



Mailing address: TradeStation
8050 SW 10th Street, Suite 2000
Plantation, FL 33324
Fax: 954.652.7599 | Email: clientservice@tradestation.com

1. CUSTOMER INFORMATION (please print)

Name:		Social Security Number:	
Address:	City:	State:	Zip Code:
Account Number:	Date of Birth:	Daytime Phone Number:	

2. CERTIFICATION

Please select the appropriate choice.

☐ **Traditional IRA or SIMPLE IRA to Traditional IRA Rollover**

I certify:

1. It has been less than 60 days since I received the funds or property being deposited.
2. I did not receive any other distributions from the distributing IRA during the preceding 12 months which I also rolled over.
3. The assets involved in this rollover have not been rolled over in the past 12 months.
4. If over 70½, I have satisfied my required minimum distribution for the year.
5. SIMPLE IRA only - it has been at least two (2) years since I first began participating in a SIMPLE IRA plan sponsored by my employer.

☐ **Roth IRA to Roth IRA Rollover**

I certify:

1. It has been less than 60 days since I received the funds or property being deposited.
2. I did not receive any other distributions from the distributing IRA during the preceding 12 months which you also rolled over.
3. The assets involved in this rollover have not been rolled over in the past 12 months.

☐ **Rollover or Direct Rollover from Qualified Plan into a Traditional IRA**

I certify:

1. I am an eligible participant (participant, spouse beneficiary of former spouse due to divorce).
2. It has been less than 60 days since I received the funds or property being deposited.
3. I received these funds from an eligible qualified retirement plan.
4. If over 70½, I have satisfied my required minimum distribution for the year.
5. The rollover consists only of funds or property distributed from the qualified plan or the proceeds from the sale of property distributed from the qualified plan.
6. All of the funds included are eligible to be rolled over.

☐ **Traditional IRA to a Roth IRA Rollover (Roth Conversion)**

I certify:

1. It has been less than 60 days since I received the funds or property being deposited.
2. If over 70½, I have satisfied my required minimum distribution for the year.

3. YOUR SIGNATURE AND DATE

I am familiar with and understand the rollover rules and conditions. I certify that I met the requirements for making a rollover contribution. Due to the important tax consequences of rolling over funds or property to an IRA, I understand that the Trustee cannot and has not provided tax advice. I release, indemnify and hold the Trustee harmless against any liabilities I may incur as a result of this transaction. By signing this agreement, I understand that I have irrevocably designated this contribution as a rollover contribution.

Signature

Date