

# IRA Plan Type Redemption Request

**Instructions:** For Qualified Retirement Plans, use Retirement Plan Redemption Form (FTC01CS1037). Please submit the completed and signed form directly to Fiduciary Trust Company of NH by using one of the following submission methods:

Email: [FTC@dstsystems.com](mailto:FTC@dstsystems.com)  
Fax: (816) 218-0421

USPS Mail:  
Fiduciary Trust Company of NH  
PO Box 219638  
Kansas City MO 64121-9638

Overnight Mail:  
Fiduciary Trust Company of NH  
430 W. 7th Street, Suite 219638  
Kansas City, MO 64105-1407

**Note:** Fax and email are not acceptable methods for Medallion Signature Guarantee; originals with Medallion Signature Guarantee must be mailed in.

## 1. Registration Information

Name of Participant (exactly as registered)  Plan ID  Participant SSN

Plan Type (select one)  SIMPLE IRA  SEP IRA

## 2. Redemption Instructions

Redemption Amount (select one)  ALL  Partial Redemption \$

Payment Method (select one)  ACH  Check  Wire (\$25.00 fee)  FedEx (\$25.00 fee)

Provide Bank Name and last four digits of the bank account number if selecting ACH or Wire payment method.

Bank Name  Last Four Digits

Make Payable (select one)  To Account Owner/Participant/Beneficiary  To Alternate Payee/Address as shown below

Name of Alternate Payee  Mailing Address

c/o or Account # (if applicable)

- Percentage-based transactions must equal 100% if the intent is to close the fund/account (must be whole percentages).
- For brokerage accounts, redemptions are processed pro rata by default, unless specified differently below.
- For advisory accounts, redemptions will always be processed pro rata. Skip below section.

Fund Name	Amount (indicate dollars, percentages or all)			
<input type="text"/>	<input type="text"/>	<input type="radio"/> \$	<input type="radio"/> %	<input type="radio"/> ALL
<input type="text"/>	<input type="text"/>	<input type="radio"/> \$	<input type="radio"/> %	<input type="radio"/> ALL
<input type="text"/>	<input type="text"/>	<input type="radio"/> \$	<input type="radio"/> %	<input type="radio"/> ALL
<input type="text"/>	<input type="text"/>	<input type="radio"/> \$	<input type="radio"/> %	<input type="radio"/> ALL
<input type="text"/>	<input type="text"/>	<input type="radio"/> \$	<input type="radio"/> %	<input type="radio"/> ALL
<input type="text"/>	<input type="text"/>	<input type="radio"/> \$	<input type="radio"/> %	<input type="radio"/> ALL
<input type="text"/>	<input type="text"/>	<input type="radio"/> \$	<input type="radio"/> %	<input type="radio"/> ALL
<input type="text"/>	<input type="text"/>	<input type="radio"/> \$	<input type="radio"/> %	<input type="radio"/> ALL
<input type="text"/>	<input type="text"/>	<input type="radio"/> \$	<input type="radio"/> %	<input type="radio"/> ALL
<input type="text"/>	<input type="text"/>	<input type="radio"/> \$	<input type="radio"/> %	<input type="radio"/> ALL

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### 3. Client Legal Address Change

- Legal Address is considered the account holder's permanent residential address or, in the case of an entity, the place where it maintains its principal physical presence.
- Must be a legal physical street address; a PO Box is not permitted.
- These changes will be applied to all accounts registered to the owners in Section I.

Account Owner:

New Legal Address

  
  

Primary Telephone

Alternate Telephone

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### 4. Federal & State Income Tax Withholding

- State income tax may be withheld on certain types of distributions if your tax residence address is within certain states that require withholding.
- If neither block is selected, Federal Income Tax will be withheld at a rate of 10%.
- Federal and State income tax withholding is not applicable to qualified charitable distributions.
- Redemption amounts will be treated as "Gross" unless indicated as "Net".

Select One

- The undersigned directs that no Federal Income Tax shall be withheld.
- The undersigned directs that Federal Income Tax be withheld at the rate of \_\_\_\_\_ %

Select One

- Gross - Redemption amounts requested are before tax withholding and will be reduced by the applicable tax withholding.
- Net - Redemption amounts requested are after tax withholding and will be increased so the requested amount is received.

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### 5. Distribution Type (select one)

Normal Distribution

Premature Distribution

Beneficiary IRA Distribution

Beneficiary SSN or Trust Tax ID

Beneficiary DOB (MM/DD/YYYY)

Divorce

Former Spouse SSN

Former Spouse DOB (MM/DD/YYYY)

Disability

Required Minimum Distribution (Select one option below)

Uniform Life Expectancy

Joint Life Expectancy with spouse greater than ten years younger

Spouse DOB (MM/DD/YYYY)

Direct Rollover to QP/403(b)/457 (Enter if applicable)

After Tax Contributions

Nondeductible Contributions

Seven Day Revocation

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**6. Acknowledgments**

- I, the undersigned, hereby authorize the transactions indicated and acknowledge I fully understand the tax consequences.
- I understand that withdrawals before the age of 59½ from a SIMPLE IRA within the first 2 years of participation may be subject to a 25% early withdrawal penalty. Withdrawals after the 2 year period may be subject to a 10% penalty.
- If Substantially Equal Periodic payments are modified, other than by the one time change to the RMD method, or stopped prematurely, other than by reason of death or disability, I as the taxpayer am liable for an additional 10% penalty tax (plus interest) on all prior distributions and for interest on the income tax obligation that would otherwise have applied during the years that distributions were made.
- I understand withdrawals will be taxed as ordinary income and may also be subject to a 10% penalty if taken before age 59½.
- I indemnify the Custodian, its agent(s), successors, affiliates and employees from any liability in the event I fail to meet the IRS requirements.
- I have reviewed all of the above information and hereby verify it is true and accurate.
- If signing as Attorney-in-fact, a current POA document must accompany this request.

Under penalties of perjury, I hereby certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, (3) I am a U.S. person (including a U.S. resident alien), and (4) I attest I am exempt from FATCA Reporting. (However, if you provide an IRS W-8 form, it will supersede this statement and you may be subject to FATCA Reporting.) (Cross out (2) if subject to backup withholding.) The Internal Revenue Service does not require my consent to any provision of this document other than the certifications required to avoid backup withholding.

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Account Owner/Participant Signature

Account Owner/Participant Name (print)

Date (required)

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**7. Medallion Signature Guarantee**

A Medallion Signature Guarantee is required under one of the following conditions:

- Your total distribution is more than \$250,000.
- You direct your distribution to be sent to an alternate payee, or address other than the address on your account.
- You are signing in capacity, acting on behalf of the registered account owner.
- Your address has changed within 30 days and you are directing proceeds to the address of record.
- You are directing proceeds to your bank account within 10 days of adding or updating bank instructions.
- You are adding bank instructions or directing proceeds to a bank account that does not match the registration of one of the account owners or the owner.
- Separate requirements may apply for transfer of assets or rollover distributions. See form details for additional requirements when applicable.

Medallion Signature Guarantees must cover the amount of the requested transaction. There are several different guarantee amounts, so it is important to acquire a guarantee amount equal to or greater than the amount of the transaction(s).

To obtain a Medallion Signature Guarantee, sign this form in the presence of an authorized person at a broker/dealer firm or at another financial institution, such as a bank or trust company. A notarization from a notary public does not meet Medallion Signature Guarantee requirements.

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Please place Medallion Signature Guarantee here.

Distribution Type	Important Information
Normal Distribution	Attained 59½ years of age or older and not currently taking Substantially Equal Periodic Payments from this account.
Premature Distribution	Less than 59½ or are currently taking Substantially Equal Periodic Payments from this account, this distribution may be a modification that could have adverse tax consequences as defined by the IRS. See Acknowledgement, Section 5 for explanation. Use Form TRP7996 to establish Substantially Equal Periodic Payments.
Beneficiary IRA Distribution	Attach certified copy of death certificate and Beneficiary Form. If a trust is beneficiary, include a copy of the entire Trust agreement and Trust Tax Identification Number.
Divorce	Attach a Domestic Relations Order, court approved divorce decree, or written legal separation agreement. Instructions must be signed by Owner and former spouse.
Disability	Unable to engage in any substantial gainful activity. Client may be required to submit IRS Schedule R with tax filing.
Seven Day Revocation	IRA disclosure statement received within the last seven calendar days, Revoke IRA.
Required Minimum Distribution	Delaware Distributors, L.P. will calculate payments using the Uniform Lifetime Table. If an alternate method is desired that reflects the IRA owner's individual circumstances, the individual may wish to consult with a tax advisor to determine the required distribution.
Direct Rollover to QRP/403(b)/457	Desire to roll the eligible amount directly into another eligible retirement plan. After tax or non-deductible contributions must remain in the IRA.

This page should not be included when submitting the completed form to FTC.