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Roth IRA Application

1 ROTH IRA OWNER INFORMATION

(Custodian's/Trustee's name, address, and phone number above)

NAME, ADDRESS, CITY, STATE, AND ZIP		ROTH IRA ACCOUNT (PLAN) NUMBER
		SOCIAL SECURITY NUMBER
DAYTIME PHONE NUMBER	E-MAIL (OPTIONAL)	DATE OF BIRTH

2 CONTRIBUTION INFORMATION (See Additional Information included with this form.)

INVESTMENT NUMBER	AMOUNT	CONTRIBUTION DATE	TAX YEAR	TAX YEAR OF FIRST ROTH IRA CONTRIBUTION/CONVERSION
	$			

THIS ACCOUNT IS A : ☐ Deposit Investment Only ☐ Self-Directed IRA Investment ☐ Managed Trust

CONTRIBUTION TYPE:

- ☐ Regular (including Catch-Up)
- ☐ Rollover**
- ☐ Transfer
- ☐ Recharacterization
- ☐ Conversion
- ☐ Rollover** or Direct Rollover from an Eligible Retirement Plan
- ☐ Rollover** or Direct Rollover from a Designated Roth Account
- ☐ Qualified Reservist/Designated Disaster Distribution Repayment*
- ☐ Disaster/Combat Zone Postponed Contribution*

* Reason Code (if applicable) _____

** ☐ Check if Rollover is made after 60 days with self-certification

3 DESIGNATION OF BENEFICIARY (See Additional Information included with this form.)

At the time of my death, the primary beneficiaries named below will receive my Roth IRA assets. If all of my primary beneficiaries die before me, the contingent beneficiaries named below will receive my Roth IRA assets. In the event a beneficiary dies before me, such beneficiary's share will be reallocated on a pro-rata basis to the other beneficiaries that share the deceased beneficiary's classification as a primary or contingent beneficiary. A designation of a beneficiary's primary or contingent classification is generally made by entering a percentage in one of the two columns to the left of the name. In the event a beneficiary is named as both a primary and contingent beneficiary, or if a beneficiary is not assigned to a beneficiary classification, such beneficiary shall be a primary beneficiary. If no percentages are assigned to beneficiaries, or if the percentage total for any beneficiary classification exceeds 100 percent, the beneficiaries in that beneficiary classification will share equally. If the percentage total for each beneficiary classification is less than 100 percent, any remaining percentage will be divided equally among the beneficiaries within such class. If all of the beneficiaries die before me, or if none are designated, my Roth IRA assets will be paid to my estate. This designation revokes and supercedes all earlier beneficiary designations which may apply to this Roth IRA.

PRIMARY SHARE	CONTINGENT SHARE	NAME OF BENEFICIARY	SSN OR TIN	RELATIONSHIP TO ROTH IRA OWNER	DATE OF BIRTH	ADDRESS, CITY, STATE, AND ZIP
%	%					
%	%					
%	%					
%	%					
%	%					
%	%					
Total 100%	Total 100%					

4 SPOUSAL CONSENT

Community or marital property state laws may require spousal consent for a nonspouse beneficiary designation. The laws of the state in which the financial organization is domiciled, the Roth IRA owner resides, the trust is located, the spouse resides, or this transaction is consummated should be reviewed to determine if such a requirement exists. Spousal consent for the beneficiary designation may also be required by financial organization policy.

_____ (Roth IRA Owner Initials) **I Am Married.** I understand that if I designate a primary beneficiary other than my spouse, my spouse must consent by signing below.

_____ (Roth IRA Owner Initials) **I Am Not Married.** I understand that if I marry in the future, I must complete a new Designation of Beneficiary form, which includes the spousal consent documentation.

I am the spouse of the Roth IRA owner. Because of the significant consequences associated with giving up my interest in the Roth IRA, the custodian/trustee has not provided me with legal or tax advice, but has advised me to seek tax or legal advice. I acknowledge that I have received a fair and reasonable disclosure of the Roth IRA owner's assets or property including any financial obligations for a community property state. In the event I have a legal interest in the Roth IRA assets, I hereby give to the Roth IRA owner such interest in the assets held in this Roth IRA and consent to the beneficiary designation set forth in this Application.

Signature of Spouse Date

Signature of Witness (if required) Date
(Witness cannot be a beneficiary of this Roth IRA)

5 SIGNATURES

I certify that the information provided by me on this Application is accurate, and that I have received a copy of the Application, IRS Form 5305-R, *Roth Individual Retirement Trust Account* or IRS Form 5305-RA, *Roth Individual Retirement Custodial Account,* Disclosure Statement, and Financial Disclosure. I agree to be bound by the terms and conditions found in the Agreement, Disclosure Statement, Financial Disclosure, and amendments thereto. I assume sole responsibility for all consequences relating to my actions concerning this Roth IRA. I understand that I may revoke this Roth IRA on or before seven (7) days after the date of the date of establishment. My designation of the tax year for my contribution, and any election to treat a contribution as a rollover or recharacterization, is irrevocable. Except as otherwise provided by law, I understand that the custodian/trustee cannot provide, and has not provided, me with tax or legal advice. I have been advised to see the guidance of a tax or legal professional.

Signature of Roth IRA Owner Date

Signature of Custodian/Trustee Date

ADDITIONAL INFORMATION

Purpose. The Roth IRA Application form is designed to assist you in opening a Roth individual retirement account (IRA). This Application will accompany an Internal Revenue Service (IRS) Form 5305-R, *Roth Individual Retirement Trust Account*, IRS Form 5305-RA, *Roth Individual Retirement Custodial Account*, or IRS-approved prototype, Disclosure Statement, and Financial Disclosure.

Additional Documents. Applicable law or policies of the Roth IRA custodian/trustee may require additional documentation, such as IRS Form W-9, *Request for Taxpayer Identification Number and Certification*. For a recharacterization, the IRS requires you to provide a written notice of recharacterization.

For Additional Guidance. It is in your best interest to seek the guidance of a tax or legal professional before completing this document. For more information, refer to IRS Publication 590-A, *Contributions to Individual Retirement Arrangements (IRAs)*, IRS Publication 590-B, *Distributions from Individual Retirement Arrangements (IRAs),* IRS Form 5498, IRA *Contribution Information,* instructions to your federal income tax return, your local IRS office, or the IRS's web site at www.irs.gov.

Terms. A general understanding of the following terms may be helpful in completing your transaction.

Custodian. An IRA custodian must be a bank or savings and loan association, as defined in Internal Revenue Code Section 408(n), or any person who has the approval of the IRS to act as custodian

Deposit Investments Only. The deposit investments provided by the custodian/trustee may include savings, share, and/or money market accounts, and certificates of deposit (CDs), and will earn a reasonable rate.

Managed Trust. If the IRA is managed by the custodian/trustee, the custodian/trustee will provide you with a managed trust or agency agreement, or other similar document, that sets forth the terms and conditions governing the investment relationship.

Self-Directed IRA Investment. If your IRA is self-directed, you may invest your contributions and IRA assets in various deposit and nondeposit investments.

Trustee. An IRA trustee must be a bank or savings and loan association, as defined in Internal Revenue Code Section 408(n), or any person who has the approval of the IRS to act as trustee.

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