



CONTRIBUTION AND INVESTMENT SELECTION

PART 1. ROTH IRA OWNER

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

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)

- ☐ **1. Regular** (Includes catch-up contributions)
Contribution for Tax Year _____
- ☐ **2. 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.
- ☐ **3. Transfer** (Direct movement of assets from a Roth IRA into this Roth IRA)
- ☐ **4. Recharacterization** (A nontaxable movement of a Traditional IRA contribution into this Roth IRA)
By selecting this transaction, I irrevocably designate this contribution as a recharacterization.
- ☐ **5. Conversion** (A taxable 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 (Complete this section as applicable.)

Investment Description	Quantity or Amount	Status (new or existing)	Investment Number	Term or Maturity Date	Interest Rate
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

DEPOSIT METHOD

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

☐ **Internal Account**

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

☐ **External Account** (e.g., EFT, ACH, wire)

Name of Organization Sending the Assets _____ Routing Number (optional) _____

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

Deposit Taken by _____

PART 5. SIGNATURE

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/investment in the manner described above.

X

Signature of Roth IRA Owner _____

Date (mm/dd/yyyy) _____