



2001 Spring Road, Suite 700
 Oak Brook, IL 60523
 800.618.6177 Individual Service Team
 866.388.5464 Institutional Service Team
 800.560.1288 Advisor Service Team
 630.472.5392 Fax
distributions@mtrustcompany.com

2019 REQUIRED MINIMUM DISTRIBUTION (RMD)

To complete this form, you will need your:

- Millennium Account Number
- Date of Birth
- Method of Distribution
- Social Security Number
- Tax Withholding Election
- Banking Information (if funds are to be wired or sent by ACH)

To be used for non-Roth IRAs and Qualified Retirement Plan account holders who have reached the age of 70½. Please print after completion. For assistance with this form, please contact a Client Service Specialist. (Hours: Monday - Friday, 8:00 am to 4:30 pm CT.)

A Account Information

For a name change, please submit legal documentation (i.e., marriage certificate, divorce decree, etc.).

► Name: _____
 Social Security/Tax ID No.: _____ Last 4 digits of Millennium Account No.: _____
 Daytime Phone No.: _____ Date of Birth: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 E-mail Address: _____

All fields are required in section A.

Please supply the contact information we have on file for you in order for us to process this request without delays.

Please complete and return this form if you wish to direct Millennium Trust Company, LLC ("Millennium") to compute and/or distribute your 2019 Required Minimum Distribution (RMD). **The fee for calculating the RMD is \$75.** Normal fees will apply for other services provided. Please be aware that you may be assessed a 50% penalty by the Internal Revenue Service if your RMD is not taken as required. If you reached the age of 70½ in 2018 or before, you are required to take your 2019 RMD no later than December 31, 2019. If you turn 70½ in 2019, you have until April 1, 2020 to take your 2019 RMD distribution.

B Account Type

Please select one: ► Traditional IRA SEP IRA SIMPLE IRA Solo 401(k)/PSP/MPP 403(b)

Note: If this request is for a distribution of an inherited account, please complete the appropriate IRA or Qualified Plan Distribution form. For a decedent's RMD or a death distribution this form should not be used.

C Important Information

Return this form no later than December 1st for RMDs required by December 31st or March 1st for RMDs required by April 1st as applicable. If forms are received after these dates, a \$75 expedited processing fee may be assessed. In order to ensure that liquid funds are available by the deadline of December 1st or March 1st, please review your investment(s) and request a liquidation if needed. Submit this form to Millennium early enough to allow adequate time for processing liquidation requests.

If you do not allow sufficient time for Millennium to liquidate your investment(s), receive and distribute the proceeds to you by December 31st (or the following April 1st for the first time RMDs) you may miss the IRS deadline for RMDs and you may incur serious tax consequences.

Please continue to page two to complete this form.



D Amount Of RMD And Method Of Distribution

Please indicate how you would prefer to calculate your RMD: ▶

- I have calculated my RMD amount:
- I direct Millennium to calculate my 2019 RMD amount through the calculation method I have selected below. If an option is not selected, Millennium will use the Uniform Lifetime Table. (Calculation fee will apply.)
 - Calculate my RMD using the standard IRS Uniform Lifetime Table (to be used unless you qualify for spousal exception).
 - Calculate my RMD using the Joint and Last Survivor Table (spousal exception). I am eligible to have my minimum distribution calculated using the joint life expectancy of my spouse and I because my spouse is more than 10 years younger than I am and is the sole primary beneficiary of my retirement account.

Spouse's Name:

Spouse's Date of Birth:

If Millennium was not the custodian of your account before 12/31/2018, we require you to provide the 12/31/18 fair market value (FMV) in order for us to calculate the RMD amount.

12/31/2018 FMV: \$

If you do not have sufficient cash in your Retirement Account ("Account") to cover the minimum distribution amount required, please indicate which asset(s) you would like to liquidate or re-register to you In-Kind (in order of priority) below.

1. List all assets to be liquidated or re-registered below. (Cash investments will be automatically liquidated.) **Note:** All liquidation requests are subject to processing times based on current volumes at the time this request is submitted. *Execution price is not guaranteed.* Due to market fluctuations, you may wish to execute your publicly traded security transaction(s) online to ensure desired execution timing. **A current asset valuation is required to process this request. Please attach a copy of your most recent sponsor-provided asset statement.**

Liquidation or Re-Registration fees may apply. ▶

| Liquidate | or | Re-Register | Asset Name/Description | Dollar Amt/All |
|-----------------------|----|-----------------------|------------------------|----------------|
| <input type="radio"/> | | <input type="radio"/> | | |
| <input type="radio"/> | | <input type="radio"/> | | |
| <input type="radio"/> | | <input type="radio"/> | | |
| <input type="radio"/> | | <input type="radio"/> | | |

If additional space is needed, please attach a separate page.

Millennium will request funds be sent by check unless otherwise indicated. ▶

2. Select the method that funds should be sent to Millennium from assets sold.
 - Check (Upon receipt of funds, a 5 business day hold is required before funds are disbursed.)
 - Wire Transfer (Additional third-party fees may apply.)

Millennium is not responsible if the asset has its own required delivery method.

Please continue to page three to complete this form.

E Payment Delivery

Any taxable distribution request over \$200,000 will be processed as a Direct Deposit to Bank (ACH) or Wire.

Please choose one payment delivery option from your Millennium IRA. If a check is selected, it will be sent to you via U.S. Mail.

- Mail a check to the address of record.
- Mail a check to the following address. **(Notary Required - See Page 4.)**

Payee:
 Address:
 City: State: Zip:

Standard NACHA Operating Rules apply.

- Direct Deposit to Bank (ACH) - Please submit a voided check (starter checks are not acceptable) and provide the financial institution's ACH instructions below. **Note: For accounts without checks, submit a preprinted deposit slip or a letter from the other financial institution, on letterhead and signed by an officer.** This documentation must include the account title, account number, ABA routing number and account type. **(Notary is required if funds are being sent to an account that is not registered in the name of the Account Owner.)**
- Wire funds - Not available for Systematic payments. *Additional fees may apply.*
Note: Account Owner may be contacted for further verification of the banking information provided. **(Notary is required if funds are being sent to an account that is not registered in the name of the Account Owner.)**

Please ensure the accuracy of your financial institution's ACH/wire instructions. An additional fee will be charged if a ACH/wire is rejected due to the incorrect instructions.

Banking Information - Complete if you selected Direct Deposit to Bank (ACH) or Wire funds above. *If banking information is entered but a selection is not made, funds will be sent via Direct Deposit (ACH).*

Bank Name:
 Bank Address:
 City: State: Zip:
 ABA Routing No.: Bank Account No.:
 Name on Bank Account:
 Type of Account: Checking Savings

F Tax Withholding Election

Federal Withholding Election

Internal Revenue Service ("IRS") regulations require this notice to be given to you each time you request a distribution from your Account.

The distribution(s) you receive from your Account are subject to Federal Income Tax withholding, unless you elect not to have withholding apply. You may be liable for payment of any Federal Income Tax due on distribution(s) from your Account, regardless of whether or not you elect to have taxes withheld. In addition, if your payments of estimated tax and withholding are not adequate, you may be subject to tax penalties under estimated tax payment rules. You are urged to consult your tax advisor with respect to your election of Federal Income Tax withholding.

Please select one of these options. If no selection is made, taxes will automatically be withheld from the distribution(s) at a rate of 10% for IRAs and 20% for Qualified Plans.

- I **DO NOT** want Federal Income Tax withheld from my distribution(s).
- Withhold 10% for Federal Income Taxes from my distribution(s).
- Withhold _____ % *(minimum 10%).*
- Withhold \$ _____ for Federal Income Taxes from my distribution(s). *(minimum 10%)*

State Withholding Election

State income tax withholding may be required from your distribution. In some cases, you may elect not to have withholding apply, or you may elect to increase the rate of withholding. In other cases, state income tax withholding may not be available. **Refer to the State Income Tax Withholding Information sheet located in the back of this form for specific information concerning your state's withholding rates.**

State income tax withholding is based on the state of residence, federal income tax withholding election and account type. Millennium may not be able to process a distribution without state income tax withholding if the state requires it. **Note: We will only withhold state income tax for the states listed on the State Income Tax Withholding Information sheet.**

F Tax Withholding Election Continued

State Withholding Election Continued

I declare my permanent state of residence is: _____ and that my election should reflect the requirements of that state. If a permanent state of residence is not noted, we will default to the state of residence listed on file at Millennium.

Please select one of these options. If no selection is made, we will withhold your state's requirement from your distribution(s).

- ▶ I **DO NOT** want state income tax withheld from my distribution(s).
- Withhold my state's minimum requirement. (Only applicable if a minimum tax rate exists for your state.)
- Withhold this amount: _____ % or \$ _____
We will withhold at least your state's minimum requirement as listed on the State Income Tax Withholding Information sheet.

G Fees

To avoid delays in the processing of your request, please ensure that there is sufficient cash in the account to cover the requested distribution and any applicable fees. Please refer to your fee schedule for all applicable fees.

H Recipient's Acknowledgement And Signature

Please make the above requested distribution(s). I have consulted my tax advisor concerning the taxable effect of the requested distribution(s) and agree to be fully responsible for the same.

Please sign and date to authorize this distribution.

▶ Recipient's Signature: _____ Date: _____

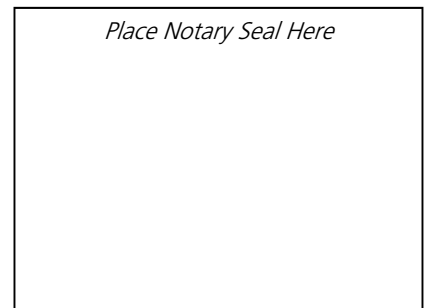
I Notary Public

A Notary Public is required if requesting funds over \$10,000 that will be sent to an address other than the account owner's current address of record, an account not held in the name of the account owner, or if the proceeds will be sent to an ex-spouse due to divorce. Forms received without the required Notary will be rejected.

Sworn to and subscribed before me on:
_____, 20____.

Notary Public: _____

My Commission Expires: _____



All requests requiring a Notary or certified legal documentation must be received by mail unless uploaded to Millennium through a secured portal.

J Plan Administrator/Trustee Authorization And Signature

For Distributions from an Account that is NOT an IRA:

As the Plan Administrator and/or Trustee, I authorize Millennium Trust Company, LLC to make the RMD as requested. I understand that it is my responsibility to ensure that the plan meets the Required Minimum Distribution requirements of the Internal Revenue Code. Note: if multiple plan administrators and/or trustees, all signatures are required.

Print Name of Plan Administrator and/or Trustee

Print Name of Plan Administrator and/or Trustee

Plan Administrator and/or Trustee Signature

Plan Administrator and/or Trustee Signature

Date

As of 01/01/19

The general information provided in the chart below is to help you understand state income tax withholding requirements for Individual Retirement Account (IRA) distributions. **While Millennium Trust makes every effort to obtain information about state tax laws from sources believed to be reliable, we cannot guarantee the accuracy or timeliness of state tax withholding information because state tax laws are subject to constant change and interpretation. You should contact your tax advisor regarding your tax withholding elections, and to answer any questions regarding your state's withholding laws.**

Millennium Trust may be required to withhold state tax from your distribution based upon state tax law for your state of residency. Your state of residency is determined by the legal address of record on your account or as provided in the Tax Withholding Election section of the Distribution form. In some cases, you may elect not to have withholding apply, or you may elect to increase the rate of withholding. In other cases, state tax withholding is not supported by Millennium.

- You may specify a percentage or dollar amount to be withheld for state income tax by completing the appropriate section on the distribution form. Some states require a minimum percentage or flat dollar amount. We will withhold at least the state-required minimum amount when such a minimum applies.
- You may instruct us not to withhold state income taxes only when your state of residence allows such an election.
- For any states not listed below, Millennium Trust will not withhold state income tax even if instructed to.
- If you are required to submit your state W-P4 Withholding form, it can be found on your **state's** government website not the IRS website.

| State of residence | State income tax withholding information | State of residence | Minimum state income tax rate is <i>at least</i> |
|------------------------------|--|------------------------|---|
| AZ, CO, D.C., MD, NJ, NY, VA | State income tax will be withheld ONLY if you instruct us to withhold it whether or not you elect to have federal income tax withheld. See below for exception. D.C.: Required if a <i>total</i> distribution is elected or taken by default | AR | 3% of the gross distribution amount |
| KS, MA, ME, NE, OK, VT | State income tax withholding is required when federal withholding is elected or taken by default. | CA | 10% of the <i>federal withholding</i> amount when elected |
| CA, DE, OR | State income tax withholding is required when federal withholding is elected or taken by default, unless you instruct us not to withhold state income taxes. | CT | 6.99% of the gross distribution amount |
| AR, CT, IA, MI, NC | State income tax withholding is required. However, if you believe you will not have a balance due on your state income tax return, you may elect not to have state income tax withheld by submitting your states W-4P form. Consult your tax advisor for guidance on all of the limitations/restrictions for state tax withholding. | D.C. | 8.95% of the gross total distribution amount |
| | | DE, IA, KS, ME, NE, OK | 5% of the gross distribution amount |
| | | MA | 5.05% of the gross distribution amount |
| | | MI | 4.25% of the gross distribution amount |
| | | NC | 4% of the gross distribution amount |
| | | OR | 8% of the gross distribution amount |
| | | VT | 30% of the <i>federal withholding</i> amount when elected |
| | | AZ, CO, MD, NJ, NY, VA | There is no minimum tax rate. You may provide any amount. |