

Request for Transfer or Conversion to a Roth IRA

Please print or type, and mail to:

MP 63 FUND, INC.

c/o Mutual Shareholder Services

8000 Town Centre Drive, Suite 400

Broadview Heights, OH 44147-4003

Toll-free 1-877-MP 63FUN (676-3386)

Attn: Customer Service Representative

1 GENERAL INFORMATION

Name _____

Soc. Sec. No. _____

Street Address _____

City _____

State _____ Zip _____

Date of Birth _____

Daytime Phone (_____) _____

Evening Phone (_____) _____

2 TRANSFER REQUEST

(Complete only for a transfer from another Roth IRA)

I authorize and direct you, the present Custodian/Trustee of my Roth IRA, to send as a transfer the assets indicated in Section 4 below to the Custodian/Trustee named at the top of this form.

Present
Custodian/ Trustee _____

Phone _____

Street Address _____

City _____

State _____ Zip _____

Account Number _____

Five-Year Holding Period Starting Year _____

3 CONVERSION REQUEST

(Complete only for a conversion from a traditional IRA)

I authorize and direct you, the Present Custodian/Trustee of my traditional IRA, to convert assets in my traditional IRA to a Roth IRA as indicated in Section 4 below and transfer them to the Custodian/Trustee named at the top of this form. *I understand that a conversion is a taxable event and that the amount I convert will be reported as a taxable distribution to the Internal Revenue Service.*

A. Custodian/Trustee Information. Please complete the following:

Custodian/Trustee's Name _____

Traditional IRA Account # _____

Address _____

Phone _____

B. IRS Reporting. For IRS reporting purposes, I am (check one):

Less than age 59½ Age 59½ or older

*Caution: If you are age 70½ or older, it is recommended that you do **not** convert your required minimum distribution for the year.*

Attention: Conversions must be reported to the IRS. The Custodian/Trustee sending the funds will report the distribution and the Custodian/Trustee receiving the assets will report the subsequent Roth IRA contribution.

4 PAYMENT INFORMATION

A. Payment Schedule. I authorize and direct you to send my assets as follows:

- (1) Immediately liquidate all assets and send the cash proceeds.
- (2) Send cash proceeds of all investments at maturity.
- (3) Send the assets at maturity for the investments listed below.

Investment

Maturity Date
(if applicable)

(4) Other _____

B. Payment Method. I authorize and direct you to send my assets to the Custodian/Trustee named above as follows:

(1) By check. Please make check payable to the MP 63 Fund as Custodian/Trustee for

_____’s Roth IRA.

Roth IRA Account # _____

(2) Other _____

C. Roth Conversion IRA. I intend to keep these funds in a separate account as a Roth Conversion IRA.

Yes No

(Note: A separate Roth Conversion IRA should be established for conversion amounts received in different years.)

5 SIGNATURES AND CERTIFICATIONS

I certify that I have or will establish a Roth IRA with the MP 63 Fund. I agree to the terms of this form. I understand that I am responsible for determining my eligibility for all transfers or conversions and I agree to indemnify and to hold the Custodian harmless against any and all situations arising from an ineligible transfer or conversion. I acknowledge that the Custodian cannot provide legal advice and I agree to consult with my own tax professional for advice.

The Custodian agrees to accept these funds as a transfer or conversion.



Signature of Roth IRA Owner

Date



Signature Guarantee (if necessary*)

Date

*You can contact the transferring Custodian to determine if a signature guarantee is required.