ROTH IRA
TRANSFER REQUEST

ROTH IRA HOLDER'S NAME AND ADDRESS (or Beneficiary or Former Spouse)	CURRENT ROTH IRA TRUSTEE'S OR CUSTODIAN'S NAME AND ADDRESS

Social Security Number	Date of Birth	Day/Evening Phone	Roth IRA Account Identification (Transferring Roth IRA)	Trustee's or Custodian's Phone Number

TRANSFER INSTRUCTIONS AND PAYMENT INFORMATION

Directly transfer ☐ all or ☐ part of the Roth IRA identified above in the following manner.

Frequency: ☐ One-time ☐ Annually
☐ Monthly ☐ Other _____
☐ Quarterly

Please make a check payable as follows: "_____, as ☐ Trustee ☐ Custodian, FBO
(Name of Accepting Organization)

_____, _____ Roth IRA."
(Name of Roth IRA Holder) (Investment Company Name)

Mail the check to: _____
(Investment Company Name and Address)

_____.

This transfer ☐ will ☐ will not close the Roth IRA.

ASSET HANDLING INSTRUCTIONS

Asset Description	Quantity Or Amount In Roth IRA	Quantity Or Amount To Be Transferred
1.		
2.		
3.		
4.		

BENEFICIARY TRANSFER INSTRUCTIONS FOR REQUIRED MINIMUM DISTRIBUTION (RMD)

Complete this section, if applicable, only if you are the beneficiary of a Roth IRA.

I authorize the Trustee or Custodian named above to
☐ distribute my RMD to me prior to transferring the Roth IRA assets,
☐ segregate and retain my RMD amount, or
☐ include the amount that represents my RMD in the transfer.

ACCEPTING ROTH IRA TRUSTEE OR CUSTODIAN INVESTMENT INFORMATION

☐ This is a new Roth IRA. My Roth IRA Application is attached. ☐ I have an existing Roth IRA.

Please invest the proceeds of this transfer as follows:

Fund _____ Account Number _____ _____%
Fund _____ Account Number _____ _____%
Fund _____ Account Number _____ _____%
Fund _____ Account Number _____ _____%
Fund _____ Account Number _____ _____%
(must total 100%)

SIGNATURE OF ROTH IRA HOLDER, BENEFICIARY OR FORMER SPOUSE

I authorize the transfer of the Roth IRA assets in the manner described above and certify that all of the information provided by me is correct and may be relied upon by the Trustee or Custodian.

I understand that I am responsible for determining my eligibility to transfer within the limits set forth by tax laws, related regulations and plan agreements. I assume responsibility for any tax consequences or penalties that may apply to the transfer of these assets and I agree that the Trustee or Custodian shall in no way be held responsible.

_____ _____
(Roth IRA Holder, Beneficiary or Former Spouse) (Date)

_____ _____
(Signature Guarantee, if applicable) (Date)

ACCEPTING ROTH IRA TRUSTEE OR CUSTODIAN

The Roth IRA designated by the above-named individual is a valid Roth IRA. The Trustee or Custodian, as identified in the Roth Individual Retirement Account Application, hereby agrees to serve as the Trustee or Custodian for the Roth IRA of the above-named individual and, in that capacity, agrees to accept the transfer of the assets listed above.

Account Identification of Accepting Roth IRA _____

_____ _____
(Authorized Signature of New Trustee or Custodian) (Date)

ROTH IRA INQUIRIES

For inquiries, please continue to contact the Investment Company at the address or phone number listed on the Roth IRA Account Application.

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