

PO Box 2237 Omaha, NE 68103-2237

ACCOUNT NUMBER	

Account Owner Name First, Middle Initial, Last		Social Security Number
Funding Your Acc	ount	
• Make all checks payal	ble to Ameritrade Clearing and so North Ameritrade Place, Bellevu	Ibmit with this form to PO Box 2789, Omaha, NE 68103-2789. For overnight
 Please include your a Because contributions 	ccount number and the tax year of must be made in cash, all stock of	e, NE 68005. of the contribution on the memo section of your check. eposits must be 60-day rollovers, direct rollovers, transfers, or Roth conversions bution will be reported as a current year contribution.
 Please include your a Because contributions 	ccount number and the tax year of must be made in cash, all stock of	of the contribution on the memo section of your check. eposits must be 60-day rollovers, direct rollovers, transfers, or Roth conversions

RA Deposit Type

Personal Contributions

- Traditional IRA Limit of \$3,000 per year. If you are or will be fifty (50) years of age or older in the present calendar year, an additional \$500 "catch-up" contribution is allowed.
- Roth IRA Limit of \$3,000 per year. If you are or will be fifty (50) years of age or older in the present calendar year, an additional \$500 "catch-up" contribution is allowed.

Employer Contributions

All contributions are reported as current year contributions, according to IRS instructions for Form 5498.

- SEP Contribution
- SIMPLE Contribution from my employer.

Transfers

 Direct Transfer — Transferred from another firm where it was held with the identical account type and/or title.

Rollover Contributions

 Direct Rollover* — Irrevocable Qualifying Direct Rollover from my employer's plan 401(k), 403(b), profit-sharing plan, etc.

OR

60-Day Rollover — Irrevocable Qualifying Rollover processed less than sixty (60) days ago. Account Owner attests to the following: that the funds deposited as an Irrevocable Qualifying Rollover do not contain any amounts from a Required Minimum Distribution; that these funds are being deposited within the allowable sixty-day (60) time period; and that Account Owner is allowed only one (1) rollover per twelve-month (12) period. Account Owner further agrees to be bound by the election of this deposit as an Irrevocable Qualifying Rollover.

Roth Conversion — as the result of a distribution from a traditional IRA. Limits apply: Account Owner's income does not exceed an amount that would disallow a Roth conversion under current law.

Signature

This contribution limit information is based on Federal law as stated in the Internal Revenue Code. Please consult a competent tax advisor regarding applicable state law which may differ from Federal law.

*Please be advised that a *transfer* and a *rollover* are *not* the same thing. A *rollover* is the result of a distribution from another qualified plan or IRA. A *transfer* is the result of a direct transfer from one institution to another. If there is a doubt, contact the sending financial institution to determine if the funds were processed as the result of a distribution or a transfer.

I instruct Ameritrade Advisor Services and Ameritrade Clearing, Divisions of Ameritrade, Inc., to deposit the funds or securities into my IRA (the "Account") according to the instructions on this IRA Deposit Slip. I understand that the deposit of funds or securities into the Account may have important and possibly irrevocable tax consequences. I acknowledge that Ameritrade Advisor Services, as a discount brokerage firm, does not provide investment or tax advice; that the Account is self-directed; and that I assume full responsibility for this transaction. I release and agree to indemnify and hold harmless Ameritrade. Inc. and divisions thereof from liability for any adverse consequences that may result from this transaction.

By my signature below, I certify that the information and instructions provided, and the elections made by and through this IRA Deposit Slip, are true and correct. Ameritrade Clearing may justifiably rely upon the instructions and elections made herein and is authorized to deposit the funds or securities in the manner provided by this IRA Deposit Slip.

X Account Owner's Signature	Da	ate