

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 Information

First Name	Last Name	Social Security Number (REQUIRED)	Date of Birth
Street Address	City	State	Zip Code
Daytime Phone Number		Participant Email Address	
School District Listed As Employer on this Account (REQUIRED)		Financial Advisor/Agent Name	
Financial Advisor/Agent Phone Number			

2 Investment Provider Information

Name of the Investment Provider You are Requesting the 403(b) Loan From	Account Number	Phone Number
Investment Provider Address (Street or P.O. Box)	City	State
		Zip Code

3 Forwarding Instructions

Please provide a valid fax number for the Investment Provider listed above in Section 2 or indicate a contact you would like the authorized form faxed to. If no fax number is provided below your forms will be sent to the default number on record (if available). These forms contain non-public personal information and will not be emailed.

Fax Number	Attention (if applicable)
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4 Current and Previous Loans

Answer the following questions concerning current and previous loans:

- Do you currently have or have you had in the past 12 months a 403(b), 401(a), or 457(b) loan(s)? Yes No
- Have you ever defaulted on a previous 403(b), 401(a), or 457(b) plan loan? Yes No

5 Current Loan and Account Balances

Please list any 403(b), 457(b) and/or 401(a) accounts you have under the same sponsoring school district plan listed above. Enter an approximate account value and loan balance (if any) for each account. Loans that are in default status may prevent authorization of your request for further loans.

	Investment Provider Name	Current Account Value	Current Outstanding Loan Amount (if any)	Highest Loan Balance (in last 12 months)	In Good Standing
Example	XYZ Annuity Company	\$ 30,000.00	\$ 6,000.00	\$ 6,000.00	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Account 1					<input type="checkbox"/> Yes <input type="checkbox"/> No
Account 2					<input type="checkbox"/> Yes <input type="checkbox"/> No
Account 3					<input type="checkbox"/> Yes <input type="checkbox"/> No

6 Participant Approval

I recognize that the information contained on and attached to this form may be shared with a third party (including SchoolsFirst Federal Credit Union) as necessary to administer the Plan in accordance with the Internal Revenue Code. I authorize the investment providers indicated on this form to release non-public information pertaining to my accounts as necessary to administer the Plan including account balance, loan balance, loan status, and loan history. I certify that the information I have provided is accurate. I also acknowledge that the value of my account is based on market performance and that market fluctuations may result in a value variance during the time my request is being authorized and processed.

Participant Signature (REQUIRED)	Date	\$ Requested Loan Amount
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7 For SchoolsFirst Plan Administration Use Only

SchoolsFirst Plan Administration represents this loan of 403(b) amounts is permitted by the employer's plan and is in accordance with the Information Sharing Agreement entered into by your company and SchoolsFirst Plan Administration, provided that SchoolsFirst Plan Administration has signed below. The loan issue amount may not exceed the dollar amount indicated in the Authorized Loan Amount box. SchoolsFirst Plan Administration, LLC reserves the right not to sign vendor paperwork according to the ISA (if applicable).

Authorized SchoolsFirst Plan Administrator Signature (REQUIRED)	Date	\$ Authorized Loan Amount
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