



**Please complete and submit this form via one of the following methods:**

**Mail:** Madison Administration Company, One Paragon Drive, Suite 275, Montvale, NJ 07645 • **Fax:** (845) 947-1212 • **Secure Upload:** [www.madisontrust.com/uploads](http://www.madisontrust.com/uploads)

#### A. ACCOUNTHOLDER INFORMATION

Full name \_\_\_\_\_

Account number \_\_\_\_\_

#### B. RECHARACTERIZATION

I wish to recharacterize a contribution/conversion I previously made to the account listed below. I understand that it is my responsibility to ensure that this recharacterization complies with the tax laws and is within the time limits imposed by applicable tax law and to report the recharacterization on Form 8606 as required by those tax laws. I understand that the custodian will also recharacterize any income attributable to this contribution/conversion amount.

I declare and make the following irrevocable election:

Type of contribution/conversion recharacterization (Please select one)	Tax year	Contribution amount	Date originally made	Net Income Attributable	Total amount to recharacterize
<input type="checkbox"/> Roth IRA Contribution to Traditional IRA Contribution		\$	/ /	\$	\$

Roth IRA Account FROM which to withdraw amount: \_\_\_\_\_

Traditional IRA Account TO which the deposit is to be made: \_\_\_\_\_

#### C. SIGNATURE

Accountholder signature \_\_\_\_\_

Date \_\_\_\_\_