

WHEN TO USE THIS FORM

When you want to recharacterize your Roth IRA account back to the original account with Equity Trust Company. This is normally done when a Roth Account was opened and it was realized the qualifications were not met in order to have a Roth account.

- Before recharacterizing you should consult with a tax professional.
- If you are recharacterizing back to a Qualified Plan, please contact a Client Service Representative for more information.

NOTE: If a conversion originally came from a qualified retirement plan, such as a 401k, it cannot go back to the plan account but can go to a Traditional IRA.

INSTRUCTIONS & GUIDELINES

When completing the *Recharacterization Form* please follow these guidelines:

- Please be sure you have both a Roth IRA and a tax-deferred IRA account open before proceeding with this form.
- A *Fair Market Valuation (FMV) Form* is required for any transaction involving non-traditional asset(s). Submit the original FMV form including the original supporting documentation by mail.
- Recharacterizations must be completed on or before your tax filing deadline with extensions for filing your Federal Income tax return for the taxable year for which the contribution was made..
- You must complete the *Recharacterization Form* in order to accomplish a recharacterization. Taking a distribution of the funds or assets and subsequently rolling them over to another IRA will not produce proper IRS reporting, and will not be deemed as a recharacterization.

CONTACT INFORMATION

PHYSICAL ADDRESS:

Equity Trust Company
Attn: Institutional Accounts
1 Equity Way
Westlake, OH 44145

WEBSITE:

www.EquityInstitutional.com

TOLL FREE:

800-955-3434 (option 2)

Or e-mail questions to:

E-MAIL:

IRAServices@EquityInstitutional.com

SUBMISSION OPTIONS

OVERNIGHT:

Equity Trust Company
Attn: Institutional Accounts
1 Equity Way
Westlake, OH 44145

REGULAR MAIL:

Equity Trust Company
Attn: Institutional Accounts
P. O. Box 451159
Westlake, OH 44145

FAX:

(440) 365-1443

DO NOT FAX OR MAIL THIS COVER PAGE

INVESTMENT PRODUCTS: NOT FDIC INSURED - NO BANK GUARANTEE - MAY LOSE VALUE

1 ACCOUNT HOLDER INFORMATION

ACCOUNT HOLDER NAME	PRIMARY DAYTIME PHONE NUMBER
EMAIL ADDRESS	

2 ACCOUNT INFORMATION FOR RECHARACTERIZATION

Equity Institutional recommends consulting with your tax professional before proceeding.

FROM EQUITY INSTITUTIONAL IRA ACCOUNT NUMBER:	TO EQUITY INSTITUTIONAL IRA ACCOUNT NUMBER*:
Type of account to be recharachterized: <input type="checkbox"/> Roth IRA <input type="checkbox"/> SIMPLE IRA <input type="checkbox"/> Traditional IRA <input type="checkbox"/> QUALIFIED PLAN <input type="checkbox"/> SEP IRA <input type="checkbox"/> QUALIFIED PLAN - ROTH	Type of account recharachterized TO: <input type="checkbox"/> Roth IRA <input type="checkbox"/> SIMPLE IRA <input type="checkbox"/> Traditional IRA <input type="checkbox"/> SEP IRA

*Account must be established before recharacterization.

3 FUND INFORMATION FOR RECHARACTERIZATION
INDICATE BELOW THE TYPE OF RECHARACTERIZATION YOU ARE REQUESTING

<input type="checkbox"/>	Full Recharacterization - Recharacterize ALL assets "in-kind" and any cash balance to the new account.** This will close your existing account unless you select here to keep it open. <input type="checkbox"/> Keep existing IRA Account open.																								
<input type="checkbox"/>	Partial Recharacterization in Cash - Recharacterize only the specified dollar amount in cash to new account. \$ _____																								
<input type="checkbox"/>	Partial Recharacterization "in-kind" - Recharacterize only the specified assets listed below**: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 25%;">ASSET NUMBER (IRN)</th> <th style="width: 40%;">ASSET DESCRIPTION</th> <th style="width: 20%;"># SHARES/UNITS</th> <th style="width: 15%;">APPROXIMATE VALUE</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	ASSET NUMBER (IRN)	ASSET DESCRIPTION	# SHARES/UNITS	APPROXIMATE VALUE																				
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Traditional assets will be determined at time of processing.

**A Fair Market Valuation Form must be completed for any assets involved in a Roth Conversion.

Account Number _____

4 RECHARACTERIZATION FOR CONTRIBUTION / CONVERSION
☐ **Recharacterized Conversion**

DATE OF ORIGINAL CONVERSION		DATE OF RECHARACTERIZATION
ASSET NUMBER (IRN)	ASSET DESCRIPTION	CURRENT FMV OF RECONVERSION ASSET
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☐ **Recharacterized Contribution**

AMOUNT OF CONTRIBUTION OR CONVERSION	DATE OF ORIGINAL CONTRIBUTION	
PLUS EARNINGS (LOSSES)	TYPE OF CONTRIBUTION BEING RECHARACTERIZED, SELECT ONE:	<input type="checkbox"/> ANNUAL CONTRIBUTION
TOTAL AMOUNT TO BE RECHARACTERIZED		<input type="checkbox"/> ROTH IRA CONVERSION CONTRIBUTION

5 PAYMENT OF FEES

How would you like to pay for any service-related fees associated with this transaction?

Choose a payment method: ☐ Deduct Fees from Account ☐ Check Enclosed ☐ Credit Card on file

Note: By checking Credit Card on file, you authorize Equity Trust Company to charge your credit card for all service-related fees associated with this transaction (if applicable). To add, change, or update a credit card please visit www.myequity.com. **If a payment method is not selected, fees will be deducted from the account.**

SIGN & DATE

I certify that I have or will establish a tax-deferred account with the Custodian named above. I understand that I am responsible for determining my eligibility for all recharacterizations and I agree to indemnify and to hold the Custodian harmless against any and all situations arising from an ineligible recharacterization. I acknowledge that the Custodian cannot provide legal advice and I agree to consult with my own tax professional for advice.

The Custodian agrees to accept these funds as a recharacterization.

 Signature of Account Holder/Beneficiary

 Date

 Signature of Custodian

 Date