitted by the em that SchoolsFirst Plan Adn	ninistration has signed below.	The loan issue amount	may not exceed the
				\$	

 Authorized SchoolsFirst Plan Administrator Signature (REQUIRED)
 Date
 Authorized SchoolsFirst Plan Administrator Signature (REQUIRED)

Authorized Loan Amount Form - 403-203 SF (5/2018)

P.O. Box 11547 Santa Ana, CA 92711 | 800.462.8328 ext 4727 | Fax: 714.258.4262 | pa.schoolsfirstfcu.org



Plan Administration, LLC

Required Documents

Plan Authorization Form Submission Instructions

A SchoolsFirst Plan Administration Plan Authorization Form must be submitted to SchoolsFirst Plan Administration to authorize any transaction involving 403(b) or Roth 403(b) amounts from investment providers of your employer or former employer's plan. The investment provider may require its own paperwork in addition to our Authorization Form. Authorization Forms provide a summary of critical information regarding your request that assists us with authorizing the transaction. Please review the instructions below to ensure that you are providing all necessary documents to expedite the authorization process.

Authorization Type	Include the Following Documentation		
Distribution/Rollover	 Completed Investment Provider distribution/rollover paperwork. Completed SchoolsFirst Plan Administration Plan Distribution/Rollover Authorization Form. Requires a distributable event (i.e., age 59 ½, RMD, separation from service, death, disability, QDRO, or excess correction) 		
	Note: Part-time substitute and adjunct employees are not considered separated from service. Verification of your distributable event is required. For age related events, please include a copy of a valid ID for verification.		
403(b) Hardship	 Completed Investment Provider hardship distribution paperwork. Completed SchoolsFirst Plan Administration Plan Hardship Authorization Form and Hardship Questionnaire. Proof of unpaid hardship expenses equal to or more than the amount requested. 		
Withdrawals	Note: Contributions to all employer plans under this district must cease for a 6-month period for a hardship distribution to be approved. See Plan Hardship Distribution Documentation Guidelines for clarification on qualified hardship reasons and specific documentation guidelines.		
Exchanges*	 Completed Investment Provider exchange paperwork. Completed SchoolsFirst Plan Administration Plan Exchange Authorization Form. 		
Purchase of Service Credit	 Completed Investment Provider paperwork. Completed STRS, PERS or PARS paperwork. Completed SchoolsFirst Plan Administration Plan Exchange Authorization Form. 		
Plan Loans	 Completed Investment Provider loan paperwork. Completed SchoolsFirst Plan Administration Plan Loan Authorization Form. Current account statements for each Investment Provider listed on the authorization form. Note: If requesting a residential loan, proof of home purchase must also be submitted. If a default has been repaid, offset or otherwise returned to good standing, please provide proof. 		
QDRO Distribution/ Rollover	 Completed SchoolsFirst Plan Administration QDRO Distribution/Rollover Authorization Form. Documentation pertaining to the division of retirement assets due to divorce. 		
	ticipants my only exchange their accounts among the approved providers in the employer's 403(b) Plan.		

To verify that the provider you have selected is an approved provider, review the SchoolsFirst Plan Administration Approved Provider List available online at <u>www.schoolsfirstfcu.org</u>.

Processing Time Commitment

After this form has been received by SchoolsFirst Plan Administration in good order, it will be forwarded to your Investment Provider in 5-7 business days. Once authorized, please contact your Investment Provider to obtain information regarding the status of your request.

Submission Instructions

To expedite processing, fax the required forms for you request (as listed above) to:	Attention: Retirement Plan Administration 714.258.4262
Forms may also be returned to a SchoolsFirst FCU branch location or mailed to: (Please allow 2-3 additional days for processing time.)	SchoolsFirst Plan Administration Attention: Retirement Plan Administration P.O. Box 11547 Santa Ana, CA 92711

Questions? Contact us at 800.462.8328, extension 4727

Our Plan Administrators are available to assist you Monday through Friday, 7 a.m. to 7 p.m., and Saturdays, 9 a.m. to 3 p.m. Pacific Time.

SchoolsFirst Plan Administration is not responsible for transaction requests that are submitted to an incorrect number resulting in personal or private information sent to a wrong location. Please check the fax number carefully before sending requests to SchoolsFirst Plan Administration.