

ROTH IRA CONVERSION FORM

EquiTrust Life Insurance Company®

7100 Westown Parkway, Suite 200

West Des Moines, Iowa 50266-2521

(866) 598-3692 Fax: (515) 226-5101

www.EquiTrust.com

Mailing Address: PO Box 14500

Des Moines, Iowa 50306-3500

1. OWNER INFORMATION

Owner	Contract Number
Social Security Number	Telephone Number

2. ROTH IRA CONVERSION REQUEST

☐ I request my Traditional IRA Contract be converted to a Roth IRA.

Note: You will receive a 1099R for the current tax year and it will list a gross distribution amount equaling your accumulation value.

Please verify with your Tax Advisor that you qualify for a Converted Roth IRA prior to sending in your request.

3. CERTIFICATION OF TAXPAYER IDENTIFICATION NUMBER

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct Taxpayer Identification Number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or U.S. resident for tax purposes.

NOTE: The IRS does not require your consent to any provision of this document other than the certification above.

4. SIGNATURE

Owner Signature	Date
Spouse Signature (if required)	Date

Spouse signature is required where community property laws are applicable. State jurisdictions with community property laws are Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington and Wisconsin.

Unless the Insurance Company has been notified of a community or marital property interest in this Contract, the Insurance Company will rely on its good faith belief that no such interest exists and will assume no responsibility for inquiry.