



1. PERSONAL INFORMATION

Individual Retirement Account (IRA) Deposit Slip

PO Box 2789 Omaha, NE 68103-2789

Fax: 866-468-6268

Account Number:		U.S. Social Security Number: (SSN)		
Account Owner's Full Legal Name:				
Primary Phone Number:		Email Address:		
2. CONTRIBUTIONS				
 Please make check payable to TD Ameritrade Clearing, Inc. We accept checks payable in U.S. dollars and through a U.S. bank, as well as checks drawn off Canadian banks. Acceptable Foreign Instruments (checks drawn off Canadian banks). TD Ameritrade receives a referral fee from a third-party service provider on eligible currency exchange transactions. To facilitate the currency exchange process, banks receive revenue based on an assessed currency markup rate. Form can be mailed to PO Box 2789, Omaha, NE 68103-2789. For overnight delivery, send to 200 S 108th Ave, Omaha, NE 68154, or fax to 866-468-6268. Because contributions must be made in cash, all stock deposits must be 60-day rollovers, direct rollovers, transfers, or Roth conversions. Please note: This form is only necessary if you DID NOT include your Account Number, Tax Year and the Contribution Type on the memo section of your check. If no tax year indication is made, your contribution will be reported as a current-year contribution. 				
Cash Amount:		Tax Year:	Date of Deposit:	
Type of Contribution Traditional Contribution Roth Contribution SEP Employer Contribution SIMPLE Contribution Please note that SEP and SIMPLE contributions are always designated as current year contributions.				
3. ROLLOVERS/TRANSFERS				
Cash Amount:	Symbol/Asset:		Number of Shares:	
Direct Rollover* – Irrevocable Qualifying Direct Rollover from my employer's 401(k), 403(b), profit-sharing plan, money purchase plan, etc., or Roth portion of my employer's retirement plan, received into a Traditional, Rollover, SEP, or Roth IRA.				
deposited as an Irrevocable Qubeing deposited within the allow Owner further agrees to be boung Direct Transfer* – Transferred	alifying Rollover do not conta rable 60-day time period; and nd by the election of this de from another firm where it wa	ed less than 60 days ago. Account Owner ain any amounts from a Required Minimu d that Account Owner is allowed only one posit as an Irrevocable Qualifying Rollove as held with the identical account type and a Coronavirus Related Distribution (CRI	m Distribution; that these funds are e rollover per 12-month period. Account er. ed/or title.	
*Please be advised that a transfer and a ro	ollover are not the same thing. A ro another. If there is a doubt, contac	itional IRA, Rollover IRA, SEP IRA, or SIN ollover is the result of a distribution from another of the sending financial institution to determine if the ars after the initial date of funding.	qualified plan or IRA. A transfer is the result	

The contribution limit information is based on federal law as stated in the Internal Revenue Code, and is believed to be accurate. However, eligibility to contribute is dependent on your tax filing status and personal situation. Please consult a competent tax advisor concerning your specific contribution eligibility, and any applicable state laws which may differ from federal law.

I instruct TD Ameritrade Clearing, 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 TD Ameritrade, 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 TD Ameritrade, Inc. and TD Ameritrade Clearing, Inc., their divisions, officers, employees, directors, representatives, owners, affiliates, successors, and assigns from liability for any adverse consequences that may result from this transaction.



By Depositing a foreign instrument, you:

Agree to indemnify and hold TD Ameritrade and the third party service provider, harmless from any and all losses, costs, claims, or financial obligations that may arise from any act or omission with respect to your account and from any and all losses, costs, claims, or financial obligations that may arise from acting upon the instructions provided herein.

Certify that (i) you have the authority to enter into the transactions set forth above; and (ii) you understand that transactions are governed by an account agreement executed by the account owner with TD Ameritrade (the "Agreement").

You understand and agree that the third party service provider, will convert the funds into U.S. Dollars using the conversion rate and transmit the proceeds to the designated recipient. You also acknowledge and agree that TD Ameritrade cannot guarantee when the service provider will post the funds for credit, and this process may take several days, during which the funds will be held by the service provider in its bank account commingled with other assets of that provider, and while there: (i) are not protected by SIPC or TD Ameritrade's excess SIPC coverage, (ii) will not bear interest and (iii) will not be eligible for other earnings credits.

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. TD Ameritrade Clearing, Inc. 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.

Account Owner's Signature:	Date:

Original signature required; electronic signatures and/or signature fonts are not authorized.