FAX, MAIL, UPLOAD

RETURN TO:

Return this form with any attached documents to us in your Secure Messages.
Once you log in, choose Email to send us a Secure Message.

You can also mail or fax it.

Mail
Ally Bank
PO Box 13625
Philadelphia, PA 19101-9946

Fax
Subject Line: Operations
Fax Number: 866-699-2969

IRA Contribution Form

☐ **TRADITIONAL** ☐ **SEP** ☐ **ROTH**

Please review all information below and complete the fields below,as applicable. If you have any questions regarding the information on this form, please contact one of our Customer Care Associates at 877 247-ALLY (2559)

IRA Plan Owner Information

Name

Social Security Number

Birth (Month/Year)

Address

Home Phone Number

City, State, ZIP

Daytime Phone Number

Contribution Information

Account Number

Contribution Amount

☐ **Reportable - Current Tax Year**

☐ **Reportable - Prior Tax Year**

Contribution Options for Ally Traditional and Roth IRAs:

☐ My Contribution, Check # _____ is included with this form.

☐ Transfer funds from my existing Ally Bank Account # _____

☐ These funds will be wired from the following financial institution: _____

Contribution Options for Ally SEP IRAs:

☐ These are not my personal funds but are funds provided by my employer as a SEP contribution.
(If this is an initial contribution, please include a copy of the 5305-SEP provided by your employer).

Signatures

I certify that, to the best of my knowledge, the information provided on this form is true and correct and may be relied upon by Ally Bank, the Custodian. I agree to seek the advice of a legal or tax professional, as needed. The Custodian has not provided me with any legal or tax advice, and I assume full responsibility for this transaction. I will not hold the Custodian liable for any adverse consequences that may result from this transaction.
Please Note: This form must be signed before any distributions can occur in the future from this IRA Plan.

_____ _____
Signature of IRA Plan Owner Date

If your contribution is by check, please be sure your check is made payable to : Ally Bank FBO [Your name as it appears on the IRA plan] and be sure to include your account number in the memo field on your check.

Mail your signed form and check, if applicable, to: **Ally Bank**
PO Box 13625
Philadelphia, PA 19101