

ROTH IRA DIRECT ROLLOVER CONVERSION REQUEST

Go to ally.com to get the appropriate form for Invest IRAs.

Return this form with any attached documents using one of these methods:

Online

Log in at ally.com and select Email, or log in on the Ally mobile app and select ☑ . Attach the form to your message.

Mail

Ally Bank Retirement Services P.O. Box 13625 Philadelphia, PA 19101-9811 Fax

Subject Line: Retirement Services Fax Number: 866-699-2969

Ally Bank Retirement Services 1100 Virginia Drive, Suite 150 Fort Washington, PA 19034-3276

Keep in mind, we'll need to contact you for the original form, if your present Roth IRA Trustee/Custodian requires it.

Use this form if having funds sent directly to Ally Bank or a check from the previous Roth IRA Trustee/Custodian sent to Ally Bank. Print your responses in the applicable fields.

7IP

Roth	IRA Pla	ın Owner
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FIRST NAME

M.I.

LAST NAME / SUFFIX

SOCIAL SECURITY

DATE OF BIRTH

RESIDENTIAL STREET ADDRESS (NO PO BOX, BUS., OR MAIL DROP)

PERSONAL PHONE

WORK PHONE

CITY STATE

Distributing Workplace Retirement Plan (WRP) (Non-IRA) Information

NAME OF PLAN NAME OF PARTICIPANT

ADDRESS OF PLAN ADMINISTRATOR PHONE OF PLAN ADMINISTRATOR

CITY STATE ZIP CONTACT PERSON (IF APPLICABLE)

Rollover from a designated Roth account [A Roth 401(k) or Roth 403(b)] in a WRP.

Conversion from a WRP other than a designated Roth account.

Note: If applicable, your required minimum distribution cannot be included in the rollover/conversion amount.

_	Direct	Rollover	or Conv	/ersion	Instructions
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Send the following Roth IRA assets (cash proceeds only / SELECT ONLY ONE):

ACCOUNT NUMBER

The entire balance of this account:

ACCOUNT NUMBER

ACCOUNT NUMBER

ACCOUNT NUMBER

Only the balance in these accounts:

Other (specify):

Send the Roth IRA assets (SELECT ONLY ONE):

Immediately

DATE

On (specify date):



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Direct Rollover or Conversion Instructions (continued) -

NAME OF IRA PLAN OWNER

Send wire or make check payable to Ally Bank, Custodian for the Roth IRA of:

ACCOUNT NUMBER

Receiving Ally Bank Account Number:

Include with Remittance

Customer's Preferred Funds Delivery Method:

Wire funds to Routing/ABA Number 124003116 (Ally Bank as Receiving IRA Custodian)

Mailing address may also be used for wire transfer documentation.

Mail check to Ally Bank Retirement Services, PO Box 13625, Philadelphia, PA 19101-9811

Send check expedited delivery to Ally Bank Retirement Services, 1100 Virginia Drive, Suite 150, Fort Washington, PA 19034-3276

Signatures -

Customer Signature

I authorize the plan administrator to send my eligible rollover distribution to the Roth IRA Custodian listed above, for credit to my IRA. I irrevocably designate the deposit as a rollover contribution. I understand that the Roth IRA Custodian is not responsible for determining what part, if any, of this distribution is eligible for rollover or conversion. I certify that, to the best of my knowledge, the information provided on this form is true and correct and may be relied on by the Roth IRA Custodian. Due to the important tax consequences of this transaction, I agree to seek the advice of a legal or tax professional, as needed. The Roth IRA Custodian has not provided me with any legal or tax advice, and I assume full responsibility for this transaction. I will not hold the Roth IRA Custodian liable for any adverse consequences that may result from this transaction.

SIGNATURE OF ROTH IRA PLAN OWNER

DATE

Acceptance

By the authorized signature below, the Roth IRA Custodian agrees to accept the direct rollover conversion assets and to deposit them into an IRS-approved Roth IRA.

AUTHORIZED SIGNATURE OF ALLY BANK AS SUCCESSOR CUSTODIAN

DATE