



Principal Funds
 PO Box 8024
 Boston, MA 02266-8024

Overnight Mail:
 30 Dan Road
 Canton, MA 02021-2809

800-222-5852
 PrincipalFunds.com

Roth IRA Conversion/Deconversion Application

- This form is to be used only when converting a Principal Funds Traditional IRA to a Roth IRA, or when deconverting a Principal Funds Roth IRA back to a traditional IRA.
- Please type or print clearly.

1. Account Registration

Please provide your current address and account information so we can ensure that your account is up to date.

Principal Life Insurance Company for the Benefit of:

Owner's First Name, Middle Initial, Last Name		Social Security Number	
Date of Birth (MM/DD/YYYY)	<input type="checkbox"/> U.S. citizen	<input type="checkbox"/> Resident Alien	Country of Citizenship
Legal Street Address (no P.O. Box Addresses)			
Mailing Address (if different from above), City, State, Zip			
Daytime Phone Number		Evening Phone Number	
E-mail Address			

Electronic Delivery (eDelivery) Consent

By providing your email address, you consent to receive all mutual fund documents including: regulatory documents (prospectuses, annual and semiannual reports), quarterly statements, tax forms, and proxy statements via eDelivery.

Mutual fund documents will be available to you online at principalfunds.com. You will be notified by electronic mail when a document becomes available for you to view. All documents posted to the website will be available in HTML format and/or Portable Document Format (PDF). If using the PDF version, the Adobe Acrobat Reader software required to view them is available free of charge from Adobe's website at adobe.com.

Email Address (required for eDelivery):

If there are any documents you would prefer to receive in paper form, please check the applicable box(es) below to indicate which items you would not like to receive by eDelivery:

- Regulatory Documents** (prospectuses, annual and semi-annual reports)
- Quarterly Statements**
- Tax Forms**
- Proxy Statements**

Your consent will remain in effect until revoked by you. If at any time eDelivery is not possible, you will be notified by mail with instructions to restore the service. Delivery of mutual fund documents following initial notification will be mailed to your address of record in paper form if service is not restored. You must have a valid, active email address to be eligible for this service. You may change your consent, update your email address, or opt to receive paper communication at any time by visiting us at principalfunds.com/edelivery or by calling us at 1-800-222-5852 Monday-Friday 7:00 am to 7:00 pm Central Time.

2. Current Principal Funds Traditional IRA

Please complete this section to authorize Principal Funds to convert "in kind" all or part of your Principal Funds Traditional IRA assets to your Principal Funds Roth IRA with Principal Life Insurance Company as Custodian.

Principal Funds Traditional IRA Account Number _____

Fund Name

Fund Number

Full Amount Partial Amount \$ _____ OR _____
Number of Shares

Fund Name

Fund Number

Full Amount Partial Amount \$ _____ OR _____
Number of Shares

Fund Name

Fund Number

Full Amount Partial Amount \$ _____ OR _____
Number of Shares

3. Conversion Account Information

All assets will be converted "in kind."

Check one:

Please add the converted assets to my existing Principal Funds Roth IRA Account Number _____

I wish to establish a new Principal Funds Roth IRA.

Note: Converting a Traditional IRA to a Roth IRA may have significant tax consequences. We strongly recommend that you consult with a qualified legal/tax advisor to discuss your specific situation.

4. Deconversion Account Information

Please complete this section if you are requesting a DECONVERSION of a previously converted Roth IRA back to a traditional IRA.

Current Roth IRA account # _____

Previous traditional IRA account # _____

Have you made Roth IRA contributions to this account (in addition to the converted amount)? Yes No

5. Tax Withholding

I have reviewed the below "Withholding Notice". If tax withholding applies, it will be taken from the distribution amount requested. If CDSC applies, it will be taken above the distribution amount requested.

Federal Tax Withholding

I understand that 10% of my distribution will be withheld for Federal Income Tax unless I make a different election below. No tax will be withheld from a Roth IRA unless instructed to do so.

- I elect **NOT** to have federal income tax withheld.
- Please withhold federal income tax at the following percentage: _____ % (whole percentage only)

State Tax Withholding

Check one of the following boxes to indicate whether you wish to have state income taxes withheld. State tax withholding may apply even if you do not check a box below. Also, some states do not offer state tax withholding. Refer to the instructions for specific information concerning your state.

Please indicate your state of residence for state tax withholding purposes: _____

- I elect **NOT** to have state income tax withheld.
- Please withhold state taxes in the amount of \$ _____ (dollar amount only)

Note: You are urged to discuss distributions from a Roth IRA with your tax advisor before making a withholding election. Many Roth IRA distributions are partially or wholly nontaxable.

Withholding Notice

Tax withholding elections are designated with each transaction request. Withholding elections for Systematic Withdrawal plans remain in effect until instructions are received to change it.

Federal Tax Withholding

Distributions from your IRA are subject to federal income tax withholding in the amount of 10% unless you elect not to have withholding apply. Distributions from your Roth IRA are not subject to income tax withholding unless you elect to have withholding apply.

State Tax Withholding

If federal income tax withholding is applied to your distribution, your state may also require state income taxes to be withheld. State laws regarding tax withholding are subject to change at any time without notice. Please see your tax advisor for additional information. Depending on your state of residency, the following rules apply:

If your state of residence has:	Your options for state tax withholding are:
Mandatory State Withholding	If you elect federal tax withholding, state tax withholding <u>will</u> be applied, and will be calculated based on your state's applicable minimum requirements. You may also elect a specific dollar amount, however, your requested amount must be equal or greater than your state's minimum withholding requirement, otherwise we will apply your state's applicable minimum withholding requirement.
Non-Participatory State Withholding	You may not elect state tax withholding. State tax withholding is <u>not available</u> even if your state has state income taxes.
Voluntary State Withholding	You may elect voluntary state income tax withholding. You must provide a specific dollar amount to be applied for state tax withholding.

Regardless of whether you elect to have federal, and if applicable, state tax withholding apply, you are liable for the payment of federal income tax, any state or local taxes, and any penalties which may apply to your distribution. You also may be subject for tax penalties under the estimated tax payment rules if your estimated tax payments and withholding are not adequate. IRS Publication 505 should be reviewed, especially by new retirees.

6. Please Read and Sign

I hereby establish a Principal family of funds Roth IRA account, if electing a conversion transaction, for the purpose of converting my Principal Funds IRA assets in accordance with the rules outlined in IRC Section 408A. I appoint Principal Life Insurance Company as custodian. I have previously made investment direction and beneficiary designation elections for the IRA account from which this transaction originates, and hereby reaffirm these elections for my Roth IRA (my traditional IRA in the case of a deconversion). I have received the prospectus, Custodial Agreement, IRA Disclosure Statement, and this application and agree to all terms and conditions. I consent to an annual maintenance fee and other applicable account fees as provided in the Custodial Agreement. I understand the investment objective(s) of the Principal Funds in which my account is invested and believe such to be compatible with my investment objective(s). I understand that the amount converted to a Roth IRA will be subject to a 10% income tax withholding requirement unless I elect not to have withholding apply. I acknowledge that compliance with IRS requirements concerning Roth IRA conversions and deconversions is my responsibility, and I agree to obtain such legal and tax advice as may be necessary to make this decision. I hereby release and hold harmless Principal Life Insurance Company and any of its affiliates from any liability for any loss, damage, or injury I may sustain as a result of this transaction. I agree to be contacted by Principal Shareholder Services ("Principal") or Principal's authorized vendor(s) at the contact number(s) I've provided to Principal or its authorized vendor, for services such as: account maintenance, verification of instructions and/or client information, other product or service offerings, etc., as applicable. **I certify under penalty of perjury that 1.) I am a U.S. person (which includes a U.S. resident alien unless otherwise indicated on this application) and 2.) That the Social Security Number shown in Section 1 is correct. (The Internal Revenue Service does not require your consent to any provision of this document other than the certification regarding your Social Security Number.)**

Principal Account Owner's Signature or Authorized Signer

Date