



Mailing Address:  
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Principal Life  
 Insurance Company

***In-Plan Roth Transfer –  
 No Spousal Consent Needed***  
 CTD00603

**Complete this form to transfer non-Roth accounts to Roth accounts under the plan.**  
 Participant completes Sections 1, 2 and 4.

**Section 1 – Personal Information (Please print using black ink)**

Plan Sponsor Name			Contract No./Plan ID No.	
Participant Name (First)	(Middle Initial)	(Last)	Social Security Number	I.D. Number
Participant Address (Street)		City	State	ZIP Code + 4
Day Phone		Evening Phone		

- I am a U.S. Person. (This includes a resident alien of the United States.)
  - I am not a U.S. Person. (Note: Please complete and submit the appropriate version of IRS Form W-8 when returning this form.)
- To learn more about how a U.S. Person is defined, please refer to Internal Revenue Service Publications 515 and 519, available on their website at [www.irs.gov](http://www.irs.gov), or you may request a copy by calling 1-800-829-3676. Your tax advisor can also provide assistance.

**Section 2 – Amount of In-Plan Roth Transfer (transfer)**

I would like to transfer \$ \_\_\_\_\_ (indicate a specific dollar amount) **OR** \_\_\_\_\_ % (designate a percentage from 1 to 100%).

The requested transfer amount will be prorated from all vested contribution types and investments in the account, unless instructed below. Due to market fluctuation, the amount available for transfer may be less than originally requested, in which case we will process a transfer for the maximum amount available.

**Irrevocable Benefit Election:**

You have elected to transfer non-Roth funds within the plan.  
 Your election becomes irrevocable (cannot be changed or reversed) once the transfer is processed.

**For Account Information 24 hours a day 1-800-547-7754  
 Retirement Professionals are available:  
 7 A.M. – 9 P.M. Central Time (Monday – Friday)**

**Section 3 – Income Tax Withholding – Federal and State**

Principal Life Insurance Company will not withhold taxes on in-plan Roth transfers however the transfer of pre-tax contributions and earnings thereon as well as earnings on after-tax contributions, if any, are subject to taxation. You will owe federal and state [if required] income taxes on the taxable portion of your in-plan Roth transfer. Please consult with your financial/tax advisor regarding the tax liability this in-plan Roth transfer will create.

Elections to transfer non-Roth funds to a Roth account within the plan must be received and contain all the necessary information to process the request on or before the close of market on the last open market date of the calendar year in order to receive current year tax treatment. In-plan Roth transfers containing missing or unclear instruction or are received after the close of market on the last open market date will be processed in the following tax year.

**Section 4 – Participant’s Signature**

I understand the tax consequences of this election and have consulted a tax advisor, if necessary. I certify the information I provide on this form is accurate and complete. This election cancels any prior election I made under this plan.

**State Taxation**     Yes     No    Do you have elective deferrals in the plan that have already been taxed by your state of residence?

Yes     No    If yes, have all elective deferrals accumulated in the account the plan holds for your benefit been taxed by your state of residence?

If all elective deferrals have not been taxed, what is the amount that has been taxed by your state of residence? \$ \_\_\_\_\_

**Note:** If you are unsure if any amounts have previously been taxed, please verify by contacting your Plan Administrator.

Participant Signature	Type or Print Name	Date
<b>X</b>		/ /