

Roth IRA Conversion Request

IMPORTANT INFORMATION

This form is to be completed by an Account Owner who wishes to do a conversion of funds to a Roth IRA account. The requested transaction must result in funds being credited to a Directed Trust Company (Directed IRA) account. This form is not to be used if funds are being sent to another custodian.

- If converting asset(s) besides cash, you are **required** to provide us with an updated valuation of the asset(s) prior to the conversion. For real estate assets, please attach a certified appraisal report to this form with our Fair Market Valuation Form signed and certified by a licensed professional.

Processing Options

Select an option below. If no option is selected, Directed IRA will process your request as normal (within 3 business days). I understand that if my account does not have sufficient funds, my transaction may not be processed. Processing cannot begin until all Investment Documents have been received and determined to be in good order.

- Next-Day Service (\$150) – Must be received by 4pm MST Same-Day Service (\$250) – Must be received by 10am MST

1. Account Owner Information

First Name: _____ MI: _____ Last Name: _____

Last 4 of SSN: _____ Date of Birth: _____ Phone Number: _____

Directed IRA Account Number: _____ Existing Account Type: _____

2. Account Information

I wish to convert my Traditional IRA or SEP IRA account to a Roth IRA as indicated below. I understand that this conversion will be reported both as a distribution on which I may owe income tax and a conversion contribution to my Roth IRA. I further understand that it is my responsibility to ensure that I am qualified to make this conversion and that none of the conversion assets include disqualified assets.

Please make the following adjustments to my account:

- I wish to close the existing account after the conversion is performed. (Fee of \$200, please refer to Fee Schedule)
- I wish to keep the existing account open; Directed IRA will keep \$500 in the custodial cash account to maintain the minimum balance requirement.

Please select one:

<input type="radio"/> This is a conversion to a new Roth IRA. I have attached a completed Roth IRA New Account Type Application form to open a new Roth IRA	
<input type="radio"/> This is a conversion to an existing Directed IRA Roth Account.	My Roth IRA Account Number is: _____

Please select one:

<input type="radio"/> Full Conversion (Convert ALL assets (including cash) held in the existing account listed above)
<input type="radio"/> Partial Conversion

Cash Conversion Amount: \$ _____

Convert the following Assets:

*You are **required** to provide us with an updated valuation of your asset(s) prior to the conversion. For real estate assets, please attach a certified appraisal report to this form with our Fair Market Valuation Form signed. For IRA/LLC's, please attach a valuation of the LLC and the Fair Market Valuation form.

	Asset to Convert:	Amount/Shares to Convert
Asset #1		\$
Asset #2		\$
Asset #3		\$
Asset #4		\$
Asset #5		\$

3. Account Owner Authorization

I understand that this conversion will be reported both as a distribution on which I may owe income tax and a conversion contribution to my Roth IRA. I further understand that it is my responsibility to ensure that I am qualified to make this conversion and that none of the conversion assets include disqualified assets.

Please note electronic signatures on this form must include the electronic signature Certification page or Certification Stamp. If one is not included, we will not accept this form.

 _____
Account Owner Signature

_____ Date

INVESTMENTS: NOT FDIC INSURED ■ NO GUARANTEE ■ MAY LOSE VALUE

[Secure File Upload](http://www.directedira.com/secureupload) **Email Forms to:** Accounting@directedira.com **Send Mail to:** 3033 N. Central Ave. Ste. 415 **Phone:** (602) 899-9396
www.directedira.com/secureupload **Fax:** (602) 899-9641
Phoenix, AZ 85012

Directed IRA is a tradename of Directed Trust Company, an Arizona Corporation

Withholding Election Form

IMPORTANT INFORMATION

Use this form to instruct Directed Trust Company ("Directed IRA") how the withhold Federal taxes from each distribution. The information we provide is not intended to serve as tax or legal advice, and we strongly recommend that you contact your tax advisor regarding your tax withholding elections.

1. Account Owner Information

First Name: _____ MI: _____ Last Name: _____

Last 4 of SSN: _____ Date of Birth: _____ Phone Number: _____

Directed IRA Account Number: _____ Account Type: _____

2. Tax Withholding Notice & Election

The distributions you receive from your Account are subject to federal income tax withholding unless you elect not to have withholding apply. You may elect not to have withholding apply to your distribution payments by completing the "Federal Tax Withholding Election" section above. If you do not complete the "Federal Tax Withholding Election" section by the date your distribution is scheduled to begin, federal income tax will be withheld from the amount withdrawn at a rate of 10%. If you elect not to have withholding apply to your distribution payments, or if you do not have enough federal income tax withheld from your distribution, you are responsible for payment of any estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient. You understand that Directed Trust Company does not provide any tax advice, and you are encouraged to consult a tax professional.

If an option below is not selected, not less than 10 percent from an Account (other than a Roth IRA) will be withheld from the distribution by default.

- Withhold Federal Income Tax at a rate of _____% from the amount withdrawn.
- DO NOT** Withhold Federal Income Tax – I understand that I am still liable for the payment of Federal Income Tax on the amount of any distributions received. I also understand that I may be subject to Federal Income Tax penalties under the estimated tax payment rules if my payments of the estimated tax and withholding are insufficient.

3. Distribution Type (choose one)

- Revocation Normal Distribution (59 ½ or older) Early Distribution (Under age 59 ½) RMD
- Excess Contribution Direct Rollover Divorce Roth Conversion Death

4. Account Owner's Signature Required

I certify that I am the proper party to receive payment(s) from this account, and that all information provided by me is true and accurate. I acknowledge that I have read the Notice of Withholding on Distributions above and have completed the Withholding Election above. I also understand that state tax may be due and hereby opt not to have state tax withheld. I further certify that no tax advice has been given to me by Directed Trust Company. I understand that distributions are reported to the IRS, and that all decisions regarding this withdrawal are my own. 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. Please note electronic signatures on this form must include the electronic signature Certification page or Certification Stamp. If one is not included, we will not accept this form.



Account Owner Signature

Date

INVESTMENTS: NOT FDIC INSURED ■ NO GUARANTEE ■ MAY LOSE VALUE

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