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Premiere Select® IRA

Recharacterization Request

Use this form to recharacterize annual contributions you made to a Traditional IRA as annual Roth IRA contributions or annual contributions you made to a Roth IRA as annual Traditional IRA contributions

Do NOT use this form to recharacterize ANY conversions or qualified rollover contributions made to a Roth IRA or Roth IRA-BDA. Type on screen or fill in using CAPITAL letters and black ink.

Helpful to Know

- All recharacterizations are processed in kind.
- Employer contributions to a SEP-IRA or a SIMPLE IRA generally cannot be recharacterized as contributions to another IRA.
- A recharacterization is not considered a rollover for purposes of the one-rollover-per-year rule.
- Recharacterizations generally must be completed by the federal income tax filing deadline (including extensions) for the year for which the contribution was made to the first IRA.

First Name

Tax Year YYYY

- The recharacterization request may not be revoked or modified after it has been processed.
- Important Note: The Tax Cuts and Jobs Act eliminated the ability to recharacterize any conversions or qualified rollover contributions made to a Roth IRA in 2018 or after. For more information, consult a tax advisor or your investment representative.

Last Name

1. Account Owner

information requested.

Provide Tax Year for which the Contribution

was made.

Provide all

		any applica	able earnings attributable t	to that contribution, in a trustee-to-trustee	
From Account			To Account If you do not have an existing IRA, contact your investment representative.		
Provide account number.	Account Number		Provide account number.	Account Number	
Check one.	☐ Traditional/Rollover IRA☐ Roth IRA		Check one.	☐ Roth IRA ☐ Traditional/Rollover IRA	
	Contribution Information				
Amount of contribution.	Amount of Contribution				

Middle Name

continued on next page

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2. Recharacterization Request continued

Amount/Assets to Recharacterize

You may recharacterize all or part of the contribution amount indicated above. If an amount is not provided, the entire amount provided above will be recharacterized.

Recharacterize the amount/assets provided below. You must calculate the gain/loss attributable to the principal amount to be recharacterized and provide the amount/assets to recharacterize that includes the gain/loss attributable in the instructions below:

Provide Cash/Securities to recharacterize or check the box below to recharacterize the entire account.

Provide the name(s) and CUSIP or fund symbol(s) of the investments to transfer.

Amo	ount		
\$			

Securities

Cash

Investment Name	CUSIP or Fund Symbol	Number of Shares/Units
Investment Name	CUSIP or Fund Symbol	Number of Shares/Units
Investment Name	CUSIP or Fund Symbol	Number of Shares/Units
Investment Name	CUSIP or Fund Symbol	Number of Shares/Units

OR

Recharacterize the entire account. The entire account represents the entire conversion/contribution amount. Your IRA will be closed.

3. Signature and Date Form cannot be processed without signature and date.

By signing below, you:

- Notify, authorize, and direct National Financial Services LLC ("NFS") to recharacterize, via a trustee-to-trustee transfer, the amount of the contribution(s) and earnings/loss allocable to such contribution(s) pursuant to the instructions provided above.
- Certify that the information supplied on this form is complete and accurate.
- Acknowledge that you are electing to treat the contribution(s) indicated above as if they were made to the IRA to which you are recharacterizing such contribution(s).
- Accept full responsibility for complying with IRS requirements on recharacterization of IRA contributions.

•	Indemnify Fidelity Management Trust
	Company and NFS, and their officers,
	directors, employees, agents, affiliates,
	shareholders, successors, assigns and
	representatives from any liability in
	connection with following the instructions in
	this form, including any liability in the event
	that you fail to meet the IRS requirements
	regarding this recharacterization request.

Print Account Owner Name First, M.I., Last			
Account Owner Signature	Date MM - DD - YYYY		
Z			
SIG			
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National Financial Services LLC, Member NYSE, SIPC

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