

Instructions for completing the Roth IRA Request Form

(Page 1)

Roth IRA Distribution Request Form

Please complete all sections on this form.



Please mail completed form to:
Matrix Trust Co.
Attn: IRA Dept.
717 17th St., Ste 1300
Denver CO 80202

Or Fax to (303) 893-0688
If you have questions about
your account or this form,
call (888) 947-3472
M-F 7:30am - 4:30 pm (Mountain)
mscsiraservice@broadridge.com

If you don't know your account number, you can leave this blank. We will complete it based on the name and SSN you provide.

Please complete all other information in this section. Make sure you provide a number where you can be reached during normal business hours, in case there is a question.

If you are closing your account, just check "Full Distribution"—no dollar amount is required. If you wish to only take part of the money from the account and leave it open, check "Partial Distribution" and provide the amount you wish to withdraw.

Section One—Account Registration and Information

Account Number _____ Name _____
Address Line 1 _____
Address Line 2 _____
City/State/ZIP _____ Daytime Phone _____
Date of Birth _____ Social Security Number _____

Section Two – Amount of Distribution

Partial Distribution Gross distribution amount: \$ _____
 Full Distribution (Full Balance. Account will close)
A signature guarantee must be provided on all requests for distributions of \$25,000 or more

Instructions for completing the Roth IRA Request Form

(Page 1 continued)

Section Three—Reporting and Tax Withholding

Type of Distribution (Check Only One)

- Non-Qualified Distribution** (Account has been open less than 5 years, and no other exception* applies.)
- Qualified Distribution** (Account has been open for 5 years or more AND you are over age 59 ½ or disabled**)
- Early distribution with Exception** (Account has been open less than 5 years, but you are over age 59 ½ or disabled or another exception* applies)
- Transfer** to a Roth IRA at another financial institution***
- Death Distribution** to Beneficiary (Please attach death certificate)
- Transfer Due to Divorce** (Please attach divorce decree)

* See IRS Publication 590 for a complete list of exceptions

** See IRC §72(t)(2)(A)iii for IRS definition of disability. It is the recipient's responsibility to determine eligibility.

*** Note that funds cannot be rolled over to a Roth 401(k) or Roth 403(b) account

Federal Withholding Election (If no election is selected, no federal or state taxes will be withheld)

- I do not want to have Federal Income Tax withheld
- I want Federal Income Tax withheld at the rate of _____% or \$_____ (must be 10% or greater)

State Withholding Election

- I do not want to have State Tax withheld
 - I want State Tax withheld at the rate of _____% or \$_____
- Please specify state, if other than state of residence in section 1. _____

Type of Distribution.

- If funds are going to you directly, or to a personal bank account in your name, you will select “Qualified” (Tax code “Q”) ONLY if the account has been open for 5 years or more, AND you are over age 59 ½ or your are disabled as defined by the IRS (Note: this definition is different than the one used by the Social Security Administration).
- If the account has been open for LESS than 5 years, but you are disabled or another exception applies, you will select “Early Distribution with Exception.” (Tax code “T”) (It will be your responsibility to provide proof of a qualifying exception to the IRS. See IRS Publication 590 for a complete list of exceptions).
- If funds are going to another Roth IRA at a different institution, select “Transfer”. (Note: Funds from a Roth IRA are not eligible for rollover to another 401(k) or other employer-sponsored retirement plan.)
- If you are requesting to close the account due to death or divorce, please contact MG Trust directly for more information

Roth IRA

Tax withholding. You can choose to have federal and/or state income tax withheld from a taxable distribution (not applicable to transfer or rollover disbursements). Distributions from Roth IRAs are generally not taxable, although you may request withholding to apply to your overall tax liability, if you wish. If you do not make a selection, we will default to no federal or state income tax withholding.

Instructions for completing the Roth IRA Request Form

(Page 2)

Section Four – Payment Method (Choose only one)

- Mail Check to Address of Record listed in Section One
 If Direct Transfer to another Roth IRA, company name and address to mail check:

Receiving Account no. _____

- Overnight** Check to Address of Record or address listed above
Bill to: Account no: _____ FedEx UPS Other _____

(No overnight service will be provided without a valid shipping company account number)

- Wire Transfer** (\$20.00 fee applies; same day fund transfer)
 ACH (No additional charge; 1-3 business day direct deposit)

Bank Account Information for ACH or Wire:

Name of Bank _____

ABA Routing Number _____

Name on Account to credit* _____

Bank Account Number _____

Checking Savings

** IRA holder must be owner or joint owner of receiving account
please attach a voided check or other bank document to ensure proper account credit to your account*

Payment Method. If you simply wish for a check to be sent to you at the address you provided in section 1, check the first box only and proceed to section five.

If funds are being sent via check to another financial institution, please provide all address and account information necessary in this section to ensure funds are credited correctly. Please contact the receiving institution to determine if there are additional documents they require to accompany the disbursement check, and include those documents with your other forms when you send them to MG Trust.

Overnight mailing will be provided ONLY if you supply a valid shipping company account number to bill for this service.

For ACH or wire transfer only, please provide routing and account information in this section. It is highly recommended that you provide a voided check to verify this information. Please contact your bank or credit union if you are not sure what information to provide for this service.

Instructions for completing the Roth IRA Request Form

(Page 2 continued)

Section Five – Signature

The undersigned hereby authorizes and directs the Custodian to distribute funds from the above referenced account in accordance with the instructions provided within this request.

The undersigned further certifies: That this distribution is being requested for the reason described above, and acknowledges review of the *Notice of Withholding on IRA Distributions*. The Custodian may rely on the certification without further investigation or inquiry. And, that the Custodian shall incur no liability for acting on this distribution request or its subsequent processing.

Notice of Federal Withholding on IRA Distributions: The distributions you receive from your IRA are subject to Federal Income Tax Withholding unless you elect not to have the withholding apply. You may elect not to have withholding apply to your distribution by checking the appropriate box in section two. If you elect not to have withholding apply to your distribution, or if you do not have enough Federal Income Tax withheld from your distribution, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient.

Notice of State Withholding on IRA Distributions: State Income Tax will be withheld from your distribution according to the attached State Income Tax Withholding Requirements chart, unless otherwise instructed. (Not applicable in all states.)

Signature of Account Owner

Date

A signature guarantee must be provided on all requests for distributions of \$25,000 or more

Signature Guaranteed by:

Please read the information about this document, and the notices of federal and state withholding on IRA distributions, and sign and date where indicated.

For any disbursement of \$25,000 or more, we are required by charter to obtain a Medallion Signature Guarantee. Please contact your bank, credit union or other financial services provider to obtain this guarantee stamp. Note: a notary or other signature verification service is not acceptable.

This is only required if the balance we are paying is \$25,000 or greater. If your request is for less than this amount, you may disregard this box.