# **Authorization to Convert a Janus Henderson Traditional or SEP IRA**



PO Box 219109 • Kansas City, MO 64121-9109 • 800-525-1093

Use this form to convert assets from an existing Janus Henderson Traditional or SEP IRA to a new or existing Janus Henderson Roth IRA.

- Conversions that occurred on 1/1/2018 or later may not be recharacterized.
- Please print or type using black ink.

First Name

• **Important Note:** If you are establishing a new Janus Henderson Roth IRA, a Janus Henderson IRA Application must accompany this form.

**Questions?**Call us at **800-525-1093** 

In a Hurry?

Last Name

Process online at janushenderson.com

- or -

Fax form to **877-319-3852** 

## Step 1 - Please provide the following information.

Social Security Number	Date of Birth	
Address		
City	State	Zip Code
Preferred Phone Number (required)	Additional Phone N	umber (optional)
2 - List the Janus Henderson IRA Please list the Janus Henderson fund(s)	· · ·	
Please list the Janus Henderson fund(s) currently invested in will remain the same	and account number(s) you vertee	wish to convert. The fund(s) you are d unless otherwise indicated below.
Please list the Janus Henderson fund(s)	and account number(s) you vertee	wish to convert. The fund(s) you are
Please list the Janus Henderson fund(s) currently invested in will remain the same	and account number(s) you ve. All shares will be converted	wish to convert. The fund(s) you are d unless otherwise indicated below.
Please list the Janus Henderson fund(s) currently invested in will remain the same Existing Traditional or SEP IRA Fund/Acc	and account number(s) you ver. All shares will be converted count Number	wish to convert. The fund(s) you are dunless otherwise indicated below.  Conversion % or Amount

Middle Initial

Step	3 -	Tell us how you would like to invest your conversion assets. (check one)
		Open a new Janus Henderson Roth IRA.  A Janus Henderson IRA Application must accompany this form or an account cannot be established.
		Deposit the conversion assets into a corresponding fund(s) under my existing Janus Henderson Roth IRA. I realize I will be combining conversion and annual contributions if my existing Roth IRA contains only annual contributions.
		Existing Roth IRA Account Number
		I have an existing Roth IRA but would like these conversion assets held separately from my Roth annual contributions. I understand a new account number will be assigned for my conversion assets.  A new Janus Henderson IRA Application is enclosed.
Step	4 -	Tell us what changes you would like to make to your Automatic Investment Program.
	will	bu currently participate in the Automatic Investment Program with your Traditional or SEP IRA, <b>this option</b> be cancelled on your IRA unless otherwise indicated below. Your AIP may generally be modified or icelled at any time by visiting janushenderson.com or by calling a Janus Henderson representative.
		Please continue the Automatic Investment Program on my Traditional or SEP IRA.  Note: If you convert all assets and your fund reaches a zero balance this option is not available.
		Please re-establish my Automatic Investment Program to the new Roth IRA requested in Step 3.
		Please transfer my Automatic Investment Program to an additional Roth IRA because I want to keep my contributions separate from any conversion assets.
		Note: Your new Roth IRA must meet the initial investment minimum of \$100 per fund when you choose to invest \$50 or more on a monthly basis through our Automatic Investment Program.

# Step 5 - Let us know if you would like income tax withheld on your IRA conversion. (check one)

If this step is not completed, IRS regulations require federal income tax to be withheld at a rate of 10% from your conversion. Any applicable mandatory state income tax will also be withheld at your state's required minimum rate.

Form W-4P/OMB NO. 1545-0074

**Important Notice:** Any conversion from your IRA is subject to federal income tax withholding unless you elect not to have withholding apply. Since the entire conversion may be included in your income that is subject to federal income tax, the withholding will apply to the entire conversion.

☐ I do not want any federal income tax withheld on my conversion. I understand that I will be responsible for

paying the income tax (if any) which may be due as a result of my conversion. If required by my state, mandatory withholding for state income tax will be taken at my state's required minimum rate.
Please withhold federal income tax on my conversion at a rate of% (10% is the minimum withholding rate). I understand that Janus Henderson will remit any income tax that has been withheld to the Internal Revenue Service on my behalf. *If required by my state, mandatory withholding for state income tax will be taken at my state's required minimum rate.

\*Amounts previously withheld may only be refunded by the Internal Revenue Service. Amounts withheld may be subject to a 10% early withdrawal penalty in addition to income tax.

#### Notes:

- If no box is selected, federal income tax will be taken at a default rate of 10% along with any mandatory state income tax for Traditional, SEP and SARSEP IRAs.
- Any amounts withheld cannot be reimbursed by Janus Henderson.
- If you elect not to have withholding apply to your conversion, or if you do not have enough federal income tax withheld from your conversion, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient. Even if you elect not to have federal income tax withheld, you are liable for payment of federal income tax on the taxable portion of your conversion. Whether or not you elect to have withholding apply, you are responsible for any federal income taxes, state and local taxes, and any penalties that may apply to your conversion.
- This conversion will be reported to the IRS and the state of your residence, if applicable, as taxable income.
   The address on the account registration at the time of the conversion will determine the state of residence for state withholding purposes.

### Step 6 - Please read and sign below.

I have read and understand the conversion rules and conditions below. I have met the requirements for making a conversion from a Traditional or SEP IRA to a Roth IRA. **Due to the important tax consequences associated with converting funds to a Roth IRA, I have been advised to consult with a tax advisor.** All information provided by me is true and correct and may be relied on by the custodian (State Street Bank and Trust Company) and Janus Henderson. I assume full responsibility for this conversion transaction and will not hold the custodian or Janus Henderson liable for any adverse consequences that may result.

### Rules and conditions applicable to conversion taxability:

- A conversion from a Traditional or SEP IRA to a Roth IRA is treated as a taxable distribution. Accordingly, any
  deductible contributions made to the IRA and any earnings must be reported on your tax return as gross
  income and taxed.
- I also understand that my required minimum distribution (RMD) for the current year is not eligible for conversion.
- I hereby designate this as a conversion contribution.

X	
Signature of Owner	Date

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# **IRA Application**



PO Box 219109 • Kansas City, MO 64121-9109 • 800-525-1093

Use this form to establish a Traditional IRA, Roth IRA or SEP IRA at Janus Henderson.

Please do not use this form to establish an Inherited IRA or a

Non-Retirement account at Janus Henderson.

- You must be a US Citizen or a US Resident Alien residing in the United States or a US Territory to open a Janus Henderson account.
- Important Note: To help the government deter money laundering and terrorism funding activities, all financial institutions are required to obtain, verify and record information that identifies each person who opens an account. Please read the important disclosures in Step 13.
- Read the prospectus carefully before you invest or send money.
- · Please print or type using black ink.

#### Questions?

Call us at 800-525-1093

### In a Hurry?

Establish account online at janushenderson.com

- or -

Fax form to 877-319-3852

You must be a current Janus Henderson retail shareholder or a member of their immediate family or household to open a new account directly with Janus Henderson (immediate family member is defined as: parent, sibling, spouse, child, grandparent, grandchild, aunt/uncle, niece/nephew, cousin, great-grandparent, or great-grandchild and same relationships by marriage).

Please select the statement that applies to you and provide the information requested to establish proof of your

## Step 1 - Provide eligibility to open a Janus Henderson account. (check one)

eligibility:		
□ I am an <b>existing</b> Janus Hender - or - □ I am one of the following:	rson investor. My account number	is:
☐ Immediate Family Me	mber   Household Me	mber
Please provide the following information provided, Janus Henderson will be unal	_	n shareholder. If the relevant information is not
First Name	Middle Initial	Last Name
Address		
City	State	Zip Code

Remember to sign on the last page

First Name	Middle Initial	Last Name
Social Security Number	Date of Birth	
☐ Please send me information	n about adding an authorized person	to act on my account.
Parent or Guardian's Informa	tion (must be completed if applicatio	n is for a minor)
First Name	Middle Initial	Last Name
Social Security Number	Date of Birth	
	you like on your account? (a	
Mailing Address (If you provid		

Step 2 - What type of IRA would you like to open? (check one)

Step	5	- How would you like to fund your IRA? (check one)
		Annual contribution (select contribution year)
		□ <b>Prior Year</b> (maximum \$5,500 per tax year, \$6,500 if age 50 or over)
		□ Current Year (maximum \$6,000 per tax year, \$7,000 if age 50 or over)
		Transfer of an existing IRA from another financial institution
		(Please enclose a Janus Henderson IRA Transfer Form)
		Rollover of an existing IRA*
		Direct Rollover from Employer Retirement Plan
		☐ Check enclosed ☐ Assets will be sent to Janus Henderson separate from this application.
		Inherited IRA - Call 800-525-1093
		Conversion of a Janus Henderson Traditional IRA to a Janus Henderson Roth IRA
		(Please enclose an Authorization to Convert a Janus Henderson Traditional IRA Form)
		Recharacterization of a Janus Henderson IRA
		(Please enclose a Janus Henderson Recharacterization Form)
		SEP Employer Contribution
		(select contribution year)
		□ Current Year □ Prior Year
	*IR	S Announcements 2014-15 and 2014-32 limit rollovers from an IRA to another (or the same) IRA to <i>one in any</i>
		month period, regardless of the number of IRAs you own. The "One-Rollover-Per-Year" rule does not apply to
		transfers, conversions, recharacterizations, or direct rollover to or from a qualified plan. Please seek fessional tax advice regarding questions about any IRA distributions.
Step	6	- How would you like to make your initial fund purchase? (check one)
		Electronically - Make a one-time withdrawal of \$ from the bank account listed in Step 9.
		Check - Make your personal check, Direct Rollover check, or Cashier's check payable to Janus Henderson
		and enclose it with your completed application.
		Check - Direct Rollover check will be sent to Janus Henderson separate from this application.

# Step 7 - Which Janus Henderson funds would you like to own?

See available Janus Henderson Funds on last page.

The minimum initial investment is \$1,000 per fund or \$100 per fund when you choose to invest \$50 or more on a monthly basis through our Automatic Investment Program described in Step 10.

Fund Name	% or \$ Amount
Fund Name	% or \$ Amount
Fund Name	% or \$ Amount
Fund Name	% or \$ Amount
Fund Name	% or \$ Amount
Fund Name	% or \$ Amount
Fund Name	% or \$ Amount
Fund Name	% or \$ Amount
Fund Name	% or \$ Amount
Fund Name	% or \$ Amount
*Certain retirement plans such as SEP IRAs may not be subject to prospectus.	o stated minimums, as defined in the fund's
8 - Subsequent Account Agreement. (optional)	
By checking this box, I agree that the information contained in this subsequent accounts by telephone, excluding retirement accounts	
□ I Agree □ I Disagree	

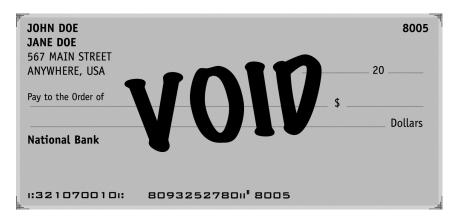
# Step 9 - Provide your bank information.

Please provide your bank information if you are enrolling in **Janus Henderson's Automatic Investment Program** and/or would like to make future **electronic purchases and redemptions**.

## Please attach a preprinted voided item.

Need an alternative to a voided item? Please contact a Janus Henderson representative at 800-525-1093.

This is a: ☐ Checking Account ☐ Savings Account



Bank account owner(s), if different from all Janus Henderson account owner(s), are required to sign below to add Purchase options. To add Redemption options, if all bank owner(s) are different from the Janus Henderson account owner(s), fill out the Bank Options Form.

X	
Signature of Bank Account Owner	Date
X	
Signature of Bank Account Owner	Date

# **Step 10** - Do you want to invest on a regular basis through Janus Henderson's Automatic Investment Program?

Enroll in our Automatic Investment Program (AIP) and we'll automatically transfer a set amount (minimum \$50) from your bank account directly into the Janus Henderson fund(s) of your choice. If you would like to enroll, please provide your bank information in Step 9. Your AIP may generally be modified or cancelled at any time by visiting janushenderson.com or by calling a Janus Henderson representative.

									Fre	equency*
Fur	nd Name			Invest	ment	Amount* (	\$50 min.)			Monthly Every Other Month
 Sta	rting Month			Invest	ment	Date*			_ 🗆	Quarterly
	nd Name					Amount* (	\$50 min.)		Fre	equency* Monthly Every Other Month Quarterly
Sta	rting Month			Invest	ment	Date*				
 Fur	nd Name			Invest	ment	Amount* (	\$50 min.)		Fre	equency* Monthly Every Other Month Quarterly
Sta	rting Month			Invest	ment	Date*				
IRA pur yea	h of each month.  A contributions made chased. If you want	· e throu	ugh an AIP v	will be c	redite	ed as contr	ibutions fo	or the ye	ar in	\$50 will be made on the which the shares are s) should be coded as prior
	January		February			March		□ <b>A</b> pri	l (m	ust be on or before the 15th)
For	SEP-IRA accounts	, pleas	se indicate t	ype of c	ontril	oution:				
	Employer		Employee	ı						
	Please send me in	forma	tion about J	anus He	ender	rson's Payr	oll Deduc	tion Pro	gran	١.

# Step 11 - Who would you like to name as primary beneficiary(ies) on your account?

Please designate the individual(s) named below as primary beneficiary(ies) of this IRA. If more than four primary beneficiaries are needed, please attach a letter of instruction. If a percentage has not been indicated, equal distributions will be made to the appropriate beneficiaries. If applicable, any beneficiary who passes away before the account owner will have their share divided proportionally among the surviving primary beneficiaries.

Beneficiary #1  ☐ Spouse ☐ Non-Spouse	Name	% of Account
☐ Trust ☐ Other Entity ☐ Minor*	Date of Birth or UA Date of Trust	Social Security or Taxpayer ID Number
	*Custodian's full name if beneficiary is a recannot name yourself as custodian.	minor. Appoint one person as a custodian. You
Primary Beneficiary #2 □ Non-Spouse	Name	% of Account
☐ Trust ☐ Other Entity ☐ Minor*	Date of Birth or UA Date of Trust	Social Security or Taxpayer ID Number
	*Custodian's full name if beneficiary is a cannot name yourself as custodian.	minor. Appoint one person as a custodian. You
Primary Beneficiary #3 □ Non-Spouse □ Trust	Name	% of Account
☐ Other Entity ☐ Minor*	Date of Birth or UA Date of Trust	Social Security or Taxpayer ID Number
	*Custodian's full name if beneficiary is a cannot name yourself as custodian.	minor. Appoint one person as a custodian. You
Primary Beneficiary #4  ☐ Non-Spouse ☐ Trust	Name	% of Account
☐ Other Entity ☐ Minor*	Date of Birth or UA Date of Trust	Social Security or Taxpayer ID Number
	*Custodian's full name if beneficiary is a recannot name yourself as custodian.	minor. Appoint one person as a custodian. You
		Total (must equal 100%):

# Step 12 - (Optional) Name the secondary (contingent) beneficiary(ies) on your account.

Please designate the individual(s) named below as secondary beneficiary(ies) of this IRA. If more than four secondary beneficiaries are needed, please attach a letter of instruction. If a percentage has not been indicated, equal distributions will be made to the appropriate beneficiaries. If applicable, any beneficiary who passes away before the account owner will have their share divided proportionally among the surviving beneficiaries. Secondary beneficiaries receive assets **ONLY** if no primary beneficiary survives you. Do **NOT** list any primary beneficiaries here.

Secondary		
Beneficiary #1  ☐ Spouse ☐ Non-Spouse	Name	% of Account
☐ Trust ☐ Other Entity ☐ Minor*	Date of Birth or UA Date of Trust	Social Security or Taxpayer ID Number
	*Custodian's full name if beneficiary is a cannot name yourself as custodian.	minor. Appoint one person as a custodian. You
Secondary Beneficiary #2  ☐ Non-Spouse ☐ Trust	Name	% of Account
☐ Other Entity ☐ Minor*	Date of Birth or UA Date of Trust	Social Security or Taxpayer ID Number
	*Custodian's full name if beneficiary is a cannot name yourself as custodian.	minor. Appoint one person as a custodian. You
Secondary Beneficiary #3  ☐ Non-Spouse ☐ Trust	Name	% of Account
☐ Other Entity ☐ Minor*	Date of Birth or UA Date of Trust	Social Security or Taxpayer ID Number
	*Custodian's full name if beneficiary is a cannot name yourself as custodian.	minor. Appoint one person as a custodian. You
Secondary		
Beneficiary #4  ☐ Non-Spouse ☐ Trust	Name	% of Account
☐ Other Entity ☐ Minor*	Date of Birth or UA Date of Trust	Social Security or Taxpayer ID Number
	*Custodian's full name if beneficiary is a cannot name yourself as custodian.	minor. Appoint one person as a custodian. You
		Total (must equal 100%):

Remember to sign on the last page

## Step 13 - Please read and sign below.

#### By signing below, I:

- (1) Establish an Individual Retirement Account (IRA) pursuant to the Internal Revenue Code of 1986, as amended, and in accordance with all the terms of the Custodial Agreement on Form 5305-A, 5305-SEP or 5305-RA (whichever is applicable); (2) certify that all contributions to the IRA meet the requirements of the Code governing such contributions; (3) appoint State Street Bank and Trust Company, or its successors, as custodian on the account; (4) agree that I have received, read, accepted and specifically incorporated herein the Custodial Agreement on Form 5305-A, 5305-SEP or 5305-RA (whichever is applicable) and the IRA Disclosure Statement; (5) agree to promptly give instructions to the custodian necessary to enable the custodian to carry out its duties under the Custodial Agreement; (6) agree that this account will be subject to the Custodial Agreement as amended from time to time; and (7) agree that the terms, representations and conditions in this application and the prospectus, as amended from time to time, will apply to this account and any account established at a later date.
- Certify that I have received and read the current prospectus of the Fund(s) in which I am investing. I certify that I have the authority and legal capacity to make this purchase and that I am of legal age in my state of residence. I agree to read the prospectus for any Janus Henderson fund into which I request an exchange.
- Authorize the Fund and its agents to act upon instructions (by phone, in writing, online or by other means) believed to be genuine and in accordance with procedures described in the prospectus for this account or any account into which exchanges are made. I agree that neither the Funds nor the transfer agent will be liable for any loss, cost or expense for acting on such instructions, provided the Fund employs reasonable procedures to confirm that instructions communicated are genuine. I understand it is my responsibility to review account statements and inform Janus Henderson of errors posted to my account. I understand Janus Henderson reserves the right not to correct errors not brought to the company's attention within a reasonable time period. I understand that anyone who can properly identify my account(s) may be able to make telephone transactions on my behalf.
- Authorize the Fund and its agents to issue credits to and make debits from the bank account information set forth on this application. I agree that Janus Henderson shall be fully protected in honoring any such transaction. I also agree that Janus Henderson may make additional attempts to debit/credit my account if the initial attempt fails and that I will be liable for any associated costs. I agree that if I submit bank information for a bank that does not participate in the Automated Clearing House (ACH) or provide information for a nonbank account, Janus Henderson will price my purchase at the net asset value next determined after Janus Henderson receives good funds. All account options selected will become part of the terms, representations and conditions of this application.
- Authorize the Fund and its agents to establish check and telephone redemption privileges and telephone and
  online purchase privileges on my account. Authorize the Fund and its agents to establish telephone and online
  redemption and purchase privileges on my account. I also authorize the Fund and its agents to reinvest all
  income dividends and capital gains distributions in the distributing fund. I authorize the Fund and its agents to
  establish redemption privileges by electronic transfer to the bank account set forth on this application.
- Certify that (if I am married and reside in a community property or marital property state) my spouse has knowledge of and consents to the designation of a non-spouse beneficiary on this account. (Please consult with a legal advisor regarding your beneficiary designation. Neither the custodian nor the plan sponsor will be liable for any consequences resulting from failure to accurately represent spousal consent.)

## Step 13 - (Continued)

- Consent to the 'householding' delivery of any fund prospectuses, shareholder reports or other documents (except transaction confirmations and account statements) that I am required, by law, to receive. This means Janus Henderson will generally deliver a single copy of most annual and semiannual reports, prospectuses, and newsletters to investors who share an address, even if the accounts are registered under different names. My participation in this program will continue indefinitely unless I contact Janus Henderson.
- Important Note: To help the government deter terrorism funding and money laundering activities, all financial institutions are required to obtain, verify and record information that identifies each person who opens an account. So that we may comply with these requirements, we ask you to please complete Steps 3 and 4 in their entirety when opening an account with Janus Henderson. The omission of this information will result in the return of your application and investment. Please note that your ability to perform transactions in your account may also be affected or otherwise delayed if Janus Henderson cannot easily verify the accuracy of the required information in Steps 3 and 4. If, after 30 days, Janus Henderson is still unable to verify the required information, your account may be closed and your shares redeemed at the next available NAV.

#### Under penalty of perjury, I certify that:

- 1. The Social Security Number(s) shown on this application is/are correct.
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding; or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report all interest or dividends; or (c) the IRS has notified me that I am no longer subject to backup withholding. Cross out item 2 if you have been notified by the IRS that you are currently subject to backup withholding.
- 3. I am a US Citizen or a US Resident Alien residing in the United States or a US Territory.
- 4. I am exempt from reporting per the Foreign Account Tax Compliance Act (FATCA).

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

I am eligible to invest directly with Janus Henderson because I, and/or a member of my immediate family or household, currently hold accounts directly with Janus Henderson.

	X	
	Signature of Owner or Parent/Guardian, if Applicable	Date

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## **Janus Henderson Funds**

PO Box 219109 • Kansas City, MO 64121-9109 • 800-525-3713

## U.S. Equity

Contrarian Fund (61)

Forty Fund (46)

Growth & Income Fund (40)

Large Cap Value Fund (35)

Mid Cap Value Fund (67)

Research Fund (48)

Small Cap Value Fund (65)

Small - Mid Cap Value Fund (85)

U.S. Growth Opportunities Fund (72)

U.S. Managed Volatility Fund (26)

#### **Fixed Income**

Absolute Return Income Opportunities Fund (90)

Developed World Bond Fund (71)

Flexible Bond Fund (49)

Global Bond Fund (80)

High-Yield Fund (57)

Multi-Sector Income Fund (89)

Short-Term Bond Fund (52)

#### **Alternatives**

Diversified Alternatives Fund (87)

#### **Money Market**

Government Money Market Fund (38)

Money Market Fund (37)\*

## Global/International Equity

Asia Equity Fund (83)

Dividend & Income Builder Fund (33)

Emerging Markets Fund (39)

Emerging Markets Managed Volatility Fund (32)

European Focus Fund (47)

Global Equity Income Fund (53)

Global Income Managed Volatility Fund (84)

Global Life Sciences Fund (59)

Global Real Estate Fund (31)

Global Research Fund (41)

Global Select Fund (62)

Global Technology Fund (60)

Global Value Fund (64)

International Managed Volatility Fund (30)

International Opportunities Fund (58)

International Small Cap Fund (63)

International Value Fund (88)

Overseas Fund (54)

#### **Asset Allocation**

Adaptive Global Allocation Fund (44)

Balanced Fund (51)

Global Allocation Fund - Conservative (78)

Global Allocation Fund - Growth (76)

Global Allocation Fund - Moderate (77)

Value Plus Income Fund (36)

\*Positions in Money Market Fund other than those beneficially owned by natural persons may no longer be opened. If this fund is selected to open an account that is not beneficially owned by a natural person, the purchase will be deposited into Government Money Market Fund.

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