

# 403(b) and 457 CUSTODIAL ACCOUNT DISTRIBUTION REQUEST

Institutional Advisor Services



## SECTION 1: Request Type

Select one:

ONE-TIME OR SYSTEMATIC ESTABLISHMENT/CHANGE

Select one:

- Request One-time, Full Distribution.
- Request One-time, Partial Distribution.
- Establish Systematic Distribution.
- Change Systematic Distribution, provide information in Sections 2, 4, 5, 6 and 7 as applicable and sign in Section 8

CANCEL

Provide information below and in Section 2B, and sign in Section 8.

Select one:

- Cancel the sole systematic distribution currently on file
- Cancel the specified systematic instructions listed below:
- Cancel all systematic distribution instructions on file.

Cancel Schedule

Cancel Amount

## SECTION 2: Account

### A. ACCOUNT TYPE

Select one:  403(b)  403(b) Roth  457

Select one:  New account  Existing account

TCA by E\*TRADE Account Number (if applicable)

Plan Name

### B. ACCOUNT OWNER

First Name MI Last Name

Last 4 Digits of Social Security Number Date of Birth

## SECTION 3: Distribution Reason

**IMPORTANT:** The signature of your Employer or Approved Provider is required in Section 9 to approve the distribution from the Plan. Even with a signature granting approval, the reason for distribution must be completed for IRS reporting purposes.

Select one:

- Normal** (age 59½ or older) Also select for a Required Minimum Distribution (RMD).
- Separation from service**
- Financial hardship**
- Disability** (under age 59½; distribution not subject to 10% penalty tax) By checking this box, I certify that this distribution meets all the disability requirements of the IRS.
- Divorce** By checking this box, I certify that I agree to the divorce certification terminology in Section 10. Note: Delivery method must be by internal transfer/direct rollover to a TCA by E\*TRADE account. Both you and your former spouse must sign in Section 10.

## SECTION 4: Distribution Amount

**IMPORTANT:** To liquidate assets for a full, partial, or systematic distribution in cash, contact your Investment Advisor to initiate any asset liquidations required. If your Investment Advisor needs to liquidate assets to cover the requested cash, the distribution will not be processed until the settlement date for the sells.



TCA by E\*TRADE Account Number

## SECTION 4: Distribution Amount Continued

### A. FULL DISTRIBUTION INSTRUCTIONS, if applicable

**Full cash distribution.** Confirm that my Investment Advisor has liquidated all assets in my account, send the total balance of my entire account, and close my account.

**Full in-kind distribution.** Distribute all cash and security balances in-kind and close my account.

### B. PARTIAL OR SYSTEMATIC DISTRIBUTION INSTRUCTIONS, if applicable

Select one:

**Dividends and interest only.** Note: Systematic distributions only.

**Gross cash amount of \$** \_\_\_\_\_.  
Note: Provide amount before tax withholding. For a systematic distribution, enter the gross cash amount to withdraw each period.

**Net cash amount of \$** \_\_\_\_\_.  
Note: Provide amount after tax withholding. For a systematic distribution, enter the net cash amount to withdraw each period.

**Required Minimum Distribution (RMD) amount.** Provide the following information for the calculation.

Type of RMD, select one:

- Full RMD amount for this account
- Remaining RMD balance for this account

Answer true or false:

I have designated my spouse or a qualifying trust (where my spouse is the sole primary beneficiary of the trust) as sole primary beneficiary of my account AND my spouse is at least 10 years younger than I.

True  False

If the above statement is true, enter the following information:

Spouse's Date of Birth

Prior Year-End Value \$ \_\_\_\_\_

## SECTION 5: Withholding

### A. FEDERAL WITHHOLDING

Select one:

Withhold federal income tax of \_\_\_\_\_% or \$ \_\_\_\_\_ from the amount distributed. Note: The total must be no less than 20% unless your reason is Financial Hardship, Disability, or your amount is RMD.

I elect not to have any federal income tax withheld. Note: To elect no federal withholding, TCA by E\*TRADE must have a street address on file for your account.

**IMPORTANT:** If no selection is made, federal tax withholding of 20% will be withheld. If your reason is Financial Hardship, Disability, or your amount is RMD, you can elect to withhold an amount under 20% or elect not to have federal income tax withheld. If your distribution type has mandatory withholding requirements, federal withholding may be processed even if the 'I elect not to have federal income tax withheld' box is checked.

Even if you elect not to have tax withheld, you are liable for payment of income tax on the taxable portion of your distribution. You may also be subject to tax penalties under the estimated tax payment rules if your withholding or payments of estimated tax, if any, are not adequate.

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**SECTION 5: Withholding Continued**

**B. STATE WITHHOLDING**

**IMPORTANT:** For a list of states available for withholding and their withholding rules, refer to the TCA by E\*TRADE Withholding Information document found online at [www.trustamerica.com/advisor-forms](http://www.trustamerica.com/advisor-forms). *Note: The account's legal address of record at the time of the distribution determines the state withholding requirements.*

Select one:

Withhold state income tax of \_\_\_\_\_% or \$ \_\_\_\_\_ from the amount distributed for the state listed in the address of record. *Note: Amounts will be rounded to the nearest whole dollar.*

I elect not to have state income tax withheld.

If your state has mandatory withholding that allows you to opt out after certain conditions are met, please consult your tax advisor prior to checking the 'opt out' box on the distribution form to ensure that you have met the conditions.

**SECTION 6: Distribution Frequency**

Select one:

**One-time distribution.**

**Systematic distribution.** Provide the schedule information below.

Month to Begin Distributions \_\_\_\_\_ Day of Month to Withdraw Distribution \_\_\_\_\_

*Note: For annual Systematic RMD distributions, beginning in January, please select a date later than January 16, in the above field.*

Frequency of Distributions

Select one:  Monthly  Quarterly  Semi-annually  Annually

**SECTION 7: Distribution Method**

**IMPORTANT:** Funds sent overnight or wire may be subject to a fee, which will be deducted from your account balance. Your Investment Advisor can provide you with fee information regarding this transaction.

**By electronic transfer** *Note: Allow 1-2 business days for delivery from the processed date for ACH, and the same or next business day for wires.*

Select one:  By ACH  By Wire (fee may apply)

Select one:  Checking account  Savings account

Voided check provided in lieu of bank information

Bank Name \_\_\_\_\_

ABA (Routing) Number \_\_\_\_\_

Name on Bank Account \_\_\_\_\_

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

\_\_\_\_\_  
TCA by E\*TRADE Account Number

**SECTION 7: Distribution Method Continued**

**By check** *Note: Allow 10 business days for delivery. If no payment or mailing instructions are provide in Section 7, the address of record will be used as default instructions. Check fee may apply.*

Select if applicable:

Send check via overnight delivery (not available for P.O. Box addresses). Fee may apply.

Select one:

To the account owner (participant) at the address on record

To the account owner (participant) at the address below

To the third party payee at the address below

Payable To \_\_\_\_\_

For the Benefit Of (FBO) if applicable \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**By transfer/direct rollover.** Move the requested cash specified in Section 4 into the account listed below.

**TCA by E\*TRADE Account, if applicable:**

*Note: If the receiving account is not an existing account, include the appropriate TCA by E\*TRADE account application.*

Select one:  New account  Existing account

TCA by E\*TRADE Account Number \_\_\_\_\_ Account Type \_\_\_\_\_

Account Title \_\_\_\_\_

**Other Institution, if applicable:**

Name of Institution \_\_\_\_\_ Account Title \_\_\_\_\_

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

Third Party Payee if applicable \_\_\_\_\_

For the Benefit Of (FBO) if applicable \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**IMPORTANT:** If you want to make a direct rollover into your qualified plan account, please provide your written instructions as well as a signed acceptance letter from the qualified plan's authorized trustee or administrator.



# 403(b) and 457 CUSTODIAL ACCOUNT DISTRIBUTION REQUEST

Institutional Advisor Services



## General Instructions

Use these instructions to complete the 403(b), 403(b) Roth, and 457 Custodial Account Distribution Request form.

**Purpose of this form.** This form is required to request a one-time distribution from a 403(b), 403(b) Roth, or a 457 custodial account by ACH, check, or wire. It is also required to establish, change, or cancel a systematic distribution from a 403(b), 403(b) Roth, or a 457 custodial account. *Note: Only one set of instructions should be submitted on this form.*

**Important:** If you are a beneficiary of a 403(b), 403(b) Roth, or 457 custodial account and are requesting a distribution due to death, complete the Beneficiary Distribution Request form.

**Important:** This form cannot be used to transfer assets from your TCA by E\*TRADE 403(b), 403(b) Roth, or 457 custodial account to a retirement account in your name at another trustee or custodian. Use the new custodian's transfer form to complete this type of action. An affirmation signed by your employer approving the distribution is required either by letter of instruction or on the new custodian's paperwork.

**Important:** This document uses the term 'employer' to imply 'plan trustee' or 'plan administrator'.

**Distribution fees.** There may be fees associated with your distribution request, including but not limited to:

- Wire fees
- Check fees
- Overnight mail fees

**Important:** Applicable distribution fees will be deducted from your account balance. *Note: For information on distribution fees for this request, contact your Investment Advisor.*

**All fields are required unless noted.** All fields are required unless designated as 'if applicable'. 'If applicable' indicates the section or entry is required if certain conditions apply. These conditions are outlined in detail in these instructions.

You must **complete all required fields and provide all required additional forms and documentation** to expedite processing and to avoid requests for additional information.

**Print or type all entries.** Print clearly in all CAPITAL LETTERS to complete this form. To type entries, a fillable PDF of this form can be found online at [www.trustamerica.com/advisor-forms](http://www.trustamerica.com/advisor-forms).

## Section 1: Request Type

Check the appropriate box to indicate the type of action you want to take with this form. *Note: Allow up to 7 days from receipt of this form by TCA by E\*TRADE for the systematic distribution to be activated, changed, or cancelled.*

**One-Time Distribution – Special Rollover Notice.** If you are requesting a One-Time Full or Partial Distribution, you may be eligible to roll over all or a portion of your distribution from a 403(b) account. Please review the additional information about rollovers and your available options at <http://www.trustamerica.com/advisor-forms/>. If you need a paper copy of the Special Rollover Notice, please contact your Investment Advisor.

**ESTABLISH OR CHANGE** Provide account information in Section 2 and information to be changed in Sections 4, 5, 6, and 7 as applicable.

**CANCEL** Select which type of systematic distribution should be cancelled. If the account has more than one systematic distribution, indicate the distribution amount and the withdrawal schedule of the systematic distribution to cancel.

**Important:** TCA by E\*TRADE will only accept one type of request per form. To provide a one-time distribution request and systematic distribution instructions, submit two forms.

## Section 2: Account

### A. Account Type

Check the box indicating the retirement account type and then select if it is a new or existing account. For an existing account, provide the TCA by E\*TRADE account number. For a new account, provide the appropriate TCA by E\*TRADE account application with this form.

### B. Account Owner

Enter the account owner information for this account exactly as it appears on your TCA by E\*TRADE account. For new accounts, enter the account name exactly as it is written on the application form.

## Section 3: Reason for Distribution

Your 403(b), 403(b) Roth, or 457 custodial account is governed by the Plan Documents. The Plan Documents outline when and why you may take distributions from the account.

**Important:** The signature of your Employer or Approved Provider is required in Section 9 to approve the distribution from the Plan.

Even with a signature granting approval, the reason for distribution must be completed for IRS reporting purposes. In most situations, TCA by E\*TRADE is required to issue a Form 1099-R for distributions from your 403(b), 403(b) Roth, or 457 account. Depending on the nature of the distribution, the distribution may or may not be taxable. *Note: For additional information on approved reasons for distributions and their tax consequences, consult your employer or tax advisor.*

Select one of the following distribution reasons.

- **Normal** (age 59½ or older) Also used for Required Minimum Distribution (RMD) or if you intend to rollover the distribution to another retirement account within 60 days.
- **Separation from service** Use if you are no longer employed by the organization.
- **Financial hardship** Your employer confirms if you have met the established financial hardship guidelines of your plan.
- **Disability** (under age 59½; not subject to 10% early withdrawal penalty) Under Internal Revenue Code an individual is deemed to be disabled if "he is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or to be of long-continued and indefinite duration." *Note: The Social Security definition of disability does not apply here. Proof of disability may be required by the IRS. The 10% early withdrawal penalty is not imposed on distributions taken due to disability that meets the IRS definition.*
- **Divorce** (under age 59½, not subject to 10% early withdrawal penalty, one-time distribution only) Use this method to move all or a portion of your 403(b), 403(b) Roth, or 457 account to a former spouse under a Qualified Domestic Relations Order (QDRO).

**Important:** Delivery method must be by internal transfer to a TCA by E\*TRADE account.

**Important:** A divorce transfer requires your former spouse to complete their separate personal information and sign in Section 10, in addition to your signature in Section 8. *Note: All information and required signatures must be submitted on one form. Do not send a copy of the QDRO to TCA by E\*TRADE.*

## Section 4: Distribution Amount

Complete either the full distribution instructions in Section 4A or the partial distribution instructions in Section 4B.

**Liquidate assets for cash distribution.** To liquidate assets for a full or partial distribution in cash, contact your Investment Advisor to initiate any liquidations required. If your Investment Advisor needs to liquidate assets to cover the requested cash, the distribution will not be processed until the settlement date for the sells. *Note: If you request to liquidate an asset that cannot be liquidated, we will return the paperwork to your Investment Advisor for clarification and no action will be taken on the request.*

# 403(b) and 457 CUSTODIAL ACCOUNT DISTRIBUTION REQUEST

## Institutional Advisor Services



### A. Full Distribution Instructions, if applicable

For full distributions, select the Full Cash Distribution checkbox. *Note: Distributions requiring the liquidation of assets will be processed after all liquidating trades have settled.*

**Important:** If you are requesting a full distribution, all systematic distributions for the account will be stopped upon receipt of this distribution request.

### B. Partial or Systematic Distribution Instructions, if applicable

For partial or systematic distributions, select the appropriate type of distribution and provide the requested information, if applicable.

- **Dividends and interest only.** All dividends and interest earned by the account during the systematic period will be distributed. *Note: For systematic distributions only.*
- **Gross cash amount.** The gross cash amount is the amount before any tax withholding has been applied. Provide the gross cash amount for any distribution reason, including requesting a RMD amount that has been calculated by you or your tax advisor. *Note: For a systematic distribution, enter the gross cash amount to withdraw each period.*
- **Net Cash Amount.** The net cash amount is the amount after any tax withholding has been applied. Provide the net cash amount for any distribution reason, including requesting a RMD amount that has been calculated by you or your tax advisor. *Note: for a systematic distribution, enter the net amount to withdraw each period.*
- **Required Minimum Distribution (RMD) amount.** TCA by E\*TRADE will calculate your RMD amount based on the information provided in this section. *Note: May be delivered one-time or by a systematic distribution.*

**Full RMD amount.** TCA by E\*TRADE will calculate and distribute the total RMD amount for the year. *Note: Any previous distributions for the year will be ignored.*

**Remaining RMD balance.** TCA by E\*TRADE will calculate the total RMD amount for the year, subtract any previous distributions for the year, and distribute the remaining amount.

**Important:** The RMD calculation will be based on the information available to TCA by E\*TRADE. The account owner is responsible for notifying TCA by E\*TRADE if there are any outstanding rollovers, outstanding transfers, conversions, or recharacterizations that are not reflected on the previous year-end statement.

**Important:** TCA by E\*TRADE will calculate the RMD using the Uniform Lifetime Table unless the sole beneficiary is a spouse more than 10 years younger than the account owner. If the spouse beneficiary is more than 10 years younger, TCA by E\*TRADE will calculate the RMD using the Joint Life Expectancy Table.

- **Prior Year-end Value.** If the account was custodied at a prior custodian on December 31 prior to transfer to TCA by E\*TRADE, please provide the prior year-end value to calculate the RMD.

## Section 5: Withholding

**Important:** The distributions you receive from your retirement account are subject to federal and possibly state income tax. Even if you elect not to have tax withheld, you are liable for payment of income tax on the taxable portion of your distribution. You may also be subject to tax penalties under the estimated tax payment rules if your withholding or payments of estimated tax, if any, are not adequate. *Note: For additional information, consult your tax advisor or the IRS concerning your withholding election.*

### A. Federal Withholding

Check the box indicating the federal withholding and the percent or amount to be withheld or specify that you want no Federal tax withheld. *Note: The total amount withheld must be no less than 20%.*

**Important:** If no selection is made, federal tax withholding of 20% will be withheld. If your reason is Financial Hardship, Disability, or your amount is RMD, you can elect to an amount under 20% or elect not to have federal income tax withheld.

**Important:** If your distribution has mandatory withholding requirements, federal withholding of 20% may be processed even if the 'I elect not to have federal income tax withheld' box is checked.

### B. State Withholding

Check the box indicating the state withholding and the percent or amount to be withheld or specify that you want no state tax withheld. *Note: All state withholding will be rounded to the nearest whole dollar. The account's legal address of record at the time of the distribution determines the state withholding requirements.*

**Important:** State withholding is not available for all states. For a list of states available for withholding and the withholding rules by state, refer to the TCA by E\*TRADE Withholding Information document found online at [www.trustamerica.com/advisor-forms](http://www.trustamerica.com/advisor-forms).

**Important:** If your state has mandatory withholding requirements, state withholding (including withholding on Roth distributions) may be processed even if the 'I elect not to have state income tax withheld' box is checked or no state withholding box is checked.

**Withholding on in-kind security distributions.** For in-kind security distributions, there must be a sufficient cash balance to cover the withholding amounts specified. For withholdings specified as a percentage, the withholding amounts will be calculated on the gross cash amount plus the value of in-kind securities.

## Section 6: Distribution Frequency

Select the appropriate distribution frequency.

**Systematic distribution.** Select the Systematic Distribution checkbox and complete the schedule information.

**Important:** Your first distribution may be delayed to the next scheduled date if this form is received less than 8 days before your first requested withdrawal.

*Note: Systematic distributions will be withdrawn from the models in the account according to the account's model distribution percentages.*

## Section 7: Distribution Method

Select the appropriate distribution method.

**Important:** Funds sent overnight via check or wired may be subject to a fee, which will be deducted from your account balance. Your Investment Advisor can provide you with fee information regarding this transaction.

- **By electronic transfer.** Select the type of electronic transfer and provide the bank information below. If you select either Checking Account or Savings Account, enter your banking information. If you select the Voided Check Provided box, provide a blank check with this form. *Note: Allow 1-2 business days for delivery from the processed date for ACH, and the same or next business day for wires. If the bank account type is not selected, TCA by E\*TRADE will default to checking account.*

**Important:** All systematic distributions will be processed by ACH, even if the By Wire box is selected.

- **By check.** Select the appropriate box indicating the payee and address information for this request. *Note: Allow up to 10 business days for delivery of mailed checks. Overnight delivery is not available for P.O. Box addresses. If no election is made, a check will be sent to the address of record, payable to the account owner.*
- **By transfer/direct rollover.** This method transfers the cash to another retirement or non-retirement account in your name.

Check the box indicating if it is a new or existing TCA by E\*TRADE account. For new accounts, enter the type of account and attach the appropriate TCA by E\*TRADE account application to this form. For existing accounts, provide the TCA by E\*TRADE account number and account type, and account title.

For other institutions, provide the institution name, account title,

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account number, address information and account type.

**Important:** If you want to make a direct rollover into your qualified plan account, please provide your written instructions as well as a signed acceptance letter from the qualified plan's authorized trustee or administrator.

**Section 8: Signature**

Sign and date the form.

**Section 9: Employer or Approved Provider  
Affirmation**

Provide signature of approved provider or employer to authorize distribution, including a divorce transfer.

**Section 10: Divorce Certification, if applicable**

Provide your former spouse's name, social security number, and date of birth. Both you and your former spouse must sign and date the form.

*Note: All information and required signatures must be submitted on one form. Do not send a copy of the QDRO to TCA by E\*TRADE.*

Return your completed form as instructed by your Investment Advisor or your client representative. Questions regarding this form should be directed to your Investment Advisor.