



## NEW ACCOUNT KIT

*Your complete guide to establishing a new SIMPLE IRA*

# NEW ACCOUNT INSTRUCTIONS



As part of our effort to provide you with quality service, we provide resources and tools to help you do business with us – quickly and easily. Refer to this guide for instructions to open a new account with iPlanGroup.

Additional documentation is required to open a new account and should be returned to iPlanGroup along with the New Account Application. Please read the instructions below as you complete the process. Verify that the information provided on the form is complete and accurate to avoid delays in establishing your new account.

<p><b>WHAT DO I NEED TO OPEN AN ACCOUNT?</b></p>	<p>Once you have decided to establish an account, you must complete, sign and return the New Account Application along with a copy of your driver’s license. Prior to funding the account, iPlanGroup must receive all of the necessary documents, completed and signed by all parties.</p> <p>Please submit a copy of your employer's complete 5304 SIMPLE Form or 5305 SIMPLE Form.</p>			
<p><b>IS THERE ANYTHING IMPORTANT THAT I NEED TO BE AWARE OF, WHEN COMPLETING THE APPLICATION?</b></p>	<p>Yes, please note the following:</p> <p><b>Section 1:</b> You must include a Legal Address (“Residence Address”) on the application. A Post Office Box may be used for your Mailing Address, if desired; however we must have a legal address on record as well.</p> <p><b>Section 4:</b> If listing multiple beneficiaries, please ensure that the total combined percentage of each beneficiary adds up to 100%.</p> <p><b>Section 5:</b> If married and listing someone other than your spouse as the primary beneficiary, or listing a beneficiary in addition to your spouse, please ensure that your spouse has signed the Spousal Consent portion of the form; as required by law.</p>			
<p><b>HOW ARE FEES HANDLED?</b></p>	<p>iPlanGroup has a simplified fee schedule; the one-time Account Establishment Fee of \$50.00. The Annual Administration Fee is based upon the type of account you have, how many accounts you have, and how active of an investor you are. These fees are based on value and/or type of account(s) that you have established.</p> <p>The following options are available for paying fees:</p> <ul style="list-style-type: none"> <li>• <b>Debit</b> (<i>The fees will be deducted from your IRA Account</i>)</li> <li>• <b>Credit Card</b> (<i>we accept all credit cards; a 5% charge will apply</i>)</li> <li>• <b>Check</b> (<i>Made payable to: iPlanGroup and include fee payment info on the memo line</i>)</li> </ul>			
<p><b>HOW SHOULD I SUBMIT DOCUMENTS TO IPLANGROUP?</b></p>	<table border="0"> <tr> <td style="vertical-align: top;"> <p><b>VIA FAX:</b> 440-815-2214</p> </td> <td style="vertical-align: top;"> <p><b>VIA E-MAIL:</b> Accounts@iPlanGroup.com</p> </td> <td style="vertical-align: top;"> <p><b>VIA REGULAR MAIL/OVERNIGHT DELIVERY:</b>  iPlanGroup ATTN: New Accounts 28011 Clemens Road, Suite B Westlake, Ohio 44145</p> </td> </tr> </table>	<p><b>VIA FAX:</b> 440-815-2214</p>	<p><b>VIA E-MAIL:</b> Accounts@iPlanGroup.com</p>	<p><b>VIA REGULAR MAIL/OVERNIGHT DELIVERY:</b>  iPlanGroup ATTN: New Accounts 28011 Clemens Road, Suite B Westlake, Ohio 44145</p>
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<p><b>ONCE THE ACCOUNT IS ESTABLISHED, HOW DO I FUND THE ACCOUNT?</b></p>	<p>Depending upon the method that you’ve chosen to fund the account, you must submit the following:</p> <p><b>Transfer:</b></p> <ul style="list-style-type: none"> <li>• <b>iPlanGroup Account Transfer Form</b> – completed, signed and dated. <i>Please Note: The Tax Identification Number (TIN) or Social Security Number (SSN) on the application must match the one that you list on the Account Transfer Request Form.</i></li> <li>• <b>Recent Statement</b> – You must submit a copy of your most recent statement, no more than 90 days old, from your former custodian/trustee.</li> <li>• <b>Brokerage Transfer Request Form</b> – This is only required if you are transferring from a brokerage account in-kind (meaning you are transferring stocks or mutual funds as-is without liquidating).</li> </ul> <p><b>Rollover:</b></p> <ul style="list-style-type: none"> <li>• <b>Direct Rollover Form</b> – This is required if you are completing a direct rollover from custodian/trustee to custodian/trustee. Please ensure that the rollover is properly titled (see Titling section below).</li> </ul> <p><b>Contribution:</b></p> <ul style="list-style-type: none"> <li>• <b>Contribution Form</b> – Please verify that you are eligible to make a contribution based on the current IRS MAGI Limits. Additionally, please make sure to indicate the year for which the contribution is intended.</li> <li>• <b>Check or Wire Transfer</b> – Please ensure that the funding is properly titled (see Titling section below).</li> </ul>			
<p><b>HOW DO I TITLE THE FUNDING?</b></p>	<p>iPlanGroup Agent for Custodian FBO (Your Name) IRA</p> <p style="text-align: center;"><b>OR</b></p> <p>iPlanGroup Agent for Custodian FBO (Your Account #) IRA</p>			
<p><b>CONTACT US</b></p>	<p>We are available to assist you with your account. If you have questions, please call us at 855-604-7526, weekdays between 9 a.m. and 5 p.m. eastern time.</p>			

# NEW SIMPLE ACCOUNT APPLICATION

Use this form to establish a SIMPLE IRA



**IMPORTANT:** In compliance with the USA PATRIOT Act, Federal law requires all financial institutions (including mutual funds) to obtain, verify, and record information that identifies each person who opens an account.

**WHAT THIS MEANS FOR YOU:** When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask for additional identifying documents. The information is required for all owners, co-owners, or anyone who will be signing or completing a transaction on behalf of a legal entity that will own the account. iPlanGroup will not establish an account if any of this necessary information is missing from the application we receive. Therefore, if we are unable to verify this information and an account is unable to be opened on your behalf, you will not be reimbursed for our \$50.00 establishment fee. We will return your application if any of this information is missing. If we are unable to verify this information your account will not be established and you will be subject to all applicable costs. If you have any questions regarding this application, please call iPlanGroup.

## 1. ACCOUNT OWNER INFORMATION

Name:		Social Security Number:				Date of Birth:					
						M	M	D	D	Y	Y
Residence Address:					City:			State:		Zip Code:	
Mailing Address:					City:			State:		Zip Code:	
Primary Phone:			Secondary Phone:			Email Address:					

**Marital Status:**  Single  Married  Divorced  Widowed **US Citizen:**  Yes  No

Check to indicate the IRA is established after the death of the individual named above, with either a direct rollover or transfer. If checked, complete Part 1-B of the New SIMPLE Account.

## 1-B. DECEASED IRA OWNER INFORMATION (COMPLETE THIS SECTION FOR INHERITED IRAS ONLY)

**NOTE:** Inherited IRAs May Only Be Established With Assets Acquired By A Non-Spouse Beneficiary Due To The Death of The Individual Named Below.

Name:						Date of Birth:					
						M	M	D	D	Y	Y
Social Security Number:						Date of Death:					
						M	M	D	D	Y	Y

## 2. PAYMENT OF ACCOUNT PROCESSING FEES

Select One of The Following Options For How You Would Like To Pay For Your Account Fees:

- By debiting fees from my account  By enclosed check payable to iPlanGroup  
(For account set-up and annual administration fee only)
- By Credit Card: If selecting the Charge Credit Card option, an online payment link will be sent to the E-mail address provided for the account.

## 3. ACCOUNT FUNDING INSTRUCTIONS

Select A Funding Method:

- Transfer Existing SIMPLE Account:** Complete Account Transfer Request Form. Your name and Tax ID Number must be the same on both accounts.
- 60-Day Rollover:** You will need to complete a Rollover Certification Form along with your rollover check. Only select this option if you have withdrawn funds from your SIMPLE retirement plan within the previous 60 days.
- SIMPLE Plan Direct Rollover:** You must complete a Direct Rollover Request Form along with any documents required by your the previous custodian. Select this option if you have not already requested or received a check from your existing retirement plan for us to arrange a Direct Rollover.
- Annual Contribution:** Complete Contribution Deposit Form. Select this option to make an annual contribution by check payable to iPlanGroup FBO (Client Name). We do not accept 3rd party checks. Indicate the tax year for which the contribution is to be applied to in the memo section on the front of your check. If no tax year is indicated, the contribution will be applied to the current year. Annual contributions cannot exceed the applicable IRS maximum amount. Please see [www.iPlanGroup.com](http://www.iPlanGroup.com) for additional information. You must make prior year contributions by the IRS tax filing deadline, generally April 15th of the following year.

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## 3. ACCOUNT FUNDING INSTRUCTIONS (Cont.)

Select A Funding Method:

- Elective Deferral
- Employer Match Contribution
- Employer Nonelective Contribution
- Recharacterization
- Other

Amount:	Tax Year:
Amount:	Tax Year:
Amount:	Tax Year:
Amount:	Tax Year:
Explain:	

## 4. DESIGNATION OF BENEFICIARIES (Attach An Additional Page If More Space Is Needed)

SIMPLE IRA Owner (or Inherited IRA Owner) designate beneficiaries below. If the primary or contingent status is not indicated, the individual or entity will be considered a primary beneficiary. After your death, your SIMPLE IRA assets will be distributed in equal shares (unless indicated otherwise) to the primary beneficiaries who survive you. If no primary beneficiaries are living when you die, the SIMPLE IRA assets will be distributed in equal shares (unless otherwise indicated) to the contingent beneficiaries who survive you. The interest of any beneficiary that predeceases the IRA owner terminates completely, and the percentage share of any remaining beneficiaries will be increased on a pro rata basis. You may revoke or change the beneficiary designation at any time by completing a new IRA Change of Beneficiary Form and providing it to the Administrator.

<input type="checkbox"/> Primary Beneficiary				Share Percentage:	%				
Name:		Social Security Number:		Date of Birth:					
				M	M	D	D	Y	Y
Address:		Relationship:		Phone Number:					
City:	State:	Zip Code:	Email Address:						

<input type="checkbox"/> Primary Beneficiary	<input type="checkbox"/> Contingent Beneficiary				Share Percentage:	%			
Name:		Social Security Number:		Date of Birth:					
				M	M	D	D	Y	Y
Address:		Relationship:		Phone Number:					
City:	State:	Zip Code:	Email Address:						

<input type="checkbox"/> Primary Beneficiary	<input type="checkbox"/> Contingent Beneficiary				Share Percentage:	%			
Name:		Social Security Number:		Date of Birth:					
				M	M	D	D	Y	Y
Address:		Relationship:		Phone Number:					
City:	State:	Zip Code:	Email Address:						

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## 5. SPOUSAL CONSENT (Required If You Are Married)

This section may have important tax consequences to you and your spouse. Consult with a competent advisor prior to completing. If you are not currently married and you marry in the future, you must complete a new beneficiary designation that includes the spousal consent provisions.

- I am not married - I understand that if I become married in the future, I must complete a new beneficiary designation that includes that spousal consent provisions.
- I am married - I understand that if I designate a primary beneficiary other than my spouse, or in addition to my spouse, my spouse must sign below.

By signing below, I acknowledge that I am the spouse of the Account Owner and agree with and consent to my spouse's designation of a primary beneficiary other than, or in addition to, me. I have been advised to consult a competent advisor and I assume all responsibility regarding this consent. The Administrator, nor the Custodian, has not provided me any legal or tax advice. Traditional IRA owners who reside in or whose IRA is located in a community or marital property state should review this section.

Spouses Name:	Spouses Signature: X	Date:
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## 6. ACCOUNT ACCESS AND STATEMENT DELIVERY PREFERENCES

In addition to online access, please select from the following option if you would also like a paper statement:

- Quarterly Statements by U.S. Mail - \$10.00 per quarter fee for each paper statement

## 7. HOW DID YOU HEAR ABOUT iPlanGroup?

- Newspaper
- Radio
- Television
- Advertisement
- Internet
- Referral, Name: \_\_\_\_\_
- Seminar/Workshop, Reference #: \_\_\_\_\_
- Expo/Trade Show, Reference #: \_\_\_\_\_
- iPlanGroup Representative, Name: \_\_\_\_\_
- Other, Please Explain: \_\_\_\_\_

## 8. ACKNOWLEDGEMENT & SIGNATURE

By signing this SIMPLE IRA Application, I certify that the information I have provided is true, correct, and complete, and the Administrator, iPlanGroup and Custodian, Fortis Bank may rely on what I have provided. In addition, I have read and received copies of the SIMPLE IRA Application, IRS Form 5305-SA, Disclosure Statement and Financial Disclosure, including the applicable fee schedule. I agree to be bound to their terms and conditions. I understand that if the deposit establishing the SIMPLE IRA contains rollover dollars, I elect to irrevocably designate this deposit as a rollover contribution. I understand that I am responsible for the SIMPLE IRA transactions I conduct, and I will indemnify and hold the Administrator and the Custodian harmless from any consequences related to executing my directions. I have been advised to seek competent legal and tax advice and have not been provided any such advice from the Administrator nor the Custodian.

Account Owner/Responsible Individual** Authorization and Signature		
X	Print Name	Date

\*\*Responsible Individual and the Custodial Accounts that are established for minors are registered under the minor's Social Security Number but are managed by a designated adult, often a parent or guardian, referred to as the Responsible Individual. The Responsible Individual shall have the right to determine whether a contribution to or distribution from the Custodial Account shall be permitted or required by law. This would include determining the eligibility, amount, and tax effect of any contribution to or distribution from the Custodial Account. The Responsible Individual will instruct iPlanGroup to make all account transactions, including but not limited to, contributions, distributions, investments, expenses, transfers, rollovers, and will notify us in the event the account owner's death.