

IRA Contribution and Rollover Authorization

Please review the Wells Fargo Clearing Services (WFCS) IRA Disclosure Statement and Custodial Agreement for more information about the IRA Custodian and the terms and conditions of the account. Speak with your tax advisor, review IRS Publication 590 A and B, or visit [IRS.gov](https://www.irs.gov) for more information regarding IRA contributions and rollovers.

Section 1: Account Information

Name	Account Number
Select the Account Type to Receive the Contribution (Do not use this form for SEP or SIMPLE IRAs) <input type="checkbox"/> Traditional <input type="checkbox"/> Roth	

Section 2: Deposit Type

Select/check **either** Annual Contribution, Repayment, or Rollover, but only one of those.

- ☐ **Annual Contribution.** If making an annual contribution, including a 529 to Roth IRA contribution, select **only one** contribution option below (either Current Year, Prior Year, or the applicable Postponed option). *Multiple selections are not permitted. Periodic Contributions will be current year only. Selection not required below for On Demand.*
- ☐ Current Year ☐ Postponed - Federally Designated Disaster ☐ Postponed - Yugoslavia
☐ Prior Year ☐ Postponed - Sinai Peninsula of Egypt ☐ Postponed - Afghanistan
☐ Postponed - Arabian Peninsula
- ☐ **Repayment.** If making a repayment, select **only one** repayment option below. Multiple selections are not permitted.
- ☐ Qualified reservist ☐ Qualified birth or adoption ☐ Qualified disaster
☐ Terminal illness ☐ Family emergency ☐ Domestic abuse
- ☐ **Rollover.** If making a rollover, select **only one** rollover option below.
- ☐ Indirect Rollover or Roth Conversion from Qualified Plan to IRA (ROLL) - this includes 401(k), 403(b), Pension, etc.
- ☐ Indirect 60-day IRA-to-IRA Rollover (ROLI), Financial Professional complete the box below - only one allowed in a 365-day period per IRA owner
- ☐ Indirect 60-day Roth Conversion from Traditional, SEP, or SIMPLE IRA (RCVN), Financial professional complete the box below

****ROLLOVER RECOMMENDATION CONFIRMATION****

To be completed by the Financial Professional before the client signs for indirect 60-day IRA-to-IRA or indirect 60-day Roth Conversion

Question: Is this rollover Client-initiated or Financial Professional recommended? Financial Professional must indicate whether the rollover was Client-Initiated or Financial Professional Recommended (not both).

- ☐ **Client-Initiated:** the Client independently decided to initiate this rollover transaction without any recommendation from their Financial Professional
- ☐ **Financial Professional Recommended:** this rollover **was recommended by the Financial Professional for the** following reason(s) – **note:** check all recommendation reasons that are applicable; one or more must be checked
- Financial Professional Recommendation Reasons:** *(do not check reasons below if rollover was Client-Initiated)*
- ☐ Consolidate client's accounts and simplify account management (including consolidate statements, tax reporting, beneficiary planning, and/or administrative ease)
- ☐ Work with a specific Financial Professional of the client's choosing in connection with their investment and retirement account needs
- ☐ Move client from a self-directed account to a full-service account in order to receive investment advice and assistance with financial/retirement planning
- ☐ Have access to more or different investment options

Account(s) carried by First Clearing. First Clearing is a trade name used by Wells Fargo Clearing Services, LLC, a registered broker-dealer and non-bank affiliate of Wells Fargo & Company.

Office Use Only: Sub Firm # BR Code FA Code Account Number

Section 3: Deposit Details

Amount

\$ _____

Annual contributions cannot be made with securities. Amount must be completed for rollover transactions. Please leave contribution amount blank if setting up On Demand instructions for future use in the Frequency Type section below.

- ☐ **Securities** - Only for rollovers. Specify assets below - Security Name, Symbol, or CUSIP can be located on your current statement. The CUSIP is 9 numbers long.

Symbol/CUSIP	Quantity

Symbol/CUSIP	Quantity

Method - *Select one*

- ☐ **Check (can be attached, mailed or returned to financial professional)**
- ☐ **Transfer funds from an internal non-IRA brokerage account number:** _____
- ☐ **Wire Funds**
- ☐ **Move funds electronically via ACH/Money Transfer from Checking/Savings Account**

Complete ACH/Money Transfer information below. For instructions to transfer funds to the IRA, a signer must be an account owner/authorized signer on both the bank account and the IRA. By signing, you acknowledge that you have authority to provide and be bound by money movement instructions with respect to the accounts listed.

ABA Routing Number (9 digits)	Account Number
Financial Institution Name	
Bank Account Title or Name	Account Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings

Frequency Type

Only one frequency type may be selected; separate forms are required to establish more than one frequency. If ACH/money transfer frequency falls on a holiday or weekend, money will remit on the next business day. Periodic contributions are fixed amounts.

- ☐ **On Demand** (verbal requests – available for ACH/Money Transfer method and for Annual Contributions only).
You authorize contributions from the bank account you supplied without completing a new form. Upon completion of this form, a contribution may be requested immediately. A new form must be completed if you want to make changes to the Method section. A separate form is needed for each of your IRAs.
- ☐ **One Time** (single use only, including Rollovers).
- ☐ **Establish New Periodic** Effective _____ (1st – 28th only) or ☐ Last business day
- ☐ **Change Existing Periodic** Effective _____ (1st – 28th only) or ☐ Last business day

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Periodic Frequency

Periodic Contributions will be current year only.

- ☐ Annually ☐ Semi-annually (every 6 months) ☐ Quarterly
☐ Monthly ☐ Bimonthly ☐ Monthly (Last Business Day)
☐ Biweekly ☐ Weekly (same day each week) ☐ Semi-monthly (2 times/month) _____ and _____

Terms and Conditions

- This agreement is governed by the general terms and conditions of the brokerage account specified by you in this form. The ACH service is to be performed by us and in accordance with the rules of the National Automated Clearing House Association ("NACHA") as such rules are amended from time to time.
- The ACH service includes the transmission of electronic credit and/or debit entries initiated by you and processed through us from your account. This service is established solely for the convenience of the account holder, and the persons signing this agreement understand that this service may be terminated or modified at any time without notice by First Clearing, a trade name used by Wells Fargo Clearing Services, LLC (hereinafter referred to as "First Clearing"). Refer to your Basic Brokerage Account Agreement and Disclosure Document for Regulation E disclosures regarding electronic fund transfers.
- The account holders release the Introducing Broker-Dealer ("IBD"), First Clearing, and their affiliates, agents, and representatives from all liability and agree to indemnify the same from any and all losses, damages, or costs for acting in good faith in accordance with the privilege selected herein. In no event shall the IBD, First Clearing, or their affiliates, agents, or representatives be liable for consequential damages. All terms shall be binding upon the heirs, representatives, and assigns of the account holders.
- The account holders release the IBD, First Clearing, and their affiliates, agents, or representatives in the event the IBD or First Clearing makes an error which underpays/overpays their account. The account holders authorize the IBD through First Clearing to debit or credit their account as necessary to correct any errors.
- A fee will be charged for all deposits into brokerage accounts that reject for insufficient funds or closed accounts.
- The authorization will continue until terminated by any account holder by written or verbal notification to the IBD who will notify First Clearing. Termination will be effective as soon as First Clearing, upon receipt, has had reasonable time to act upon it.

Section 4: Client Signature, Acknowledgment and Rollover Certification

By signing below, you:

- Understand your contribution is considered current year, unless you indicate "Annual: Prior Year" above. Periodic contributions will be current year only.
- Understand that the IRS determines the annual maximum contribution limit that you may contribute each year. You understand that if you should exceed that contribution maximum, you are responsible for any penalties and interest imposed by the IRS.
- Agree that the IRA Custodian shall in no way be held responsible, and you expressly assume responsibility for:
 - Any tax implication or
 - Adverse consequences which may arise as a result of this deposit.
- Hereby certify that if you elect to make an irrevocable rollover contribution to your IRA, you understand that you can only make one 60-day IRA-to-IRA rollover in a 365 day period and this contribution is:
 - From an eligible rollover distribution and
 - Not a required minimum distribution (RMD) and
 - Being rolled over within 60 calendar days from receipt or being rolled directly from my eligible qualified retirement plan (except for authorized postponed contributions or repayments).

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- Hereby certify that if you elect an Indirect Roth Conversion, you understand that: it is irrevocable because a Roth IRA conversion cannot be recharacterized; that it must be completed within 60 days of receipt; and that it is not subject to the one 60-day IRA-to-IRA rollover rule.
- Hereby certify that if you are making a direct rollover contribution from a 529 plan to a Roth IRA that the requirements to do so are met. The requirements include but are not limited to:
 - Amounts rolled over are subject to annual Roth IRA contribution rules including annual contribution limits. The modified adjusted gross income (MAGI) limits do not apply.
 - The 529 plan account has been maintained for at least 15 years and the Roth IRA owner is the 529 designated beneficiary.
 - Rollover amount does not exceed the \$35,000 lifetime limit.
 - Contributions (and attributable earnings) made within the past 5 years are not eligible to be rolled over.
- Authorize the IRA Custodian to initiate a money transfer of a contribution to your account if you elected to make a contribution via money transfer by signing below.
- Authorize transactions, based on verbal instructions, from your account at the financial institution identified in the money transfer section of this form, for credit to your IRA held with the IRA Custodian.
- **IRA-to-IRA Rollover Acknowledgment** - Hereby confirm and agree that if this is a 60-day IRA-to-IRA rollover:
 - **All of the information in Section 2 of this form (as applicable) is true and accurate and was completed prior to your review of this Form;** and
 - Understand that the investment and other costs associated with the IRA may be greater in certain respects than any such costs currently incurred with respect to the current IRA being rolled over and notwithstanding any such increases in cost, you still wish to proceed with the rollover.

Signature of the IRA Holder, Custodian for a minor, Legal Guardian, or Attorney-in-Fact (POA document required)

Signature X	Printed Name	Date Signed
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