

## Traditional IRA/Roth IRA Rollover Certification Form

Use this form to certify a rollover distribution from your a current Traditional IRA, or Roth IRA, or an eligible Qualified Retirement Plan distribution to your Folio Institutional IRA, when you have received a physical check from a qualified retirement plan.

## Important Information:

Complete and send us this form, along with the distribution check you received, within 60 calendar days of your receipt of that distribution.

U.S. Mail
Folio Institutional
ATTN: Cash Management
8180 Greensboro Drive, 8th Floor
McLean, VA 22102

Fax: 703-649-6288

Scan and Email: support@folioinstitutional.com

If you need assistance, please call us at 1-888-485-3456.

## Traditional IRA/Roth IRA Rollover Certification Form

Name (Plea	ase print name exactly as it appea	ars on your IRA):			
Date of Birth:		Social Security Number (SSN):		):	Daytime Telephone Number:
Address (P.O. Box is not sufficient):			City, State and ZIP Code:		
Folio Institutional Account Number:			Account Type:		
			○ Traditional IRA Rollover ○ Roth IRA		
Type of Ro	llover Contribution (Please	check one)			
0	-	over — To be eligible,			passed since the last time that you last ing a distribution.
0	<b>Qualified Plan Rollover Distribution</b> – An eligible distribution is generally a non-periodic distribution from a qualified retirement plan for all or part of your account balance which is rolled over into your Folio Institutional IRA within 60 days of receipt, except for and portion of a distribution which is nontaxable. Your employer's benefits or personnel office should be able to tell you what portion of your distribution is an eligible distribution. Funds may be rolled over from a qualified plan into a Roth IRA, if the distribution firm is informed of the destination account type before the check is sent.				
0	Qualified Domestic Relations Order Distribution (Please attach such document)				
0	Qualified Plan Rollover Distribution from Roth 401k/403b (Funds must go into a Roth Qualified Plan or Rotl IRA)				
70½ Rollov	ver Restrictions – for Tradition	onal IRA only (Pleas	e check (	one)	
0	I am not nor will be 70-1/2 o	r older in this calenda	r year.		
0					may not rollover any amounts required to 1(a)(9) (Required Minimum Distributions)
Certificatio	n				
this contribution involves implied will no longer	ution within 60 calendar days oportant tax considerations. Sp	of my receipt of that d ecifically, I understand veraging, capital gains	listribution d that a ro s and sep	<ul> <li>I understa bllover contr</li> </ul>	over contribution and that I am rolling ove and that this rollover is irrevocable and ribution from a qualified retirement plan eatment that may be available for
custodian n		e any responsibility fo			ution. I also agree that neither the IRA quences. I also understand that
custodian the movem	will rely on this form when a	accepting my rollove ccessor IRA, and tha	er contrib at neithe	ution. I als	form. I also understand that the IRA o understand that I am responsible for ustodian nor Folio Institutional has any
<b>Darticinant</b>	's Signaturo				Date
Participant's Signature					

