

# **DISTRIBUTION REQUEST**

Contact Center: (800) 248-8447 | www.ForgeTrust.com

Complete this form if you wish to take a distribution of your funds and/or assets. Please consult your tax advisor to determine tax consequences, if any, as a result of taking a distribution. For current year distributions, you must submit this by December 1st. A Form 1099-R will be issued to you for the tax year in which you take a distribution. All 1099-Rs are mailed by January 31st of the following year.

Check this box for PRIORITY PROCESSING (1-2 business days).

Priority Processing fee of \$250 will apply if selected. Normal Processing will take 3-5 business days if in good order.

## 1. PERSONAL INFORMATION (\*required field)

Should we need to contact you in regards to this request, your preferred method of contact is:

Email

**Primary Phone** 

First Name*		Middle Name	Last Name*
Account Number*		Social Security Number* (last 4 digits)	Date of Birth* (MM/DD/YYYY)
Phone* XXX-XXX-XX	XX	Email (Your personal email only)	,
Citizenship*:	US Citizen	Resident Alien	Non-resident Alien

#### 2. TYPE OF DISTRIBUTION

I authorize Forge Trust Co. to withdraw the funds from my custodial cash account and send me the net amount (less any withheld taxes and fees) by the method selected:

Normal distribution (I am over 59½ years old or subject to RMD)	Direct Rollover to a Qualified Plan  Provide a letter of acceptance from the receiving institution.
Early distribution (I am under 59½ years old)	Distribution from a Coverdell Education Savings Account
Early distribution (I am under 59½ years old AND subject to disability) Provide the supporting documentation from the state.	Beneficiary distribution (decedent)
Charitable gift donation - available if you are of eligible age.  Attach an acceptance letter from the charity. Letter must include the EIN,	Return of excess and/or ineligible contribution & earnings for the tax
address to send the check, and signed by an authorized individual.  *Check will be written out to the charity.	year:

#### 3. DISTRIBUTION METHOD

IMPORTANT: You must have sufficient funds in your custodial cash account to cover the distribution amount, the withholding amount (if applicable), plus any transaction fees, outstanding fees, and your minimum balance requirement if applicable. (We wouldn't hold the minimum cash balance on a closure). Having insufficient funds will delay your distribution. If sufficient cash is not available in the custodial cash account, please complete and attach a LIQUIDATION REQUEST form for an Alternative Investment.

Prior to releasing your funds we may contact you for verbal confirmation of these instructions.

Full Distribution - Close My Account

All assets will be distributed in-kind via a re-registration and/or assignment at the current known value unless liquidation instructions are provided below or by attaching a Liquidation Request form. Liquidation, re- registration, and/or assignment fees may apply. An account termination fee will apply.

I elect to be invoiced for the account closure fees to allow me up to 5 days to pay by debit or with credit card online rather than use the available cash in my account. I understand I will receive an email to notify me once the fees have been assessed before I can pay online. If I do not pay within 5 days, and I have available cash, the fees will sweep from cash to proceed with my request.

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Parti	al Distribution - One Time Distrib	oution (Select all that a	apply)					
	\$ g	ross of current availab	le cash (Put "All" to i	ndicate all available	e cash les	s taxes, fess and minin	num cas	h balance)
	Liquidate/Sell - Send \$		gross (Put "All" to ir	ndicate all procee	eds less t	axes, fees, and mini	imum c	ash balance)
	Note: Select only if you have No	OT personally initiated	the liquidation. On	ly available for p	ublicly tra	aded positions.		
	Investment Name			Ticker/Cusip		No. of Shares		or Dollar Amount
	In-Kind (as directed below)							
	Investment Name				No. of S	Shares or Dollar Am	ount	
	Note: If you would like to reques	st more than 3 investm	nents, please list all	investments on	a separa	te attachment.		
Recu	urring Distributions (*indicates re	equired)						
	Gross amount* \$	(You mu	ust ensure you have	e cash available	ahead of	each recurring payı	ment.)	
	Select frequency*: Month							
	Start my recurring distributions	on (MM/DD/YYYY):						
						.49		
	Note: If no date is entered, the sche	dule will start immediately	/. Your recurring distrit	outions will remain	in effect ur	ntil you provide directio	n to sto	o them.
	This authorization is to remain in full			ived written notifica	ition from i	me of its termination in	such tir	ne and in such manner as to
	afford Forge Trust Co. and Deposito	ry a reasonable opportun	ity to act on it.					
4. T	X WITHHOLDING							
There still	t: For Roth IRAs and any In-Ki may be required tax withholding ou contact your tax advisor regar	g based on your situat	ion and, if you don'	t withhold proper	ly, there	may be penalties fro		
Federa	l Withholding: (If you do	not make an ele	ction, the defa	ult of 10% w	ill be a	pplied.)		
elect not t penalties	bution you have requested from to have withholding apply to you when filing your taxes. If you are withholding that will apply.	r distribution payments	s, or if you do not h	ave enough fede	ral incom	ne tax withheld from	your di	istribution, you may incur ta
	Do Not Withhold Federal Taxes							
	Withhold \$	or	%	(If elected, must	be a mini	imum of 10% of the	Distrib	ution request)
State W	ithholding: (If you do not							
If you are	a resident of the following states, y	ou must make an electi	on for state withholdi	ing as we are requ	uired by la	aw to withhold the stat	tes mini	mum.
• Man	datory withholding (see your states datory withholding if Federal withh datory withholding if Federal withh	olding is elected: IA, MA	, ME, VT			DK, OR		
	Do Not Withhold							
	Withhold \$	or	% E	Enter your reside	nce state	i:		
	Withhold my state minimum.			Enter your reside				<u></u>
	Note: if your state has no minim	num required, we will r	ot withhold state ta	xes with this ele	ction.			<del></del>

While Forge Trust Co obtains and provides information about state tax withholding laws, we do not guarantee the accuracy as state tax laws are subject to constant change and interpretation. The information we provide is not to serve as tax or legal advice, and strongly recommend that you contact your tax advisor regarding your tax withholding elections and to obtain the most current information about your state's withholding laws.

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## 5. DELIVERY INSTRUCTIONS (default is by check if no option is selected below)

I authorize Forge Trust Co. to withdraw the funds from my custodial cash account and send me the net amount (less any withheld taxes) by the method select

Check to my current address of record (disbursement fee applies)	Send via (select one):  Regular mail  Overnight mail (overnight delivery fee + shipping cost* apply)  *Charge cost to FedEx/UPS account:  If no account number is provided, the cost of shipping will be charged to your account and sent via FedEx		
	Bank Name*:		
	Bank Address*:		
Wire (disbursement fee + outgoing wire fee	Bank Phone Number*:		
apply)	ABA (Routing number)*:		
	Account Name**:		
	Account Number*:		
	Account Type (ACH only):		
	Further Credit Acct Name:		
Direct Deposit/ACH	(Wire Only - if applicable)		
(Disbursement fee applies)	Further Credit Acct No.:		
Note: Allow up to 2 business days for	(Wire Only - if applicable)		
your banking institution to credit an ACH payment to your account once it is initiated.	** Must match the client account name on record.		
	Important: To avoid delays or additional fees, ensure the banking information provided is accurate for the type of delivery you have requested.		
	By initial here, I acknowledge that I have reviewed and	verified the ACH and/or wire instructions for accuracy.	

### 6. ACKNOWLEDGMENT & PARTICIPANT SIGNATURE

As set forth in my Forge Trust Co. Custodial Agreement, I hereby elect and acknowledge the foregoing distribution. I understand that Forge Trust Co. and the Administrator neither assumes nor implies any liability for the failure of my elected distribution to meet any required minimum distribution requirements under the law and that the amount of the distribution is exclusively mine to make. I acknowledge that Forge Trust Co. may contact me for verbal confirmation of my distribution instructions, which may cause delays, or cancellation of my request, if I cannot be reached at the phone number on record.

Account Owner's Signature	Date (MM/DD/YYYY)
X	

Please sign and submit additional documents as required.

#### **DELIVERY INSTRUCTIONS**

Please submit your request by one of the methods provided and include the Direct Deposit ACH Authorization form if applicable.

distributions@ForgeTrust.com

(650) 745-1403

Regular mail Forge Trust Co. PO Box 2048 San Francisco, CA 94126 Overnight mail
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