

# ASSET MOVEMENT AUTHORIZATION

## I. PARTICIPANT INFORMATION

NAME: \_\_\_\_\_ SOCIAL SECURITY NUMBER: [ ] [ ] [ ] - [ ] [ ] - [ ] [ ] [ ] [ ] [ ]

FROM ACCOUNT NUMBER: [ ] [ ] [ ] - [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] TO ACCOUNT NUMBER: [ ] [ ] [ ] - [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

## II. RETIREMENT PLAN TYPE (Select one)

TRADITIONAL IRA       ROTH IRA       SEP IRA       SIMPLE IRA       EDUCATION SAVINGS ACCOUNT  
 Special needs apply

## III. CONTRIBUTION TYPE

In keeping with Internal Revenue Service (IRS) tax reporting requirements, employer contributions (including employee salary deferrals) must be processed and reported in the year they actually occur, regardless of the year of designation. Obtain and refer to the instructions on filing IRS Form 5498.

	CURRENT YEAR	PRIOR YEAR	TOTAL DEPOSIT
IRA CONTRIBUTION	\$ _____	\$ _____	\$ _____
EDUCATION SAVINGS ACCOUNT	\$ _____	\$ _____	\$ _____
EMPLOYER OR COMPANY CONTRIBUTION	\$ _____	\$ _____	\$ _____
EMPLOYER MATCHING CONTRIBUTION	\$ _____	\$ _____	\$ _____
EMPLOYER NONELECTIVE CONTRIBUTION (SIMPLE IRA)	\$ _____	\$ _____	\$ _____
EMPLOYEE SALARY DEFERRAL CONTRIBUTION (SIMPLE IRA, SARSEP)	\$ _____	\$ _____	\$ _____
ROTH CONVERSION—CASH	\$ _____	\$ _____	\$ _____
ROLLOVER CASH (See certification section below)	\$ _____	\$ _____	\$ _____
<b>TOTAL</b> (The amount of your check should equal this amount)	<u>\$ _____</u>	<u>\$ _____</u>	<u>\$ _____</u>

## CONVERSION/ROLLOVER SECURITIES (Select one and list the securities below)

SECURITIES CONVERSION TO ROTH IRA       ROLLOVER SECURITIES (See rollover certification section below)

DESCRIPTION	QUANTITY
_____	_____
_____	_____

**NOTE:** Use the Roth Conversion/Recharacterization Form (Roth-Rech) to convert your individual retirement account held with us to a Roth IRA held with us.

## CONVERSION OR ROLLOVER CERTIFICATION

If I elect to make a conversion or rollover contribution to the retirement account indicated above, I hereby certify that I understand the conversion or rollover rules and conditions as they pertain to this retirement account, and I have met the requirements for making such a transaction. Due to the important tax consequences of converting or rolling over funds or property, I have been advised to consult with a tax professional. All information provided by me is true and correct and may be relied upon by the custodian. I assume full responsibility for these transactions and will not hold the custodian liable for any adverse consequences that may result. I hereby irrevocably designate the conversion or rollover of funds or other property as rollover contributions.

## AGE 70½ CONVERSION/ROLLOVER/TRANSFER RESTRICTION

If you are over the age of 70½ this year, you may not convert, rollover, or transfer required minimum distribution amounts. If necessary, instruct your present custodian to either: 1) pay your required minimum distribution to you now; or 2) retain that amount for distribution to you later. For Roth conversions, you must take your required minimum distribution amount before you convert your assets to a Roth IRA.



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**IV. TRANSFERS DUE TO DEATH AND DIVORCE**

- TRANSFER DUE TO DIVORCE
- TRANSFER DUE TO DEATH OF THE ACCOUNT HOLDER (Accounts with multiple primary beneficiaries must establish an inherited account for each beneficiary using his or her name and Social Security Number. Only spousal beneficiaries are allowed to treat the IRA as if it were their own and transfer it, in their name, to a Traditional Participant IRA.)

CASH: \$ \_\_\_\_\_; and/or SECURITIES: DESCRIPTION \_\_\_\_\_ QUANTITY \_\_\_\_\_  
 DESCRIPTION \_\_\_\_\_ QUANTITY \_\_\_\_\_

(If more space is needed, attach a separate sheet and check the box below)  
 PLEASE SEE ATTACHED SHEET FOR PROCESSING INSTRUCTIONS

**V. PARTICIPANT SIGNATURE**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**PLEASE RETURN TO:**  
 Pershing LLC  
 Attention: Retirement Products Department  
 One Pershing Plaza  
 Jersey City, New Jersey 07399