

TRADITIONAL IRA TO ROTH IRA CONVERSION REQUEST FORM

TRADITIONAL IRA ACCOUNT HOLDER INFORMATION:

Name: _____	IRA Account #: _____
Social Security #: _____	Birth Date: _____

CONVERSION INFORMATION:

I authorize TAB Bank to convert All *or* \$ _____ of my TAB Bank
 Traditional IRA Account #: _____ to a TAB Bank Roth IRA Account.

CONVERSION ELIGIBILITY: *The following statements must all be true*

1. My modified adjusted gross income for the distribution tax year will be \$100,000 or less.
2. If I am married, I will file a joint federal income tax return.
3. If the distribution being converted was from a SIMPLE IRA, it has been at least two years since the date of the initial contribution to my SIMPLE IRA.
4. This is an eligible conversion contribution. It does not include any part of a series of substantially equal periodic payments, any required minimum distribution, or any corrective distribution of certain excess contributions from a simplified employee pension (SEP) plan or SIMPLE IRA.

W-4P FORM

Form W-4P <small>Department of the Treasury Internal Revenue Service</small>	Withholding Certificate for Pension or Annuity Payments	<small>OMB No. 1545-0415</small>
INCOME TAX WITHHOLDING: The instructions to Form W-4P (Withholding Certificate) are available at www.irs.gov .		
<input type="checkbox"/> I elect not to have Federal income tax withheld from my IRA distribution. <input type="checkbox"/> I elect to have the minimum 10% Federal income tax withheld from my IRA withdrawal. <input type="checkbox"/> I elect to have % (must be greater than 10%) Federal income tax withheld from my IRA withdrawal. <input type="checkbox"/> I elect to have \$ (must be at least 10% of the total withdrawal) Federal income tax withheld from my IRA withdrawal.		

SIGNATURE:

I verify that the information contained on the form is true and correct to the best of my knowledge. I further understand that decisions regarding conversions have important tax consequences, and I have been advised to seek the guidance of a tax or legal professional with regard to this decision. I understand that my custodian/trustee cannot provide legal advice. I indemnify and agree to hold the custodian/trustee harmless against any liabilities. I assume full responsibility for the consequences of this conversion decision.

Signature of Traditional IRA Owner **Date**