

This is a PDF fillable form. To complete the form, click in an area and type.

1. Participant Information

Legal Name _____

IRA Innovations Account # & Type: _____ Deposit Amount: \$ _____

2. Deposit Type Please select a deposit type.

 Check *(Please allow five business days for checks to clear)* Wire

3. Deposit Frequency Please select a deposit frequency.

 One Time Deposit Monthly Quarterly Semiannually Annually

4. Deposit Details Please provide deposit details.

 Contribution *If a tax year is not indicated, the contribution will be treated as a current year contribution.* Current Year: _____ Previous Year: _____ Rental Income

Rental Property Address: _____

City: _____ State: _____ Zip: _____

 Mortgage Note Property Secured: _____ Unsecured Note Borrower Name: _____ Income Name of LP, LLC, JV, Trust: _____ Dividend Company Name: _____ Other Information: _____

4. Participant Signature

IRA Innovations, L.L.C. (“Administrator”) performs record keeping and administration duties in connection with Account holder’s self-directed retirement account (the “Account”) on behalf of the custodian (“Custodian”) as set forth in Account holder’s account application (the “Account Application”). The terms and conditions of this document are incorporated into the Account Application, and the terms and conditions of the Account Application are incorporated herein. I hereby certify and acknowledge that it is my responsibility to correctly characterize the nature and purpose of the deposit being made hereunder. I understand that Administrator does not provide legal, tax, or investment advice and that it is my responsibility to obtain pertinent advice and counsel from qualified third party professionals with respect to the subject matter hereof. I hereby agree to release, indemnify, and hold Administrator and Custodian harmless from any and all liability that may arise as a consequence of Administrator processing this deposit as set forth herein.

Account holder’s Signature: _____ Date: _____

IMPORTANT NOTE: To ensure proper credit, make checks payable to:
IRA Innovations, Inc. FBO [YOUR NAME] [YOUR ACCOUNT NUMBER #]