

YOU CAN ENROLL AT myEQUITY.COM TO SUBMIT THIS REQUEST OR ANY CORRECTIONS ONLINE AND RECEIVE ADDITIONAL HELPFUL INFORMATION.

IMPORTANT INFORMATION FOR YOU

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 the 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.

1 ACCOUNT HOLDER INFORMATION

LEGAL NAME (Last, First, Middle)	ACCOUNT NUMBER (9 Digits)
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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.

<input type="checkbox"/>	Normal: Age 59½ or older, CESA or HSA	
<input type="checkbox"/>	Premature: Under 59½ (possible tax consequences)	
<input type="checkbox"/>	Timely refund of excess or nondeductible contribution PLUS earnings.	For Tax Year:
<input type="checkbox"/>	Refund of principal amount of excess contribution AFTER tax filing date.	For Tax Year:
<input type="checkbox"/>	Death Distribution	
<input type="checkbox"/>	Divorce	

72 REQUIRED MINIMUM DISTRIBUTION

<input type="checkbox"/>	Required Minimum Distribution
<input type="checkbox"/>	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
		OR
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT
		OR
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT
		OR
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT
		OR

ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT
		OR
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT
		OR
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT
		OR
ASSET NUMBER	# OF SHARES/UNITS	DOLLAR AMT
		OR

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.

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:	
Cashier's Check* <small>Overnight mail required</small>	Regular Check/Overnight Mail* Regular Check/Regular Mail
Bill Third Party for Overnight: <small>FedEx UPS</small>	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 Order.

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*

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.

FOR PRECIOUS METALS ONLY
 If you wish to have your metals moved internally to your personal account at the depository, please complete the boxes below specifying your account title and number.

PERSONAL DEPOSITORY ACCOUNT TITLE	PERSONAL DEPOSITORY ACCOUNT NUMBER
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8 EXPEDITED PROCESSING (Optional)

Yes, expedite my request*	<p>Expedited processing requests will be handled before standard requests. Please indicate "Expedited" in email subject lines or fax expedited requests to (440) 366-3756.</p> <p>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.</p>
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9 PAY FEES BY CREDIT CARD (optional)

Yes, charge to the 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 .
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10 SIGNATURE AND DATE

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.

SIGNATURE OF ACCOUNT HOLDER	DATE
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*Additional fees may apply, see current fee schedule.

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.														
AL, AZ, CO, ID, IL, IN, KY, LA, MD, MN, MO, MS, MT, NJ, NM, NY, ND, OH, PA, RI, SC, UT, WI, WV	State Income Tax Withholding is Voluntary														
	<ul style="list-style-type: none"> We will withhold state income tax only if you instruct us to do so. You must indicate the amount to withhold. For MD, NJ, & NY amounts must be whole dollars. For PA, if you choose to withhold it must be at 3.07% 														
AR, CA, NC, OR, VT	State Income Tax Withholding is Mandatory Where Federal Withholding Applies														
	<p>If federal tax is required, we will withhold the following unless you indicate otherwise:</p> <table border="0"> <tr> <td>AR - 3% of gross distribution</td> <td>OR - 8% of gross distribution</td> </tr> <tr> <td>CA - 10% of federal tax withheld</td> <td>VT - 2.4% (minimum) of gross distribution based on Federal withholding</td> </tr> <tr> <td>NC - 4% of gross distribution</td> <td></td> </tr> </table>	AR - 3% of gross distribution	OR - 8% of gross distribution	CA - 10% of federal tax withheld	VT - 2.4% (minimum) of gross distribution based on Federal withholding	NC - 4% of gross distribution									
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CA - 10% of federal tax withheld	VT - 2.4% (minimum) of gross distribution based on Federal withholding														
NC - 4% of gross distribution															
IA, KS, ME, MA, NE, OK	State Income Tax Withholding is Mandatory Where Federal Withholding Applies														
	<p>If federal tax is required, we will withhold the following unless you indicate otherwise:</p> <table border="0"> <tr> <td>IA - 5% of gross distribution</td> <td>MA - 5.1% of gross distribution</td> </tr> <tr> <td>KS - 4.5% of gross distribution</td> <td>NE - 5% of gross distribution</td> </tr> <tr> <td>ME - 5% of gross distribution</td> <td>OK - 5% of gross distribution</td> </tr> </table>	IA - 5% of gross distribution	MA - 5.1% of gross distribution	KS - 4.5% of gross distribution	NE - 5% of gross distribution	ME - 5% of gross distribution	OK - 5% of gross distribution								
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KS - 4.5% of gross distribution	NE - 5% of gross distribution														
ME - 5% of gross distribution	OK - 5% of gross distribution														
State Income Tax Withholding															
CT	6.99% - 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.	8.95% - 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 5%.														
GA	Withholding will be required unless indicated otherwise. Withholding percentage will follow the chart below:														
	<table border="0"> <tr> <td>\$0</td> <td>\$7,999.99</td> <td>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
\$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. 4.25% 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.														