

**IMPORTANT INFORMATION**



- Looking to request a recurring distribution? Please submit the [Recurring Distribution Form](#).
- Distribution requests submitted through myEQUITY are typically processed within 1-2 business days.
- Distribution requests submitted using the PDF form are typically processed within 7-10 business days.
- Additional documents or instructions may be required to complete this request.
- Equity Trust Company may require verbal verification from you before processing the distribution that could delay the processing time.
- Asset distributions may require a [Fair Market Valuation](#) form and could delay processing of the distribution request.
- Liquidation requests may require a Sale Direction of Investment form and could delay processing of the distribution request.
- Processing and/or disbursement fees may apply. Funds must be available for processing fees.
- Checks, precious metals, and documentation will be sent to your mailing address of record. If delivery options require an address other than a Post Office Box, the legal address of record will be used. Precious metals will be shipped via the depository's default carrier. If your address of record has recently changed or needs to be updated, please visit [www.myEQUITY.com](http://www.myEQUITY.com).

**1 ACCOUNT HOLDER INFORMATION**

ACCOUNT HOLDER NAME	ACCOUNT NUMBER
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**2 TYPE OF DISTRIBUTION (Select only one option)**

If no distribution election is selected, Equity Trust Company will default the selection based upon the account holder age and account type.

- Normal: Age 59 1/2 or older, CESA or HSA
- Premature: Under 59 1/2 (*possible tax consequences*)
- Timely refund of excess or nondeductible contribution PLUS earnings. For Tax Year \_\_\_\_\_
- Refund of principal amount of excess contribution AFTER tax filing date. For Tax Year \_\_\_\_\_
- Death Distribution
- Divorce

**72 REQUIRED MINIMUM DISTRIBUTION**

- Required Minimum Distribution
- Charitable Contribution

**3 ONE-TIME DISTRIBUTION REQUEST (Select either Full or Partial)**

**Full Distribution:** Account will be Closed. (Review current fee schedule for any applicable Termination Fees)

**Partial Distribution:** Account will remain Open.

**Cash:**

- All Available Cash
- Total Gross Amount \$ \_\_\_\_\_

**Assets:**

ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT	
	<b>OR</b>		
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT	
	<b>OR</b>		
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT	
	<b>OR</b>		
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT	
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	<b>OR</b>		
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT	
	<b>OR</b>		
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT	
	<b>OR</b>		
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT	
	<b>OR</b>		

If more lines are necessary to list additional assets, attach a separate sheet titled "Asset Sheet".

Yes, an additional Asset Sheet is attached. Please remember to sign and date.

For Real Estate, Mobile Home, Private Equity (LLC, LP, LTD), and Private Debt assets, an annual valuation must be on file to distribute the asset. Please review your asset holdings and submit a completed [Fair Market Value](#) form for any asset requiring an updated valuation. Requests cannot be processed until a current valuation is provided.

Precious Metals are shipped to your mailing address of record by your depository. Please allow up to 3 weeks for metals to be received after submitting the distribution request.

Account Number \_\_\_\_\_


**4 METHOD OF DISBURSEMENT (Select one option) Funds will be sent via check/regular mail if an option is not selected**
**SEND FUNDS BY WIRE\***
**SEND FUNDS BY ACH** (please allow up to 3 business days for receipt)

BANK NAME	ABA ROUTING NUMBER (9 DIGITS)									
FOR CREDIT TO (NAME ON BANK ACCOUNT)		FOR CREDIT TO ACCOUNT NUMBER (BANK ACCOUNT NUMBER)								
FOR FURTHER CREDIT TO (IF APPLICABLE)		FOR FURTHER CREDIT TO ACCOUNT NUMBER (IF APPLICABLE)								

**SEND FUNDS BY CHECK (Funds must be made payable to the account holder, unless the distribution is charitable or for a CESA or HSA)**

MAKE CHECK PAYABLE TO	CESA/HSA DISTRIBUTIONS ONLY (ACCOUNT NUMBER/REFERENCE INFORMATION)	
Select only one option: <input type="checkbox"/> Cashier's Check* <i>Overnight mail required</i>		
<input type="checkbox"/> Regular Check/Overnight Mail*		
<input type="checkbox"/> Regular Check/Regular Mail		
<input type="checkbox"/> Bill Third Party for Overnight: <input type="checkbox"/> FedEx <input type="checkbox"/> UPS	THIRD PARTY ACCOUNT NUMBER	THIRD PARTY ZIP CODE

\*Additional fees may apply, see current fee schedule. Please note that overnight mail requires an address other than a Post Office Box. If you have a PO Box as your mailing address, overnight mail will be sent to your legal address of record.

**5 TAX WITHHOLDING ELECTION (Select one option for both Federal and State Withholding)**

**Complete both Federal Withholding Election and State Withholding (not applicable for all states).** Federal income tax law requires that federal income tax be withheld at a rate of 10 percent unless you indicate otherwise. **Exceptions include: CESA, HSA, and Roth IRA accounts.**

**Federal Income Tax Withholding Election**

- Do **NOT** withhold Federal Income Tax  
 **Withhold** Federal Income Tax at a rate of 10%  
 **Withhold** Federal Income Tax at a rate of \_\_\_\_\_ % or \$ \_\_\_\_\_  
 (percentage or dollar amount must be greater than 10% of the total distribution value)

Note: Federal tax law requires federal income tax be withheld at a rate of 10% unless you have elected zero (0) withholding or an amount greater than 10% by marking one of the boxes above.

**State Income Tax Withholding Election (Requirements vary by state.)**

- Do **NOT** withhold State Income Tax  
 **Withhold** State Income Tax at a rate of \_\_\_\_\_ % or \$ \_\_\_\_\_

Note: If no election is made, withholding will be made based upon the Account Holder's legal address and pursuant to the attached State Income Tax Withholding Requirements chart.

**6 DOCUMENT SIGNING (Optional)**

If this distribution requires Equity Trust Company to sign any re-registration related documents that are accompanying this request (for in-kind asset distributions), please provide authorization by making an election below. Documents will be sent via regular mail to the address of record, unless indicated otherwise.

- Yes, sign document(s) provided\*  
 Send document(s) by overnight mail\*

\*Additional fees may apply, see current fee schedule. Please note that overnight mail requires an address other than a Post Office Box. If you have a PO Box as your mailing address, overnight mail will be sent to your legal address of record.

Account Number \_\_\_\_\_

**7 DELIVERY INSTRUCTIONS**

Checks, precious metals, and documentation will be sent to your Mailing address of record. Overnight mail requires an address other than a Post Office Box. If you have a PO Box as your mailing address, overnight mail will be sent to your legal address of record. Precious metals will be shipped via the depository's default carrier. If your address of record has recently changed or needs to be updated, please update your address within myEQUITY prior to submitting this Distribution request.

**8 EXPEDITED PROCESSING (Optional)**

Yes, Expedite My Request\*

Expedited processing requests will be processed before standard requests. Please indicate "Expedited" in email subject lines or fax expedited requests to 440-366-3756. Expedited processing provides priority review of the transaction only. It **does not** include expedited delivery of funds (overnight mail, wire, etc.).

**PLEASE NOTE: The Custodian may require verbal verification from you before processing the distribution. Obtaining such verbal verification may delay expedited and normal processing times.**

\*Additional fees may apply, see current fee schedule.

**9 PAY FEES BY CREDIT CARD (Optional)**

Yes, Charge to Credit Card on File

Unless otherwise indicated, fees will be deducted from available cash.  
To change or update a credit card, please visit [www.myEQUITY.com](http://www.myEQUITY.com).

**10 SIGNATURE**

The undersigned hereby authorizes and directs Equity Trust Company to distribute funds from my account referenced above in accordance with the instruction completed on this form.

I acknowledge that: (1) this distribution request form is provided to the Custodian under the Custodial Account Agreement and Disclosure Statement; (2) this distribution is authorized under the provisions of the Custodial Account Agreement and Disclosure Statement and IRS Regulations and does not constitute a prohibited transaction; (3) the Custodian may require verbal verification before processing the distribution and the Custodian reserves the right to delay and/or cancel the distribution if the required verification is not timely received; (4) by signing this form, I understand and agree that the Custodian is not responsible for determining the appropriateness of any voluntary withholding election and such election is applicable to any subsequent distribution until it is revoked by me under the procedure established by the Custodian; (5) I certify that all information provided is true and accurate; (6) I have not received any tax or legal advice in connection with this distribution from the Custodian and I understand that it is my responsibility to determine the taxable amount of this distribution.

I agree to indemnify, hold harmless and release the Custodian for any liability due to the processing, amount or receipt of this distribution.

ACCOUNT HOLDER SIGNATURE

DATE

**STATE INCOME TAX WITHHOLDING REQUIREMENTS**

State of Residence	State Income Tax Withholding															
AK, FL, HI, NH, NV, SD, TN, TX, WA, WY	State income tax is not allowed.															
<b>State Income Tax Withholding is Voluntary</b>																
AL, AZ, CO, ID, IL, IN, KY, LA, MD, MN, MO, MS, MT, NJ, NM, NY, ND, OH, PA, RI, SC, UT, WI, WV	<ul style="list-style-type: none"> <li>We will withhold state income tax only if you instruct us to do so.</li> <li>You must indicate the amount to withhold.</li> <li>For <b>MD, NJ &amp; NY</b> amounts must be whole dollars.</li> <li>For <b>PA</b>, if you choose to withhold it must be at <b>3.07%</b>.</li> </ul>															
<b>State Income Tax Withholding is Mandatory Where Federal Withholding Applies</b>																
AR, CA, NC, OR, VT	If federal tax is required we will withhold the following unless you indicated otherwise: <b>AR</b> - 3% of gross distribution <b>OR</b> - 8% of gross distribution <b>CA</b> - 10% of federal tax withheld <b>VT</b> - 2.4% (minimum) of gross distribution based on Federal withholding <b>NC</b> - 4% of gross distribution															
<b>State Income Tax Withholding is Mandatory Where Federal Withholding Applies</b>																
IA, KS, ME, MA, NE, OK	If federal tax is withheld you cannot opt out of state withholding. We will withhold as indicated: <b>IA</b> - 5% of gross distribution <b>MA</b> - 5.1% of gross distribution <b>KS</b> - 4.5% of gross distribution <b>NE</b> - 5% of gross distribution <b>ME</b> - 5% of gross distribution <b>OK</b> - 5% of gross distribution															
<b>State Income Tax Withholding</b>																
CT	<b>6.99%</b> - Mandatory if lump sum distribution of the entire account balance, unless any portion of the lump sum distribution was previously subject to tax, or the lump sum distribution is a rollover as a trustee-to-trustee transfer.															
D.C.	<b>8.95%</b> - Mandatory if lump sum distribution. This does not include rollover distributions from a direct trustee to trustee transfer or a rollover from an individual retirement account to a traditional or Roth IRA that is a direct trustee-to-trustee transfer.															
DE	Distributions are subject to withholding if withholding is required for federal purposes. If withholding is not required, voluntary withholding may be requested at <b>5%</b> .															
GA	Withholding will be required unless indicated otherwise. Withholding percentage will follow the chart below:															
	<table border="1"> <tr> <td style="width: 33%;">\$ 0</td> <td style="width: 33%;">\$ 7,999.99</td> <td style="width: 33%;">2.0%</td> </tr> <tr> <td>\$ 8,000</td> <td>\$ 9,999.99</td> <td>3.0%</td> </tr> <tr> <td>\$10,000</td> <td>\$11,999.99</td> <td>4.0%</td> </tr> <tr> <td>\$12,000</td> <td>\$14,999.99</td> <td>5.0%</td> </tr> <tr> <td>\$15,000</td> <td>and over</td> <td>6.0%</td> </tr> </table>	\$ 0	\$ 7,999.99	2.0%	\$ 8,000	\$ 9,999.99	3.0%	\$10,000	\$11,999.99	4.0%	\$12,000	\$14,999.99	5.0%	\$15,000	and over	6.0%
	\$ 0	\$ 7,999.99	2.0%													
	\$ 8,000	\$ 9,999.99	3.0%													
	\$10,000	\$11,999.99	4.0%													
\$12,000	\$14,999.99	5.0%														
\$15,000	and over	6.0%														
MI	Required unless you certify that your distribution is not taxable because you were born before 1946 or you believe you will not have a balance due on your Michigan Individual Income Tax Return, Form MI-1040. <b>4.25%</b> of taxable distribution															
VA	Distributions are subject to withholding if withholding is required for federal purposes, unless the recipient qualifies for and elects no withholding. Recipient can only elect no withholding if (a) the same choice was made for federal purposes, (b) recipient is a non-resident, (c) recipient expects to have no tax liability, or (d) recipient's adjusted gross income is less than \$11,950 if single, \$23,900 if married. Recipients cannot elect out of withholding if eligible rollover distribution is not rolled over.															
NOTE 1:	The above applies to residents of each respective state. Special rules apply if you live in a foreign country, are not a U.S. Citizen, or are a non-resident alien.															
NOTE 2:	The above is provided as a guideline only, and is not advice regarding withholding. State law is subject to change and Equity Trust is not responsible for changes in state law that may affect the accuracy of the above. Please contact your tax advisor before making an election regarding state withholding.															