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ASSET IMPAIRMENT NOTIFICATION

This form should be completed to direct a valuation change related to an asset impairment, defined as an identifiable event that demonstrates that a complete or significant loss has been sustained on an asset being held in your Millennium Trust Company ("Millennium") account. After completion of this form, please print, sign and return with all supporting documentation associated with the change in valuation. Please note that Millennium will notify you if additional information is needed or if we received conflicting information. If you do not provide supporting documentation and you direct Millennium to attempt to obtain support documents and information, this process could take up to 3 months.

For assistance with this form, please contact a Client Service Specialist at 800.618.6177. (Hours: Monday-Friday, 8:00 am to 4:30 pm Central Time.)

A Account Owner Information

Account Owner Name:

Millennium Account No.:

Daytime Phone No.:

E-mail Address:

- Please select one: ▶ Account Type::
- Traditional IRA
 - Inherited Traditional IRA
 - SIMPLE IRA
 - Roth IRA
 - Inherited Roth IRA
 - SEP IRA
 - Non-Retirement Custodial Account
 - Solo 401(k)/Profit Sharing Plan (PSP)

B Asset Information

Asset Name:

Requested Valuation:

Briefly describe why the valuation of this asset should be changed:

- Please select one: ▶ Asset Status:
- Bankruptcy
 - Litigation
 - Receivership
 - In Liquidation
 - Restructuring
 - Worthless
 - Other:

Please continue to page two to complete this form.



C Required Supporting Documentation

Please select one: ► **I am submitting the following documentation in support of the Requested Valuation listed above:**

- Bankruptcy, Foreclosure, or other Court Documents
- Investment Sponsor or Receivership Correspondence - Must include confirmation of requested valuation in Section B) and an explanation of what occurred to cause the company/asset to decline in value.
- Final K-1 - Must include confirmation of all contributions and distributions since inception and/or all previous K-1s.
- Final Valuation Statement - Must include confirmation of all contributions and distributions since inception.
- Other:

- I have no supporting documentation.** I agree to pay a special non-refundable fee of \$150 and hereby direct Millennium to attempt to obtain support documents and information. I acknowledge and agree that Millennium is not responsible in any way, and retains no liability, for the valuation of this asset, and there is no guarantee that Millennium will be able to obtain appropriate support documents and information. I understand that Millennium will notify me if it is unable to obtain appropriate support. Enclosed is a check for the special fee made payable to Millennium Trust Company.

D Asset Contact Information

Please add all contacts ► **Sponsor/Company:**
that are applicable.

Contact Name:

Address:

City:

State:

Zip:

E-mail:

Daytime Phone No.:

► **Receiver/Trustee:**

Firm Name:

Address:

City:

State:

Zip:

E-mail:

Daytime Phone No.:

► **Promissory Notes/Mortgages:**

Borrower Name:

Address:

City:

State:

Zip:

E-mail:

Daytime Phone No.:

Borrower's Tax ID/Social Security No.:

Please continue to page three to complete this form.

E Efforts to Receive Payment

If additional lines are necessary, list on a separate sheet titled "Addendum A".

- ▶ **Please provide details regarding the efforts you have made to receive payment from the Sponsor or Borrower.**

Please select yes or no.

- ▶ Have you received any distributions or liquidations of this asset outside of your Millennium account or collected any collateral associated with this asset? Yes No

If yes, please describe including amounts and dates.

F Requested Direction

For purposes of this section, an "impaired asset" is an asset that is worthless or pending recovery. An Asset Pending Recovery is defined as an asset currently involved in litigation, receivership, bankruptcy or some other type of restructuring or legal proceeding where the market value and potential for recovery is generally uncertain.

- Please select one: ▶ I am requesting Millennium to change the valuation of this asset in my Millennium account to the above Requested Valuation. If this asset is processed as an Asset Pending Recovery (APR) or worthless, I request Millennium to distribute the asset to me at whichever value is greater - the current fair market value or \$10 if the value is \$0 or unknown. Millennium will no longer custody this asset in my account. **Note:** Since Millennium is resigning on this asset, I understand and agree to not have federal and state tax withholding taken out of this disbursement.
- I am requesting Millennium to change the valuation of this asset in my Millennium account to the above Requested Valuation and continue to custody this asset. I acknowledge that I will be charged account fees in accordance with the current fee schedule

Please continue to page four to complete this form.

G Account Owner's Certification & Signature

I certify that the information I have provided is true and accurate. I acknowledge and agree that: (1) Millennium is not responsible in any way and has no liability for the valuation reported for this asset; (2) Millennium has not provided investment, tax or legal advice; and (3) to the extent I deemed appropriate I have consulted my investment, tax or legal advisor. I indemnify Millennium Trust Company, LLC, its affiliates, successors, and assigns, from any and all liability arising from this request.

If I have elected to have Millennium continue to custody this asset, I understand and agree that any potential recovery on this asset is to be paid directly to my Millennium account and not to me personally. If any recovery is paid to me directly, I will inform Millennium of the amount and date of payment received. I understand that payments I receive directly from my IRA and/or Solo 401(k)/PSP may be eligible for rollover to a retirement plan.

If the asset is being disbursed, I authorize and direct Millennium as my Custodian to make the distribution. I understand that I am responsible for all federal, state and local taxes, as well as estimated tax payments and penalties, if applicable.

Please sign and date
as Account Owner. ▶

Signature: _____

Date: