

Southwest Securities, Inc. and/or Broker/Dealers for which it clears Southwest Securities, Inc. Member NYSE/FINRA/SIPC

IDA Pollover Cortification For

	IRA Rollover C	er	incation Form		
1. SWST Account Informa	ation.				
SWST Account Number (if available):					
Name:			Social Security Number:		
2. Rollover Information.					
Rollover from: Qualified Plan Tr	aditional 🗖 SEP 🗖 Sim;	ole			
Cash Amount*: \$	□ Pre	tax	☐ After tax		
If you are rolling over securities, please describe below. (Please provide the number of shares. We cannot process the request based on a dollar amount.)					
Asset Description	Quantity		Asset Description	Quantity	
*Note: Please make checks payable to Southwest Securities, Inc.					
3. Rollover Requirements	ī.				
 The funds or securities deposited into the IRA or Qualified Plan must be deposited within 60 days of receipt; Rollover deposits cannot include any distributions which are a part of a series of substantially equal periodic payments; Rollover deposits may include any distributions which represent a required minimum distribution; Rollover deposits must consist of the same assets originally distributed; In an IRA to IRA rollover, the assets cannot have been involved in a rollover in the past 12 months; Rollovers from Qualified Plans may consist of the proceeds from the sale of distributed property; Rollovers from Qualified Plans can consist only of tax deferred funds; Rollover deposits to a SIMPLE IRA can consist only of funds or securities distributed from a SIMPLE IRA 					
4. Please Read and Sign.					
	m this rollover. I furthe	r und	y requirements and assume full respons derstand that rollover contributions have x professional.		
Applicant's Signature	Date				

FOR BROKER USE ONLY

x	
Authorized Signature of Custodian	Date