

Account Number:

[Empty box for Account Number]

This form must be remitted with all initial funding checks included with your Account Application and deposits made to your account after any initial funding you made at the time you established your account. The form must include the Account Owner's name and account number. In addition, contributions must reflect the year to which the deposit applies.

1 ACCOUNT OWNER INFORMATION

Legal Name: \_\_\_\_\_ Soc. Sec. Number: \_\_\_\_\_

Type of Account at IRA Plus Southwest, LLC (check one):  Traditional IRA  Roth IRA  SEP IRA  Simple IRA

2 PAYMENT INSTRUCTIONS

Check MAKE CHECKS PAYABLE TO: IRA Plus Southwest, LLC FBO (Account Owner's Name) IRA # \_\_\_\_\_

Wire Submit this Contribution Designation form prior to sending a wire. (See wire instructions.)

3 CONTRIBUTION / ROLLOVER DEPOSIT \*

Table with 2 columns: Contribution Type and Amount. Rows include IRA Contribution (Current/Previous year), 60-day rollover from IRA/Employer Plan, and Direct Rollover from Employer Plan. Includes checkboxes for SEP\*\* and SIMPLE\*\* contributions.

\*\* SEP and SIMPLE contributions must be made by the employer sponsoring the SEP or SIMPLE.

4 ACCOUNT OWNER SIGNATURE

\* Certification

I certify that I have correctly identified the source of the above referenced check/wire and hereby authorize the deposit of such check/wire to the account noted above. If this is a deposit for a contribution or rollover, I hereby certify that I understand the rules regarding contributions and rollovers and that this is a valid contribution or rollover contribution that meets all IRS requirements. If this is a rollover contribution, I irrevocably elect to designate this contribution of cash or property as a rollover contribution. If this a deposit for a Roth Conversion, I hereby certify that I understand the rules regarding Roth Conversions and that this deposit is a valid Roth conversion that meets all the IRS Requirements

Under penalty of perjury, I declare and certify that this form, except for the information provided in the completion of the form, is identical, word for word, to the form provided by IRA Plus Southwest, LLC ("IPS"), via its website or by any other means, and has not been altered in any manner whatsoever by me or, to my knowledge, by any third party. In the event that this form has been modified, with or without my knowledge, I agree that any such modification shall be null and void and that the language of the form as it was provided by IPS shall override any conflicting language.

Printed Name: X \_\_\_\_\_

Signature: X \_\_\_\_\_ Date: X \_\_\_\_\_