



Retirement Plan

Instructions on how to sign up for our Retirement Plan (3 Steps)

Step 1

What is a retirement plan? Learn more by watching the “[Plan Your Journey](https://www.youtube.com/watch?v=Qr6ucBNJtg)” video. (click or enter link) - [https://www.youtube.com/watch?v= Qr6ucBNJtg](https://www.youtube.com/watch?v=Qr6ucBNJtg)

Step 2

Review the Simple IRA Eligibility below

Am I eligible?

If you received, or will receive \$5,000 of wages in 2020 or you will in 2021 you are eligible

What does a match mean for me?

Michael will pay a match from his pocket as follows:

100% of the first 3% you contribute of your gross wages

For Example:

\$ 400 amount of bi-weekly paycheck

To get the at least the basic 3% match:

\$ 12 this is your 3% contribution

\$ 12 this is the amount Michael will deposit into your Simple IRA account

\$ 24 Total contribution per check to your retirement account

\$ 52 This is the approximate monthly deposit to your account

This monthly deposit amount invested at 11% will grow to \$256,271 in 35 years.

You may contribute more than 3%

The maximum personal contribution to a Simple IRA is \$13,500 per year

If you are over 50 you may contribute an additional \$3,000 from your wages

The assumed rate of return in this example is hypothetical and does not guarantee any future returns nor represent the returns of any particular investment. Amounts do not reflect the impact of taxes on pre-tax distributions.

Individual taxpayer circumstances may vary

Step 3

- If interested, complete and sign the “[Employee Deferral Request Click Here](#)” and “[Intake Form Click Here](#)”.
- Email both forms as a PDF to both michael.gonzales@cfafranchisee.com and priscilla@parsonex.com
 - You must Sign the employee Deferral Request from. You may print it out to sign and upload it as a PDF or sign in digitally before emailing it.

SIMPLE IRA Salary Deferral Election

For employer/employee use only

Important information

- If you are opening a new account, you must attach a completed application to this form. Your employer will forward the completed application to American Funds Service Company® on your behalf.
- Return this completed form to your employer. **Do not send this form to American Funds Service Company or Capital Bank and Trust Company.SM**

General information

Please type or print clearly.

JUNTOS, LLC

Name of employee

Name of company

Payroll election

See the chart at the bottom of this page for deferral and catch-up limits. Select one of the following five options.

- A. **New election for NEW participants** — I am opening a new account (the application is attached). I elect to have the following amount withheld from my compensation and contributed to the SIMPLE IRA Plan.

Pre-tax deferrals of % **OR** \$ **Effective date** _____ (mm/dd/yyyy)

- B. **Change deferrals** — I am currently participating in the SIMPLE IRA Plan and wish to change my election.

Pre-tax deferrals of % **OR** \$ **Effective date** _____ (mm/dd/yyyy)

- C. **Maintain deferrals** — I am participating in the SIMPLE IRA Plan and wish to maintain my current deferral election.

- D. **Suspend deferrals** — I wish to stop deferring to the SIMPLE IRA Plan as of the effective date specified below.

Effective date _____ (mm/dd/yyyy)

- E. I do not wish to make any pre-tax salary deferrals at this time.

Signature

If electing salary deferrals, I authorize my employer to withhold the amount/percentage specified above from each paycheck as of the effective date provided, which will reduce my compensation under this election (my elective deferral contributions). I may revoke or update this election at any time as permitted by my employer. My elective deferral contributions are not subject to federal (or state, if applicable) income tax until distributed from the Plan. If I revoke this election, I acknowledge that, contingent upon the terms of the SIMPLE IRA Plan, I may be prohibited from submitting another Salary Deferral Election until the enrollment period immediately preceding the next plan year. The revocation or update will be effective as soon as administratively possible by my employer after they have received the notice. I also understand that my elective deferral contributions are subject to gain or loss in accordance with my selected investments.

X _____
Signature of employee

_____/_____/_____
Date (mm/dd/yyyy)

Email: _____ Cell Phone: _____

Year	Deferral limit	Catch-up limit*
2020	\$13,500	\$3,000
2021	\$13,500	\$3,000

*You must be at least 50 years old to make a catch-up contribution.

Information needed for application to open Simple IRA:

First Name***	
Last Name***	
name as it appears on Social Security Card	
Social Security Number	
Date of Birth	
Cellphone Number	
Marital Status*	
Driver's License Number	
Driver's License Issue Date	
Driver's License Expiration Date	
Physical Address where you live	
E-mail Address	
Bank Balance - Checking	
Bank Balance - Savings	
Yearly Income	

Spouse Name for beneficiary	
Spouse Phone	
Spouse email	

Send to: priscilla@parsonex.com