

Fair Market Valuation Form

For office use only:

Date:

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

This form is designed to assign a fair market value for assets that do not have a readily available market. Because these valuations are used to determine the fair market value of your account, a qualified, independent third party should complete valuations/appraisals set forth herein.

IRA Innovations, LLC as administrator ("Administrator") for the custodian ("Custodian") of your self-directed retirement account ("Account") is required to:

- Provide the Fair Market Value (FMV) of your Account as of December 31st of each year;
- Provide the Internal Revenue Service (IRS) with the same FMV for your Account; and
- Report all distributions from your Account during the calendar year.

To properly report the FMV of an asset, this Fair Market Valuation Form must be completed. The valuation of your Account must be provided to Administrator annually. To accurately provide these reports, please complete this form and return it to our office no later than January 21st, 2020. *If you hold more than one asset within your self-directed retirement account please complete one form for each asset.* The terms and conditions of this document are incorporated into the Account Owner's account application (the "Account Application"), and the terms and conditions of the Account Application are incorporated herein.

1. Account Owner Information (As it appears on your account application)

Legal name: _____ IRA Innovations account #: _____

2. Asset Information

Real Estate Private Equities (LLC, LP, Stock) Promissory Note/Mortgage/Deed of Trust

Other: _____

Asset Description: _____ No assets/cash only
(Property Address, Name of LLC, etc.)

3. Current Fair Market Value & Valuator/Appraiser Information

Date of Valuation: _____ **Fair Market Value:** _____

I certify that I am qualified to give an independent valuation/appraisal for this particular asset. I understand that this appraisal will be used for reporting purposes to the Internal Revenue Service. I understand that any false or misleading valuation/appraisal of any assets may result in penalties and fines for both the valuator/appraiser and the account owner.

Name: _____ Title: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Valuator/Appraiser Signature: _____ Date: _____

PLEASE INCLUDE SUPPORTING DOCUMENTATION WITH THIS VALUATION/APPRaisal

5. Account Owner Authorization

Account Owner Signature: _____ Date: _____