

Recharacterization Form

PO Box 9 Cedar City, UT 84721 Phone: 888-328-8008 Fax: 435-867-1042

Part 1 Account Owner Information		
NAME (as it appears in your plan)		IRA EXPRESS ACCOUNT NUMBER
EMAIL ADDRESS		PHONE NUMBER
Part 2 Recharacterization Information		
Recharacterizing to one the following:	<u> </u>	
☐ NEW ACCOUNT	EXISTING IRA EXPRESS ACCOUNT	
☐ TRADITIONAL IRA ☐ SEP IRA ☐ SIMPLE IRA	TRADITIONAL IRA Account Number:	
A new account application must be attached.	SIMPLE IRA Account Number:	
Choose one of the following:		
FULL RECHARACTERIZATION Recharacterize all the assets held in the above account.	PARTIAL RECHARACTERIZATION Recharacterize only the assets listed below.	
Asset Description		Indicate Dollar Amount (do not use percentages)
		\$
		\$
		\$
		\$
		\$
Part 3 Certification and Acknowledgement		
 I certify that the information provided is true and correct to the best of my knowledge. I certify that no tax advice has been given to me by the Administrator or Custodian. I hereby irrevocable elect to treat this transaction as permitted under the IRS Regulations. It is recommended that I consult with my tax advisor before completing this transaction. I acknowledge that the transaction will be reported to the IRS. I acknowledge that it will be reported in the calendar year it is completed. I expressly assume the responsibility for any adverse consequences which may arise from this re-characterization request and I agree that the Administrator and/or Custodian shall in no way be responsible for those consequences. I hereby release the Administrator and/or Custodian from any claim for damages on account of the failure of this transaction to qualify for recharacterization. Please read the disclosure above the signature line before signing and dating.		
SIGNATURE		DATE