

888-438-6933

Regular Mail: Annuity Service Center, P.O. Box 2708, Amarillo, TX 79105-2708

Overnight Mail: Annuity Service Center, 1050 N. Western St., Amarillo, TX 79106-7011

1 Contract Identification (Required)

Owner _____ Contract # _____

Address _____

SSN or Tax ID # _____ Phone # _____

2 Source of Funds Information (Required)

Are the funds currently in a Roth IRA? YES NO

If YES, what is the original start date of the Roth IRA? _____
MM DD YYYY

If NO, please indicate the source of funds and complete section #3 (if applicable)

Traditional IRA SEP IRA Qualified Plan (401(k), Profit-Sharing, Defined Benefit)

New Money (Non-Qualified funds) Other _____

Tax Year _____

3 Affirmation (This section for Traditional IRA to Roth IRA conversions only)

I understand federal tax law allows a traditional IRA to be converted to a Roth IRA.

I affirm that I have consulted with a tax advisor regarding my eligibility to convert my traditional IRA to a Roth IRA.

I understand that the transfer of assets will be tax-reported to the Internal Revenue Service (IRS) and I have consulted with a tax advisor regarding the tax reporting.

I understand that there are potential tax consequences in making a conversion from a traditional to a Roth IRA.

I certify that I am eligible to convert my traditional IRA to a Roth IRA, and I authorize American General Life Insurance Company or The United States Life Insurance Company in the City of New York to convert my traditional IRA to a Roth IRA on the contract number listed in section 1 of this form.

All statements made in this conversion request are true to the best of my knowledge and belief. I have read and understand and agree to the terms and conditions as shown.

Contract Owner Initials _____

4 Signature (Required)

X _____
SIGNATURE OF OWNER DATE

RETURN COMPLETED FORM TO ADDRESS ABOVE TO FAX TO (713) 620-3829