



CONTRIBUTION AND INVESTMENT SELECTION

PART 1. ROTH IRA OWNER

Name (First/Last/Initial) _____
 Social Security Number _____
 Date of Birth _____ Phone _____
 Email Address _____
 Account Number _____ Title _____

PART 2. ROTH IRA TRUSTEE OR CUSTODIAN

To be completed by the Roth IRA trustee or custodian

Name _____
 Address Line 1 _____
 Address Line 2 _____
 City/State/Zip _____
 Phone _____ Organization Number _____

PART 3. CONTRIBUTION INFORMATION

Contribution Amount _____ Contribution Date _____

CONTRIBUTION TYPE (Select one)

☐ **A. Regular** (Includes catch-up contributions)

Contribution for Tax Year _____

☐ **B. Rollover** (Distribution from a Roth IRA or eligible employer-sponsored retirement plan that is being deposited into this Roth IRA)

By selecting this transaction, I irrevocably designate this contribution as a rollover.

☐ **C. Transfer** (Direct movement of assets from a Roth IRA into this Roth IRA)☐ **D. Recharacterization** (A recharacterization of a Traditional IRA contribution into this Roth IRA)

By selecting this transaction, I irrevocably designate this contribution as a recharacterization.

☐ **E. Conversion** (A transfer movement from a Traditional IRA or SIMPLE IRA into this Roth IRA)

By selecting this transaction, I irrevocably designate this contribution as a conversion.

PART 4. INVESTMENT AND DEPOSIT INFORMATION

INVESTMENT INFORMATION (If complete the section on contributions.)

Investment Description	Quantity or Amount	Value (per unit or share)	Investment Number	Term or Maturity Date	Interest Rate
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

DEPOSIT METHOD

☐ **Check or Check** (If the contribution type is a transfer, the check must be from a financial organization made payable to the trustee (or this Roth IRA))☐ **Internal Account**

Account Number _____ Type (e.g., checking, savings, etc.) _____

☐ **External Account** (e.g., 401(k), 403(b), 529)

Name of Organization Funding the Roth _____ Routing Number (optional) _____

Account Number _____ Type (e.g., checking, savings, etc.) _____

Deposit Taken by _____

PART 5. SIGNATURES

I certify that all of the information provided by me is accurate and may be relied upon by the trustee or custodian. I certify that the contribution described above is eligible to be contributed to the Roth IRA and I authorize the deposit/transfer in the manner described above.

E

Signature of Roth IRA Owner _____

Date (mm/dd/yyyy) _____