

# Contribution Limit Calculation Form



**Do you know how much you can contribute to your 403(b) plan?**



## **How do I know when to complete a Contribution Limit Calculation Form?**

If you answer “Yes” to any of the questions below, you should complete this form and forward to WEA Member Benefits for processing. If you answer “No” to all of the questions, you do not need to complete this form.

1. Do you have 15 or more years of service with the same employer and would like to know if you are eligible for the 15-years-of-service catch-up contribution?
2. Will you be receiving employer contributions to your 403(b) plan?
3. Do you make salary deferral contributions to another 403(b) plan, 401(k) plan, SIMPLE plan, or SEP plan?
4. Does your employer require you to provide them with written documentation of your contribution limit calculation results?

The elective (aggregate total of before-tax and after-tax) contribution limit base for 2024 is \$23,000. In addition, if your employer does not require you to complete a Contribution Limit Calculation and you will be age 50 or older in 2024, you may contribute an additional \$7,500 without completing this form. However, if you are eligible for the 15-years-of-service catch-up, the age 50 catch-up amounts will be designated to any available 15-years-of-service catch-up before the age 50 catch-up amounts.

# Contribution Limit Calculation (CLC) for 403(b) Plan

The Internal Revenue Code (IRC) sets limits on the amount of money you can contribute to your 403(b) account. The combined amount you can contribute before and after tax cannot exceed this limit. As a service to you, we will help you calculate the maximum amount you can contribute to your WEA TSA Trust 403(b) account.

We can provide you with contribution history for your WEA TSA Trust 403(b) account, however, contribution history for 403(b) accounts with another provider need to be submitted by you *each year* to complete a CLC. If you have any questions about income or work history, check with your employer's payroll department.

In addition to reporting your contribution limits, we will let you know if you are eligible for any of the catch-up elections. These elections may let you contribute more money than the IRC usually allows.

The accuracy of this calculation is dependent upon the accuracy of the information provided by the participant. Incomplete forms cannot be processed.

After completing this form, mail it to the address on back and we will send your employer a report showing your contribution limits.

If you do not have an existing account with us, please include your completed *403(b) Application*.

**If you have questions or need assistance completing this form, please call us at 1-800-279-4030.**

## Section I – General Information

Name \_\_\_\_\_ SSN \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, ZIP \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_  
Employer \_\_\_\_\_

## Section II – Salary

- |   |  |
|---|--|
| 1. Tell us the year for which you want us to calculate your contribution limits. This must be a calendar year (January–December).   | Calculation year: _____  |
| 2. Tell us your yearly gross salary with your current employer (in many cases this involves portions of two school years). If you are retired, enter your gross salary for the most recent 12 months of service. If you are paid an hourly wage, calculate your annual income based on the hourly wage.*<br>If you are electing the cash option through a Section 125 plan, add the annual amount to your annual salary.  | Yearly salary with <i>current</i> employer:<br>\$ _____<br><br><i>*If you have any questions about income or work history, check with your district's payroll coordinator.</i> |
| 3. Are you making contributions to a 401(k), SIMPLE Plan, SEP Plan?   | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, go to question 4; if no, skip to Section III.  |
| 4. What is the total amount of calendar year contributions you will make to a 401(k) retirement plan, SIMPLE Plan, and/or SEP Plan? These plans could be from a position held with a different employer. You do not need to tell us how much you plan to contribute to your 403(b) during the calendar year. We will tell you the maximum allowable contribution. Do not include 403(b), individual retirement account (IRA) contributions, or Wisconsin Retirement System. | <b>Reductions</b> (calendar year amount):<br>Section 401(k), SIMPLE, or<br>SEP contributions.<br><br>\$ _____ during calendar year   |

## Section III – NonElective (Employer-Paid) Contributions

- |  |  |
|--|--|
| List any employer-paid contributions in addition to your salary that are not taxable to you in the current year. All nonelective contributions are before-tax contributions. If your employer is making 403(b) nonelective contributions, tell us the calendar year amount.<br><br><b>Do not</b> include payroll amounts received from a Section 125 cash option plan that is contributed to a 403(b). | Amount of 403(b) nonelective contributions:<br>\$ _____ during calendar year |
|--|--|

## Section IV – History With Current Employer

1. When did you begin working for your current employer? Are you retired or retiring this calendar year?	_____ Month/Year	_____ Retirement Date (if retired or retiring this calendar year)															
2. Tell us whether you are working full- or part-time during the calendar year. If you are working full-time, write 100%. If you are working part-time, indicate the appropriate percentage of a full-time schedule (50%, 60%, 70%, etc.)	Percentage of time employed during the calendar year: _____%																
3. Do you have any part-time years of employment with your current employer? If so, indicate the month and year that each period of part-time employment began and ended and indicate the percentage of time employed.  <i>*Attach a separate sheet if needed.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, skip to Question 4.) If yes, indicate the month, year, and percentage of time employed.*  <table border="0"> <thead> <tr> <th>Month/Year</th> <th>Month/Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>From _____</td> <td>to _____,</td> <td>_____ %</td> </tr> </tbody> </table>		Month/Year	Month/Year	Percentage	From _____	to _____,	_____ %	From _____	to _____,	_____ %	From _____	to _____,	_____ %	From _____	to _____,	_____ %
Month/Year	Month/Year	Percentage															
From _____	to _____,	_____ %															
From _____	to _____,	_____ %															
From _____	to _____,	_____ %															
From _____	to _____,	_____ %															
4. Have you taken unpaid leave(s) of absence while working for your current employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate length of service; if no, skip to Section V.  <table border="0"> <thead> <tr> <th>Month/Year</th> <th>Month/Year</th> </tr> </thead> <tbody> <tr> <td>From _____</td> <td>to _____</td> </tr> <tr> <td>From _____</td> <td>to _____</td> </tr> </tbody> </table>		Month/Year	Month/Year	From _____	to _____	From _____	to _____									
Month/Year	Month/Year																
From _____	to _____																
From _____	to _____																

**If you have less than 15 years of service with your current employer, please skip to Section VII.**

## Section V – Employee Contribution History With Current Employer

1. Have you ever had another 403(b) besides your WEA TSA Trust 403(b) account?  Have you ever transferred funds to the WEA TSA Trust from another 403(b) account?	<input type="checkbox"/> Yes <input type="checkbox"/> No  <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you currently contributing only to the WEA TSA Trust 403(b) account?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Tell us the total amount of salary reduction contributions (include salary received from Section 125 cash option plan that is contributed to a 403(b)) in all years to all 403(b)s and other salary reduction retirement plans (e.g., 401(k), SARSEP, SIMPLE) through December 31 of the year prior to the calculation year. WEA TSA Trust or any company with which you have a 403(b) account can provide you with a history of your contributions.	Total salary reductions, including Section 125 cash option amounts, <u>for all prior years</u> to:  WEA TSA Trust 403(b) Before-tax 403(b)                   \$ _____ Roth (After-tax) 403(b)**       \$ _____  403(b)s with other companies including those transferred to the WEA TSA Trust. (Do not include employer-paid contributions.)                               \$ _____  Other retirement plans*   \$ _____  <i>*Include 457(b) plan contributions prior to 2002. Do not include IRA contributions.</i>  <i>**Effective 2006</i>

Over, please

## Section VI – Catch-Up Eligibility (15 or more years of service)

Employees with 15 or more years of service with their current employer may be eligible for up to \$3,000 of annual catch-up contributions (contributions above the base IRC amounts).

**Fifteen-year catch-up contributions are subject to a lifetime cumulative limit of \$15,000.**

If you made catch-up contributions (including age-50-or-over catch-up), tell us the amount of the contribution over the base IRC amount for each year beginning in 1987. The WEA TSA Trust, or any company with which you have an account, can provide you with a history of your contributions.

Here's an example: The maximum IRC base annual contribution in 1999 was \$10,000 (as shown at right). If you contributed \$11,500 in 1999, enter \$1,500 in the space next to 1999: (\$11,500 – \$10,000 = \$1,500).

The CLC amounts we provide are for the **specified** calendar year only.

**We suggest you keep a copy of this form for your records.**

### Salary reduction contributions for all plans above the yearly limit(s)

Amount contributed above the \$9,500 limit:

1987 \$ _____	1991 \$ _____	1995 \$ _____
1988 \$ _____	1992 \$ _____	1996 \$ _____
1989 \$ _____	1993 \$ _____	1997 \$ _____
1990 \$ _____	1994 \$ _____	

Including age 50-or-over catch-ups, indicate the amount contributed above the:

\$10,000 limit for 1998 \$ _____	\$16,500* limit for 2011 \$ _____
\$10,000 limit for 1999 \$ _____	\$17,000* limit for 2012 \$ _____
\$10,500 limit for 2000 \$ _____	\$17,500* limit for 2013 \$ _____
\$10,500 limit for 2001 \$ _____	\$17,500* limit for 2014 \$ _____
\$11,000 limit for 2002 \$ _____	\$18,000* limit for 2015 \$ _____
\$12,000 limit for 2003 \$ _____	\$18,000* limit for 2016 \$ _____
\$13,000 limit for 2004 \$ _____	\$18,000* limit for 2017 \$ _____
\$14,000* limit for 2005 \$ _____	\$18,500* limit for 2018 \$ _____
\$15,000* limit for 2006 \$ _____	\$19,000* limit for 2019 \$ _____
\$15,500* limit for 2007 \$ _____	\$19,500* limit for 2020 \$ _____
\$15,500* limit for 2008 \$ _____	\$19,500* limit for 2021 \$ _____
\$16,500* limit for 2009 \$ _____	\$20,500* limit for 2022 \$ _____
\$16,500 limit for 2010 \$ _____	\$22,500* limit for 2023 \$ _____

\*Combined total of before-tax and Roth (after-tax) contributions.

## Section VII – Signature and Date

I certify that all questions have been completed and are correct to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please sign, date, and return this form to WEA Member Benefits.

### Contact Information

#### Mailing Address

P.O. Box 7893  
Madison, WI 53707-7893

#### Phone

1-800-279-4030

#### Fax

608-237-2529

#### Email

retirement@weabenefits.com

**Website** weabenefits.com

