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IRA DISTRIBUTION REQUEST

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)

Request a one-time, tax-reportable withdrawal or to set up systematic payments from your IRA. For assistance with this form, contact a Client Service Specialist during regular business hours, Monday - Friday, 8:00 am to 4:30 pm CT.

A Account Owner Information

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.

Name:

Millennium Account No.:

Social Security/Tax ID No.:

Daytime Phone No.:

Date of Birth:

Address:

City:

State:

Zip:

E-mail Address:

Please select one account type.



Traditional IRA

SIMPLE IRA

Roth IRA

SEP IRA

Inherited Traditional IRA

Inherited Roth IRA

Please submit an Address Change Request form (#OPR-009) if box is checked.



Check here if requesting a change of address with Millennium Trust Company ("Millennium"). To verify the current address on file, refer to your most recent Millennium statement or contact our client service department.

Note: If you have a distribution pending, your distribution may be subject to a 10 business day hold after Millennium Trust completes the processing of your Address Change Request.

Please continue to page two to complete this form.



B Reason For Distribution

Please select only ONE reason for your distribution from Section 1, 2, or 3.

1. From a Traditional IRA, SIMPLE IRA, SEP IRA or Inherited Traditional IRA only:

- Normal Distribution.** - Select if the taxpayer is age 59½ or older.
- Early (Premature) Distribution.** - Select if the taxpayer has **not** reached age 59½.
 - Distributions before the age 59½ may be subject to ordinary income tax and may also be subject to a 10% federal penalty tax unless you meet an IRS exception.
 - A distribution from a SIMPLE IRA taken within two years of the date the first contribution was made may be subject to a 25% penalty tax unless you meet an IRS exception.

Note: If you believe an exception may apply to the early withdrawal penalty, you should consult your tax advisor to determine if you need to submit IRS Form 5329 to the IRS.
- Disability Distribution.** - Select if distribution is due to permanent disability within meaning of IRS Code Sec 72(m)(7). Consult your tax advisor for assistance. **(Attach Physician's Statement.)**
- Distribution from an Inherited Traditional IRA. (Certified Copy of Death Certificate required if not already on file with Millennium.)**

2. From a Roth IRA or Inherited Roth IRA only:

- Qualified Distribution from a Roth IRA.** - Select if the five-year holding period has been completed and the taxpayer has reached age 59½, if the taxpayer is disabled (**attach Physician's Statement**), or for a distribution from an Inherited Roth IRA. **(Certified Copy of Death Certificate required if not already on file with Millennium.)**
- Roth IRA Distribution, Exception applies.** Consult your tax advisor for assistance. Select if it is not known if the five-year holding period has been completed and the taxpayer has reached age 59½, if the taxpayer is disabled (**attach Physician's Statement**), or for a distribution from an Inherited Roth IRA. **(Certified Copy of Death Certificate required if not already on file with Millennium.)**
- Early Distribution from a Roth IRA.** - Select if the taxpayer has **not** reached age 59½.

3. Direct Rollover to a Employer Sponsored Qualified Plan - For direct Trustee to Trustee IRA transfers, contact the receiving institution to request a transfer. This form will not facilitate a direct Trustee to Trustee transfer process of an IRA.

- Complete information below and skip Section E. **NOTE:** It is your obligation to ensure that the Qualified Plan named below will accept the rollover of your benefit payment. Payment Delivery via check only. **(If the mailing address below is different than the address on record with Millennium Trust then a Notary is required - See Page 5.)**

An additional fee may apply if check for rollover funds are returned to Millennium or if tax reporting corrections are necessary.



Check Payable To:

Qualified Plan Name:

Qualified Plan No.:

Mailing Address:

City:

State:

Zip:

Please continue to page three to complete this form.

C Amount And Method Of Distribution

If funds are invested in assets other than cash (or cash equivalents), the timing of liquidation will vary depending on where the funds are invested. **Millennium will request funds from liquidations be sent to Millennium by check unless otherwise indicated in Section C2.** Once received, the check is held 5 business days to clear before the distribution can be issued.

- Please select one. ▶
- Total distribution of my entire account and close account. *(All assets will be liquidated.)*
 - Partial distribution of \$ _____ . *(Tell us what to sell in Section C1 if insufficient cash.)*
 - Systematic Payment (Please complete Section D.)

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.

***If any asset cannot be liquidated, we will inform you and then you can direct us as to what portion of the asset, if any, you want re-registered to you. Please contact your investment sponsor with questions about their inability to liquidate an asset for cash.**

2. Select the method that funds should be sent to Millennium from assets sold.
- Millennium will request funds be sent by check unless otherwise indicated. ▶
- 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.

D Systematic Payments

Only complete this section if you checked the "Systematic Payment" box in Section C. This distribution form needs to be received by the 1st of the month in which the first systematic payment is to begin. Please note that checks received are subject to a 5 day hold and may impact the availability of dollars to fund this recurring distribution. Systematic payments, including your tax withholding election, will continue until Millennium receives written direction to cancel.

Note: Systematic payments with a set dollar amount will be discontinued if there are three consecutive failed attempts due to insufficient cash.

- If cash funds are not available at the time of distribution, your check or ACH will not be issued as scheduled. ▶
- New/Set Up
 - Change of Instructions (Complete entire form.)
- Amount of systematic payment: \$ _____
- Starting Month: _____ Day Preferred: 5th 15th
(If Day is not selected, Millennium will default to payments being issued on the 15th of the month.)
- Frequency of future payments: Monthly Quarterly

E Payment Delivery

Please select your delivery method from the following four options. If a check is selected, it will be sent to you via U.S. Mail

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

- ▶ Mail a check to the address of record.
- ▶ Mail a check to the following address. *(Notary Required - See Page 5.)*

Payee:
 Address:
 City: State: Zip:

Standard NACHA Operating Rules apply.

- ▶ Direct Deposit to Bank (ACH) - For distributions for \$2,000 or more, 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 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

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%.

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.

- ▶ 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 for specific information concerning your state's withholding rates.**

Please continue to page five to complete this form.

F Tax Withholding Election Continued

State Withholding Election Continued

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 located in the back of this form.**

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 Distribution Authorization & Certification

Applicable account distribution and/or closing fees will be assessed and if this distribution brings your account balance to zero, your account will be closed.

I authorize and direct Millennium as IRA Custodian to make the above withdrawal. I understand that I am responsible for all federal, state and local taxes, as well as estimated tax payments and penalties, if any. I understand that IRS regulations require tax withholdings at 10% for distributions from non-Roth IRAs unless I elect otherwise.

I understand that distributions from a Roth IRA that are attributable to either converted amounts, retirement plan rollover basis or earnings may be taxed as ordinary income and subject to a 10% early withdrawal penalty unless certain requirements are met.

I understand that all non-Roth IRA distributions will generally be taxed as ordinary income and may be subject to a 10% early withdrawal penalty if taken before age 59½. If I am over age 70½, I accept full responsibility for withdrawing from my Traditional, Rollover or SEP IRA the minimum required distribution required by the Internal Revenue Code.

I certify that all of the information I have provided on this form is correct. I have consulted my tax advisor concerning the taxable effect of this withdrawal; and I certify that Millennium Trust has not provided me with tax, investment or legal advice. I indemnify Millennium Trust Company, LLC, its affiliates, successors, and assigns, from any and all liability arising from this withdrawal.

Please sign and date to authorize this distribution.

Account Owner's Signature: _____
Date: _____

I Notary Public

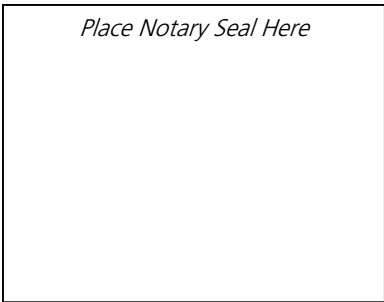
A Notary Public is required if requesting funds over \$10,000 that will be sent to an address other than the account owner's current address of record, an account not held in the name of the account owner, or if the proceeds will be sent to an ex-spouse due to divorce. Forms received without the required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

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.