



Traditional to Roth Conversion

Note: Use this form to convert your current IRA or employer sponsored plan assets to a Roth IRA. For partial conversion, you must submit this form with a completed IRA application. If converting an existing IRA with IRA Resources, you will also need to complete a distribution form. For a complete conversion, submit this form only. Please note that this may be a taxable event.

Administrator _____

The name of the company that performs record keeping and administration of your plan on behalf of custodian named in the account application.

1. Account Holder Information *Please complete the following information.*

Account holder name

Account number **Form of conversion** (*Specify*)

In Cash \$_____ In Kind
(Complete list below, if necessary)

Home address **City, State, Zip**

Your social security number **Telephone number** (*area code & number*)

Part I. Conversion from an IRA or employer sponsored plan to a Roth IRA (*CHECK ONLY ONE and fill in where applicable*)

Conversion Information:

Choose one of the following:

- New Conversion: This is a conversion to a NEW Roth conversion IRA. An IRA Application must be attached.
- Existing Roth IRA: This is a conversion to an EXISTING Roth Conversion IRA.

Choose one of the following:

- Full Conversion: Convert all assets held in the above account.
- Partial Conversion: Convert the assets indicated below.

Asset Description **Indicate amount (do not use percentages)**

Part II. Signature of Roth IRA Participant

I certify that the following statements are true and correct.
1. This conversion contribution is being made within 60 days after my receipt of funds from my traditional plan or employer sponsored plan.
2. During the year of this conversion, my adjusted gross income will not exceed \$100,000 (not including the converted amount or any required minimum distribution) and I am not a married person filing a separate Federal income tax return.
The undersigned hereby irrevocably elects, pursuant to IRS Regulation 1.402(a)(5)-1T to treat this contribution as a rollover contribution. I acknowledge that, due to the complexities involved in the tax treatment of roll overs between plans, conversions from plans, and roll overs from a Designated Roth Account under an employer's plan, the Trustee/Custodian has recommended that I consult with my tax advisor or the IRS before completing this transaction to make certain that this transaction qualifies as a valid contribution and is appropriate in my individual circumstances. I understand that these transactions are reported to the IRS and I acknowledge that I am responsible for record keeping Roth IRA contribution information as directed by the IRS. I hereby release the Custodian from any claim for damages on account of the failure of this transaction to qualify as a valid rollover contribution or conversion.

PLEASE DO NOT EMAIL THIS FORM. EMAIL IS NOT A SECURE MEDIUM. MAIL THIS FORM TO IRA RESOURCES INC.

Signature of Participant _____ **Date** _____