

# Approval for Distribution for IRAs, SEP/IRAs, Roth IRAs and Education Savings Accounts

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DCG Use Only  
 G&T \_\_\_\_\_  
 SS# \_\_\_\_\_  
 Plan # \_\_\_\_\_  
 Code 400 \_\_\_\_\_

Account Executive's Name

Phone Number

- Traditional IRA   
  SEP/IRA   
  Roth IRA   
  Education

## 1. Tell Us About Yourself. (Please Print)

\_\_\_\_\_

Name

\_\_\_\_\_

- -

Address

Social Security Number

\_\_\_\_\_

City, State, Zip

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Investment Firm & Account Number

Date of Birth

Daytime Phone Number

## 2. Reason For Distribution. (Please select only one choice.)

- Normal      Recipient is over age 59 ½.  
 Disability      Physician's statement or social security certification necessary.  
 Annuitized      Recipient receives distributions, which are part of a series of substantially equal periodic payments (not less frequent than annually) based on life expectancy of account holder.  
 Premature      Recipient is under age 59 ½ and not disabled. A 10 % penalty may result.  
 Death      Beneficiary of deceased account holder completes form. A certified copy of death certificate with raised seal and beneficiary's social security number, address, and date of birth are required. If the beneficiary is an estate, Letters Testamentary/Administration are required. If beneficiary is a Trust, a copy of the Trust is required.  
 Divorce      Enclose a certified copy of the divorce decree with raised seal along with former spouse's social security number, date of birth, and letter of instruction.  
 Contribution Recharacterization      Recharacterizing an IRA contribution to another type of IRA for the year \_\_\_\_\_.  
 Education      Distributions used for qualified higher education expenses. These expenses include tuition fees, books, supplies, equipment, amounts contributed to a qualified state tuition program, and room and board.  
 Removal of Excess Contribution, Removal is being made  Before  After tax filing deadline. If after, please provide amount of earnings \$ \_\_\_\_\_. Please note: Earnings are subject to tax withholding.

## 3. Where Should We Send Your Distribution?

- Home Address  
 Journal to Account Number \_\_\_\_\_

Account Type (please check)

- Traditional IRA   
  Roth IRA   
  Retail Account

Other. Please provide us with mailing and deposit instructions.

**4. Tell Us About Your Distribution. Check the appropriate boxes.**

**Total Distribution**

- A.  Liquidate
- B.  Securities (certificate form)

**Partial Distribution**

- A.  Cash Only \$ \_\_\_\_\_
- B.  Securities Only (Please list below)
- C.  Cash **and** Securities \$ \_\_\_\_\_ (List securities below)

**Securities to be reregistered or liquidated:**

Liquidate/ Reregister (Please circle one)	How Many (Shares, Units, or \$ Amount)	Name of Asset	Account Number	Broker Held	Fund/ Agent	Held
L / R	_____	_____	_____		<input type="checkbox"/>	<input type="checkbox"/>
L / R	_____	_____	_____		<input type="checkbox"/>	<input type="checkbox"/>
L / R	_____	_____	_____		<input type="checkbox"/>	<input type="checkbox"/>

Frequency of Distribution (please circle one choice) Monthly Quarterly Semi-Annually Annually One Time

Note: Periodic distributions will begin when form is received by trustee.

**5. Important Information Regarding Tax Withholding. (To Roth IRA Holders: Federal Income Taxes only apply to the earnings on non-qualified distributions.)**

Federal Income Taxes must be withheld from distributions unless the recipient elects not to have withholding apply. You may elect out of this withholding by checking the appropriate box below. If no election is made, we must withhold taxes at the required flat 10% rate. If you live in a state that requires state withholding that amount may be withheld also. Penalties may be incurred under the estimated tax rules if your withholding and/or estimated tax payments are not sufficient.

Choose One.

- Option 1 I elect to have no income tax withheld from my retirement account distribution.
- Option 2 I want income taxes withheld from my retirement account distribution at a rate of \_\_\_\_\_% plus an additional \$\_\_\_\_\_.
- Option 3 I want income taxes withheld in the amount of \$\_\_\_\_\_.

If you have indicated above that you are taking partial distributions, your withholding election shall remain in effect until it is revoked by you.

**6. Notice for Recipients Over 70 ½ Years Old. (Does Not Apply to Education Savings Accounts or Roth IRAs).**

I understand there is a minimum annual distribution requirement based on life expectancy and the IRS may impose a severe penalty for failure to take a minimum payment.

**7. Your Signature and Date. (If Education Savings Account, responsible individual must sign if designated beneficiary is a minor.)**

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Authorized Office Approval: \_\_\_\_\_