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Hilltop Securities Inc. and/or Broker/Dealers for which it clears

Hilltop Securities Inc. Member NYSE/FINRA/SIPC

	ROTH IF	RA ROLLOV	ER DOCUN	MENTATIO	N FORM	
ROTE	H IRA PARTICIPANT IN	FORMATION				
Participa	ant's Name:			_Account No:		
Residen	nce Address:					
SSN:		Birth Date:		Phone:		
	Rollover: In Cash \$					
				(1	attach list if necessary)	
PAR1	I. ROLLOVER FROM A	NOTHER ROT	TH IRA			
	I certify that the following stateme	ents are true and co	rrect.			
1.	This rollover contribution is being made within 60 days after my receipt of funds from another Roth IRA in which I was either the participant or surviving spouse beneficiary. In the case of a distribution from a Roth IRA due to a first time homebuyer which is being rolled into this Roth IRA because of a delay in the acquisition of the first time home, this contribution is being made within 120 days after my receipt of funds from the distributing Roth IRA.					
2.	During the 12-month period prior to my receipt of the distribution being rolled over, I have not received a distribution from the same Roth IRA, which was subsequently rolled over to another Roth IRA, and the distribution being rolled over has not been part of a distribution from another Roth IRA that was subsequently rolled over. (This rule does not apply to a delay in the acquisition of a residence for a first time homebuyer.)					
PART	II. CONVERSION FRO	M TRADITIO	NAL IRA TO	ROTH IRA		
	I certify that the following stateme	ents are true and co	rrect.			
1.	If an amount was distributed from funds from my traditional IRA.					
2.	During the year of this conversio any required minimum distribution eligibility is eliminated beginning	n) and I am not a m				
PART	III. ROLLOVER FROM	A DESIGNAT	TED ROTH C	ONTRIBUT	ION ACCOU	NT
	a ☐ direct rollover or a ☐ 60-d plan, and I certify that the following			th Contribution	Account under m	y employer's §401(k) or
1.	The undersigned certifies that my Distribution that is either being part am rolling over to my Roth IRA no	aid in a Direct Rollo	over to the Custod	lian or Trustee o	f my Roth IRA, or	paid directly to me that I
2.	This rollover/direct rollover solely plan and no other account under					unt under the employer's
3.	This rollover/direct rollover is not	part of a series of p	ayments over my	life expectancy	or over a period o	f 10 years or more.
4.	This rollover/direct rollover does hardship distribution; (3) any corr					
5.	I certify that I am eligible to est Designated Roth Contributions A deceased plan participant; or the	Account, and that I	am one of the fo	ollowing: the pla	an participant; the	surviving spouse of the
PAR1	IV. ROLLOVER CONV	ERSION FRO	M AN EMPL	OYER'S PLA	AN TO ROTE	1 IRA
П	I certify that the following stateme	ents are true and co	rrect			

- 1. This rollover conversion contribution is being made within 60 days after my receipt of funds from my employer plan or is being paid in a direct rollover.
- 2. During the year of this conversion, my adjusted gross income will not exceed \$100,000 (not including the converted amount or any required minimum distribution) and I am not a married person filing a separate Federal income tax return. [Note: Conversion eligibility is eliminated beginning in 2010.]
- 3. I understand that the taxable portion of this rollover conversion is includible in my gross income.

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PART	V. RC	OLLOVER CONTRIBUTION	ON OF THE MIL	LITARY DEATH GR	ATUITY AND SGLI PAYMENTS	
		ify that the following statemer	ents are true and	correct and that I am	the recipient of one or both of the following eligible	
1.	This r \$100,	•	nade within one y	ear after my receipt of	a military death gratuity payment and does not exceed	
2.	This r	ollover contribution is being r	nade within one y	ear after my receipt of	a SGLI payment and does not exceed \$400,000	
SIGNATURE OF ROTH IRA PARTICIPANT						
acknowled and employed gratuity attransaction understate contribute	edge the bloyer pland SC ion to and that the tion inf	hat, due to the complexities in plans, rollovers from a Designans, rollovers from a Designal payments, the Trustee/Comake certain that this transat these transactions are researched.	nvolved in the tax nated Roth Contr ustodian has recon action qualifies a ported to the IRS IRS. I hereby rel	treatment of rollovers ribution Account under mmended that I consul s a valid contribution S and I acknowledge ease the Trustee/Cust	-1T to treat this contribution as a rollover contribution. I between Roth IRAs, conversions from traditional IRAs an employer's plan and rollovers of the military death It with my tax advisor or the IRS before completing this and is appropriate in my individual circumstances. I that I am responsible for record keeping Roth IRA todian from any claim for damages on account of the	

Date: _____ Signature of Participant: _____

Roth IRA Rollover Documentation (10/05/2015)