

# IRA Distribution

Use this form to request a one-time distribution or to establish or modify a scheduled recurring distribution.

Before completing this form, please review the important information on all pages and consult with your tax advisor regarding the tax implications that may result from an IRA distribution. It is your responsibility to provide us with accurate information, which will be used to report the distribution to the IRS. Review IRS Publication 590-B or visit IRS.gov for more information regarding IRA distributions. The Wells Fargo Clearing Services (WFCS) IRA Disclosure Statement and Custodial Agreement provides the terms and conditions of the account and information about the IRA Custodian.

## Section 1: IRA Information

Please provide the following information about your account.

Account Name	Account Number
IRA Type (Select one) <input type="checkbox"/> Traditional <input type="checkbox"/> Roth <input type="checkbox"/> SEP/SAR-SEP <input type="checkbox"/> SIMPLE <input type="checkbox"/> Inherited Traditional <input type="checkbox"/> Inherited Roth	

## Section 2: Reason for Distribution

Your distribution will be reported to the IRS based on the date of birth we have on file for you and your account type. Multiple selections are not permitted; a new form and signature are required to change from one category to another. Please note there are specific rules when rolling an IRA distribution back into an IRA within 60 days. **Please select one of the distribution reasons below.**

- Normal** (59½ or older), **Early** (before 59½), **or Death** (taken by a beneficiary).
- Exception.** If you are eligible for an exception, select one of the following options to specify the distribution reason.

Roth Qualified  
(Year Roth first funded) \_\_\_\_\_

Early SIMPLE  
(date of first deposit) \_\_\_\_\_

IRA to Qualified Retirement Plan (QRP)  
(attach letter of acceptance from QRP)

Disability  
By selecting Disability, I attest that:

- I irrevocably elect to treat this distribution as a disability distribution under Internal Revenue Code ("Code") § 72(t)(2)(A)(iii).
- I certify that I satisfy the definition of disabled under Code § 72(m)(7) and any conditions for such a distribution under the Code and/or the regulations thereunder.

Account(s) carried by First Clearing. First Clearing is a trade name used by Wells Fargo Clearing Services, LLC, a registered broker-dealer and non-bank affiliate of Wells Fargo & Company.

585254 (Rev 29 - 11/23) Office Use Only: Sub Firm # \_\_\_\_\_ BR Code \_\_\_\_\_ FA Code \_\_\_\_\_ Account Number \_\_\_\_\_

# Section 3: Distribution Instructions

The IRA Custodian is authorized to distribute as indicated below.

## Frequency Type

Only one frequency type may be selected; separate forms are required to establish more than one frequency.

- On Demand** (verbal requests).  
You authorize partial distributions from this IRA, based on your selection below, without completing a new form. Upon completion of this form, a distribution may be requested immediately. A new form must be completed if you want to make changes to the Method section. A separate form is needed for each of your IRAs.
- One-time** (partial - to be made upon receipt of signed form unless future date provided) \_\_\_\_\_
- Termination of Entire Account** (fee may apply).
- Establish New Periodic** Effective \_\_\_\_\_ (1st - 28th only) or  Last business day
- Change Existing Periodic** Effective \_\_\_\_\_ (1st - 28th only) or  Last business day

## Periodic Frequency

Select one of the following frequencies for periodic distributions. If you choose a begin date of 29, 30, or 31, the date will default to the last business day of the month.

- Annually (once a year)       Monthly (once a month)       Semi-Annually (every 6 months)       Bi-monthly (every other month)
- Monthly (last business day)       Semi-Monthly (2 times/month) \_\_\_\_\_ and \_\_\_\_\_
- Bi-weekly (every other week)       Quarterly (every 3 months)       Weekly (same day each week)

## Amount

- Cash** You are responsible for selling enough securities to ensure that cash is available for distributions. If you are terminating your account, you are responsible for liquidating any Money Market funds and applying any applicable fees.

Specify the value using one of the options below.

- Amount \$ \_\_\_\_\_  
For taxes on cash distributions, select one of the options below.  
(If no option is selected, Gross of taxes will be used.)
- Gross of taxes (this amount will be reduced by any applicable fees and tax withholding)
- Net of taxes

- Dividends, Interest, and/or Other** Only available for periodic distributions.  
(Distributions of Dividends and Interest will be Gross of taxes only.)  
 Dividends       Interest       Variable Source of Funds: \_\_\_\_\_
- Annual Required Minimum Distribution (RMD)** You may need to adjust your RMD for certain transactions, such as rollovers or transfers.
- Securities** Specify assets below. Security Name, Symbol, or CUSIP can be located on your current statement. The CUSIP is 9 numbers long. (Distributions of Securities will be Net of taxes only.)

Symbol/CUSIP	Quantity

Symbol/CUSIP	Quantity

Symbol/CUSIP	Quantity

# Payment Method

**Deposit electronically via ACH/Money Transfer to a Checking or Savings Account**

ABA Routing Number (9 digits)	Account Number
Financial Institution Name	
Bank Account Title or Name	Account Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings

**Journal to an internal non-IRA brokerage account**

Account Name	Account Number
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**Check** If you would like a check, indicate payee information below.

- Mail Check Overnight - fee may apply     To Address of Record     To Alternate Address below  
 Hold for Pickup at Branch

Name (Payable to)		
Mail to Address (if different than address of record)		
City	State or Province	Postal Code

**Wire Funds**

- Fees may apply.
- Fill out the wire instructions on the last page of this form.

## Section 4: Tax Withholding

Make an election in both the Federal Taxes and State Taxes sections. **You should consult with your tax advisor before making your elections.**

Please review the last page of this form for additional information regarding tax withholding.

All IRA distributions are considered "non-periodic" payments by the IRS. To opt out of federal or state withholding, enter a "0" for your withholding rate.

### Federal Taxes (W-4R | OMB No. 1545-0074)

You cannot elect out of the 10% mandatory withholding if you have not supplied the IRA Custodian with your correct SSN or TIN and a "residence address" within the United States.

For non-periodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100% on Line 1. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its territories.

1. Complete this line if you would like a rate of withholding that is different from the default withholding rate. See the instructions and the Marginal Rate Tables below for additional information.

Enter the rate as a whole number (no decimals) \_\_\_\_\_ %

### State Taxes

Withholding is required in some states if federal withholding applies, unless you specifically elect out. Please visit <https://www.wellsfargoclearingservicesllc.com/irastatetax> to view your state's specific withholding rules. State taxes will be withheld based on the state listed on your account registration. If you elect an amount that does not meet your state's requirements, the minimum state withholding will be applied.

To withhold taxes from On Demand instructions, elect a withholding percentage; a dollar amount is not permitted. *Residents of CA or VT:* The withholding rate applies to the federal withholding amount and not the gross distribution amount. *Residents of MI:* If you elect out, you are certifying your distribution is not taxable because you were born before 1946 or you believe that you will not have a balance due on your MI-1040. *Residents of CT:* If you've opted out of state tax withholding or elected an amount to withhold for partial or scheduled distributions, you are electing withholding code "E", as defined by Connecticut's form CT-W4P.

**Withhold state income tax of** \_\_\_\_\_ % or \$ \_\_\_\_\_

*Connecticut Perjury Declaration: I declare under penalty of law that I have examined this certificate and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for reporting false information is a fine of not more than \$5,000, imprisonment for not more than five years, or both (as defined by the state of Connecticut on the CT-W4P).*

## Section 5: Client Signature and Acknowledgment

**By signing below, you agree and certify to the following:**

- You are the proper party to request payment(s) from this IRA and that all information provided is true and accurate.
- You have read and understand this document in its entirety.
- No legal or tax advice has been provided to you by the IRA Custodian or any of its past, present, or future affiliates, subsidiaries, or agents.
- The IRA Custodian is directed to take all actions necessary with respect to this transaction.
- The IRA Custodian shall in no way be held responsible and you expressly assume responsibility, for:
  - Any tax implication, or
  - Adverse consequences which may arise as a result from this transaction.
- The IRA Custodian and any of its past, present, or future affiliates, subsidiaries, and agents may reasonably rely on your certification without further investigation or inquiry and shall not be liable for any misrepresentation of fact.
- The tax withholding election only applies to the distribution referenced on this form and does not revoke or change any separate distribution instructions on file.

**Signature of the Account Holder, Responsible Individual, Custodian for a minor, Legal Guardian, or Attorney-in-Fact (POA document required)**

Signature	Printed Name	Date
X		

# Federal Wire Funds Request

Domestic or Foreign - Fee May Apply

## Wire Instructions

Bank Name		ABA Routing Number (Domestic Only)	
Bank Address	Bank City	Bank State or Province	Bank Country (Foreign Only)
Name on Bank Account		Account Number	Account Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings
Recipient Name		Recipient Address (no PO Box or APO)	
Swift/BIC Code (Foreign Only)	IBAN Number (if applicable)	IFSC Number (India)	Sort Code
Intermediary Bank Name		Account Number	
Intermediary Bank Information <input type="checkbox"/> ABA Number <input type="checkbox"/> SWIFT Number: _____			
Purpose of Wire (Examples: Real Estate Closing, Business Operating Expense, Medical Expense, Vehicle Purchase, Education Expense)			
Special Instructions		Further Credit (if applicable)	

**SUBMIT THIS PAGE ONLY IF REQUESTING A FEDERAL WIRE**

# Informational page - Keep for your records, do not return

## Additional Information Regarding Tax Withholding

### 2024 Marginal Rate Tables

You may use these tables to help you select the appropriate withholding rate for this payment or distribution. Add your income from all sources and use the column that matches your filing status to find the corresponding rate of withholding. **Important: Please refer to the Form W-4R instructions at [IRS.gov W-4R Form](https://www.irs.gov/w-4r-form) for additional information regarding the form and how to use this table.**

Single or Married filing separately		Married filing jointly or Qualifying surviving spouse		Head of household	
<i>Total income over—</i>	<b>Tax rate for every dollar more</b>	<i>Total income over—</i>	<b>Tax rate for every dollar more</b>	<i>Total income over—</i>	<b>Tax rate for every dollar more</b>
\$0	<b>0%</b>	\$0	<b>0%</b>	\$0	<b>0%</b>
14,600	<b>10%</b>	29,200	<b>10%</b>	21,900	<b>10%</b>
26,200	<b>12%</b>	52,400	<b>12%</b>	38,450	<b>12%</b>
61,750	<b>22%</b>	123,500	<b>22%</b>	85,000	<b>22%</b>
115,125	<b>24%</b>	230,250	<b>24%</b>	122,400	<b>24%</b>
206,550	<b>32%</b>	413,100	<b>32%</b>	213,850	<b>32%</b>
258,325	<b>35%</b>	516,650	<b>35%</b>	265,600	<b>35%</b>
623,950*	<b>37%</b>	760,400	<b>37%</b>	631,250	<b>37%</b>

\* If married filing separately, use \$380,200 instead for this 37% rate.

- Generally, federal income tax withholding applies to the taxable part of payments made from pensions, profit-sharing, stock bonus, annuity, and certain deferred compensation plans, from individual retirement arrangements (IRAs), and from commercial annuities. If you are receiving regularly scheduled distributions from a traditional IRA, you are subject to withholding. **Important: Because your tax situation may change from year to year, you may want to refigure your withholding each year.**
- Generally, there is a mandatory federal tax withholding requirement of 30% on distributions for non-resident aliens. Therefore, a 30% Federal withholding will be applied on all partial and total non-resident alien IRA distributions.
- An election not to have federal income tax withheld is void if a TIN or SSN is not provided or when an obviously incorrect taxpayer identification number is furnished.
- In certain states, tax withholding is required on IRA distributions unless you specifically elect out of state withholding. States have various withholding requirements. You should consult your tax advisor or your state department of revenue for additional information.
- State withholding is not an option for states that do not have a state income tax.