



IRA RESOURCES, INC.

Roth Conversion

1. ACCOUNT OWNER INFORMATION

| | | |
|--|---|------------------------|
| Full Name <i>(as it appears on your account application)</i> | IRAR Account Number | Social Security Number |
| | | |
| Email Address | Daytime Phone Number | |
| | | |
| Type of Account Being Converted <i>(check one)</i> | <input type="checkbox"/> Traditional IRA <input type="checkbox"/> SIMPLE IRA <input type="checkbox"/> SEP IRA | |

2. CONVERSION INFORMATION

| | |
|---|---|
| Choose One Of The Following: | |
| <input type="checkbox"/> New Roth IRA <i>This is a conversion to a NEW Roth IRA. An account application must be attached</i> | <input type="checkbox"/> Existing Roth IRA <i>This is a conversion to an EXISTING Roth IRA</i> Existing Roth Account Number: |
| Choose One Of The Following: | |
| <input type="checkbox"/> Full Conversion <i>Convert all assets held in the above account</i> | <input type="checkbox"/> Partial Conversion <i>Convert the assets indicated below</i> |
| Asset(s) Description <i>(real estate, note, stock, LLC, etc.)*</i> | Indicate Dollar Amount <i>(do not use percentages)</i> |
| | |
| | |
| | |
| | |
| * A Fair Market Valuation (FMV) Form must be filled out (including supporting documentation) for each asset being converted | |

3. TAX WITHHOLDING

The IRS requires withholding of 10% of Traditional IRA funds being converted to a Roth IRA unless you instruct us otherwise. If you use IRA money to pay the taxes owed when you convert from the Traditional IRA to the Roth IRA, you may owe a federal early withdrawal penalty on the funds if you are under 59 ½ (because the IRA will treat this money as a withdrawal from your IRA), and you will also owe income taxes.

Please make your selection below. Please note that if neither election is made, IRAR Trust must automatically withhold 10% of funds. Distributions (including this conversion) from your IRA are subject to federal (and possible state) income tax. If you elect to not have taxes withheld, you are nevertheless liable for payment of income tax and any applicable tax penalty and interest on the taxable portion of the distribution.

| Federal Withholding | State Withholding |
|---|---|
| <input type="checkbox"/> I elect to NOT have federal income tax withheld <input type="checkbox"/> I elect to have _____% federal income tax withheld <i>(must be greater than 10%)</i> In addition to the percentage, I elect to have \$_____ federal income tax withheld | <input type="checkbox"/> I elect to NOT have state income tax withheld <input type="checkbox"/> I elect to have ____% state income tax withheld* *State withholding will only be processed for the following state: <div style="text-align: center;">California</div> |



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4. ACCOUNT OWNER CERTIFICATION AND ACKNOWLEDGEMENT

Your signature is required. Please ensure that you read and acknowledge the following disclosure before you sign and date this form.

- 1. I certify that the information provided is true and correct to the best of my knowledge, and I certify that no tax advice has been given to me by IRAR Trust Company;
2. I acknowledge a conversion from a traditional IRA to a Roth IRA is treated as a taxable distribution. It is recommended that I consult with my tax advisor before completing this transaction;
3. I acknowledge that this transaction is subject to federal income tax withholding unless I have specifically requested above, that federal income taxes not be withheld, and I am eligible to opt out of withholding;
4. I acknowledge that state tax withholding rules may also apply;
5. I acknowledge that the taxable converted amount will be subject to federal income taxes in the year in which the conversion occurs;
6. I expressly assume the responsibility for any adverse consequences which may arise from this conversion request and I agree that I will indemnify IRAR Trust Company from any liability if I fail to meet any IRS requirement.

If fees are being deducted from your account, the full amount of the fees must be available before your transaction can be processed.

I declare that I have examined this document, including accompanying information, and to the best of my knowledge and belief, it is true, correct, and complete.

Table with 3 columns: PRINT NAME, ACCOUNT OWNER SIGNATURE, DATE. The signature field contains a green arrow icon.

Submission Options

Table with 3 columns: FAX, EMAIL, MAIL. FAX: (858) 459-6565; EMAIL: forms@iraresources.com; MAIL: IRA Resources, 1000 Broadway, Suite 350, Oakland, CA 94607.