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This form is used to receive a distribution (withdrawal) from your STRATA Trust Company ("STRATA") IRA.

Service fees incurred are not included in the gross distribution amount requested. Refer to STRATA's [IRA Fee Schedule](#) for the applicable fee(s) that your account may incur for this distribution and STRATA's Self-Directed IRA Knowledge Center for additional information on [Distributions](#).

Is this request to satisfy your annual required minimum distribution? Yes No

Section 1 Account Information

I am requesting this distribution as? Accountholder Beneficiary Are you a U.S. citizen or resident alien? Yes No

Beneficiaries – If you request a distribution as a beneficiary, provide the decedent's information in this section.

Accountholder Name		Account Number	
Social Security Number (Last 4 Digits Only)	Daytime Phone	Birthdate	Email
Address of Record			
City		State	Zip
Account Type: <input type="checkbox"/> Traditional <input type="checkbox"/> Roth <input type="checkbox"/> SEP <input type="checkbox"/> SIMPLE		Domicile Tax State for State Withholding	State

Beneficiaries – If you request this distribution as a beneficiary, please put your information in the section below.

Beneficiary Name		Social Security Number (Last 4 Digits Only)
Birthdate	Daytime Phone	Email

Section 2 Type of Distribution (Select One)

➔ Traditional/SEP/SIMPLE IRA

Normal Distribution - I am age 59½ or older.

➔ Roth IRA

Qualified Roth Distribution - I am age 59½ or older and have met the 5-year holding period.

Roth Early Distribution – No exception applies, I am age 59½ and the 5-year holding period has not been met.

➔ Traditional/Roth/SEP/SIMPLE IRA

Early/Premature Distribution - I am not yet age 59½.

- If taking a premature distribution for which an exception applies, including tax levy. Please contact your tax professional to determine if IRS Form 5329 needs to be filed. STRATA only reports the amount as a premature distribution.

Permanent Disability - I am not yet at 59½, and I am permanently disabled within the meaning of IRC Sec 72(m)(7). Please consult your tax professional for assistance. (Traditional IRA - Form 1099-R, Code 3; Roth IRA - Form 1099-R, Code J)

Timely refund of excess or nondeductible contribution plus earnings for tax year: _____
 Gross Distribution: \$ _____ Net Income Attributable \$ _____

Refund of principal amount of excess contribution after tax filing date for tax year: _____
 Gross Distribution: \$ _____ Net Income Attributable \$ _____

Divorce: Must attach a certified copy of the divorce decree or other legal document.

Death: Must attach a certified copy of the death certificate is required.

Revocation: Must be requested within 7 days of account establishment.

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Section 3 Distributions Option Choose Option (1) One-Time or (2) Recurring, then complete each step.

A verbal confirmation from the phone number of record *may* be required for this transaction. If so, a STRATA team member will reach out to confirm your account information and the details of your distribution request including Distribution Option details.

- **Address** - All distributions will be sent to the address of record. If you need a distribution sent to an address other than your address of record, please contact STRATA **before** completing this Distribution Request Form.

Option 1: One-Time Distribution

Step 1: Specify: Partial Distribution Complete Distribution (Account will be closed and termination fee will

Distributions Method: (Select all that apply.)

- All available cash
- Cash in the amount of \$ _____ (Gross Amount)
- In-kind distribution of the asset(s) is shown below. An in-kind distribution fee will be charged. (See STRATA's IRA Fee Schedule.)

Step 2: If we need to liquidate or re-register any asset(s) for this distribution, indicate this instruction in the space below. Otherwise, leave blank.

Liquidate	Re-Register/ In-Kind	Asset Name/Description	# of Shares	Approximate Value
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			

Step 3: Tell us how to send the distribution (1) ACH Transfer, (2) Wire, (3) Check, or (4) Re-register Assets.

<input type="checkbox"/> (1) ACH Transfer			
Bank Name		Bank Phone	
Bank Location	City	State	
ABA Routing #	Must be 9 digits		
Name on Account		Account #	
For Further Credit To		Account #	

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(2) Send Wire A wire fee will be incurred – see STRATA's IRA Fee Schedule.

Bank Name		Bank Phone
Bank Location	City	State
ABA Routing #	Must be 9 digits	
Name on Account		Account #
For Further Credit To		Account #

(3) Send Check A check will be mailed to your address of record, so please verify that STRATA has your current address on file. All checks will be sent via U.S. Mail unless you select overnight delivery.

Make Check Payable to:

Send By U.S. Mail Overnight – see STRATA's IRA Fee Schedule

(4) Send Re-registered Assets In-kind distribution fee will be charged – see STRATA's IRA Fee Schedule.
 Re-registration forms will be sent via U.S. Mail unless specified for overnight delivery.

If you are taking physical possession of precious metals, STRATA will provide your shipping instructions to your depository who will provide them to a third-party carrier shipping service (i.e. FedEx, UPS).

A signature is required for receiving precious metals. STRATA is not responsible for the shipping or delivery of your precious metals nor will STRATA cover any cost associated with the material being reshipped if you are not available to receive the original shipment. You are responsible for accepting the precious metals at the address you provide. It is recommended that you ship your precious metals to a secure location where they can be received in person.

Name

Send By U.S. Mail Overnight – see STRATA's IRA Fee Schedule.

Email Address for Tracking Alerts/Info

Option 2: Partial Recurring Distribution by ACH Transfer

Is this a change to an existing ACH Distribution Instructions? Yes No

Step 1: Specify the frequency and start date: Monthly Quarterly Start Date _____

Step 2: Specify the amount or percentage of distribution.

All available cash

Cash in the amount of \$ _____

Cash in the percentage of _____ %

ACH Transfer

Bank Name		Bank Phone
Bank Location	City	State
ABA Routing #	Must be 9 digits	
Name on Account		Account #
For Further Credit To		Account #

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Section 4 Federal Tax Withholding Election and Information

If withholding is requested, there must be sufficient cash in your account to remit this withholding amount along with the associated withholding fee.

If you do not choose an election, we are required to withhold federal taxes at a flat 10% rate. We will not reverse any federal withholding in the event you neglect to make an election. See *IRS Publication 505: Tax Withholding and Estimated Tax* available on the IRS website, www.irs.gov.

Withholding Notice Information (Section references are to the Internal Revenue Code):

- **Basic Information.** Generally, federal income tax withholding applies to payments made from pensions, profit sharing, stock bonuses, annuities, certain deferred compensation plans, IRAs, and commercial annuities.
- **Purpose of Form W-4R.** Unless you elect otherwise, federal income tax will be withheld from payments from IRAs. You can use IRS Form W-4R/OMB NO. 1545-0074 DEPT. OF TREASURY, INTERNAL REVENUE SERVICE, or a substitute form, such as that contained on this form furnished by STRATA, to instruct STRATA to withhold no tax from your IRA payments or to change previous elections for periodic payments.
- **Nonperiodic Payments—10% Withholding.** Your payer must withhold at a default 10% rate from the taxable amount of nonperiodic payments unless you enter a different rate in Section 4 below. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. Note that the default rate of withholding may not be appropriate for your tax situation. See the specific instructions below for more information. Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including “-0-”) on any payments to be delivered outside the United States and its possessions.
- **More Withholding.** If you want more than the default rate withheld from your payment, you may enter a higher rate in the appropriate area below.
- **Less Withholding (Nonperiodic Payments Only).** Where permitted, you may enter a lower rate within the federal withholding section (including “-0-”) if you want less than the 10% default rate withheld from your payment. If you have already paid, or plan to pay, your tax on this payment through other withholding or estimated tax payments, you may want to enter “-0-”. For more information, please see Publication 505, *Tax Withholding and Estimated Tax*, and Publication 515, *Withhold of Tax on Nonresident Aliens and Foreign Entities*, available from most IRS offices.
- **Caution:** Remember that there are penalties for not paying enough tax during the year, through either withholding or estimated tax payments. New retirees should see Publication 505. It explains the estimated tax requirements and penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your IRA using IRS Form W-4R or substitute version which is part of this form.
- **Statement of Income Tax Withheld from Your IRA.** By January 31 of next year, you will receive IRS Form 1099-R from STRATA showing the total amount of your IRA payments and the total federal income tax withheld during the year. Copies of IRS Form W-4R will not be sent to the IRS by STRATA.
- **Non-resident Aliens.** IRS Form W-8 BEN is required along with this form submission. The IRS default withholding rate is 30% and the form will require one of the following.
 - A U.S. Social Security Number (SSN)
 - A U.S. Individual Taxpayer Identification Number (ITIN)
 - A U.S. Employer Identification Number (EIN)
 - A Foreign Taxpayer Identification Number (FTIN)

I acknowledge that I have read and understand the Withholding Notice Information above and that STRATA is not responsible for determining the appropriateness of the withholding election. I also understand that my federal withholding election is applicable to any subsequent scheduled distributions until I revoke the election under the procedure established by STRATA.

Federal Withholding Election (Fee applies, see STRATA’s IRA Fee Schedule.)

Line 3 - See Appendix A *Marginal Rate Tables*, prior to making a selection for an electronic substitute for IRS Form W-4R to help you select the appropriate withholding rate.

<input type="checkbox"/>	(1) I elect NOT to have federal income tax withheld.
<input type="checkbox"/>	(2) I elect to have federal income tax withheld at a flat 10% rate.
<input type="checkbox"/>	(3) I elect to have federal income tax withheld at a _____ % rate. The listed election percentage may be any whole percentage from 1-100. Any fractional percentage listed will be rounded up to the next whole number percentage.

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Section 5

State Tax Withholding Election and Information

If withholding is requested, there must be sufficient cash in your account to remit this withholding amount along with the associated withholding fee. If you live in a voluntary state, you must provide a specific amount or percentage or elect NOT to have state income tax withheld.

Failure to make a selection when a federal withholding amount has been chosen will result in the minimum amount being withheld as is applicable for your listed state of residence.

State Withholding Election (Fee applies, see STRATA's IRA Fee Schedule.)

Line 3 – If applicable, see Appendix B *State Income Tax and Withholding Information* prior to making your selection to help you select the appropriate withholding rate.

- | | |
|--------------------------|---|
| <input type="checkbox"/> | (1) I elect NOT to have state income tax withheld. |
| <input type="checkbox"/> | (2) I elect to have state income tax withheld per the attached State Income Tax and Withholding Information sheet.
If you live in a voluntary state, you must provide a specific amount or percentage below or select not to elect. |
| <input type="checkbox"/> | (3) I elect to have state income tax withheld at a _____ % rate, which is more than the listed minimum. |

Section 6

Processing Fees

You may refer to STRATA's [IRA Fee Schedule](#), please indicate below how you would like these fees to be paid so that there are no processing delays regarding your request. Typical transaction fees including wire fees, overnight fees, withholding fees, and processing fees.

- Deduct processing fees from cash in the account. I understand this could result in a lesser amount being remitted if there is not sufficient cash in the account.
- Charge fees to the credit card on file ([Fee Payment Authorization](#) form must have previously been submitted for this to be a valid option).
- One-time charge to a credit card ([Credit Card Charge Authorization \(One-Time Charge\)](#) form required).

Section 7

Terms and Conditions

Please contact your tax professional with any questions regarding the possible tax consequences of your distribution. The undersigned hereby authorizes and directs STRATA to distribute funds from my account referenced above in accordance with the instructions completed on this form.

I hereby agree to hold harmless STRATA, and its affiliates and assigns, from any problem arising out of or in any way connected to this request for distribution. I fully understand the tax consequences of the requested distribution, and if necessary, I have consulted a tax or legal professional of my choice and agree to be fully responsible for any taxes. I further certify that no tax advice has been given to me by STRATA. All decisions regarding this withdrawal are my own. I expressly assume the responsibility of any adverse consequences which may arise from this withdrawal, and I agree that STRATA shall in no way be held responsible.

By signing this form, I acknowledge that I have read and understand the **Withholding Notice Information** and that STRATA is not responsible for determining the appropriateness of the withholding election. I also understand that my federal withholding election is applicable to any subsequent scheduled distributions until I revoke the election under the procedure established by STRATA. STRATA may rely on the certification without further investigation or inquiry and shall incur no liability for this distribution request or its processing.

If I plan to take a *series of substantially equal payments* that qualify for penalty exemption under Internal Revenue Code 72(t), by signing this form, I understand that I am solely responsible for the distribution, including maintaining the appropriate cash balance for the distribution(s), and that STRATA is not responsible for monitoring such distribution(s). I further understand that I am solely responsible for the calculation used to derive payment amount(s), and that I should seek competent tax or legal advice from a professional of my choice.

I acknowledge and agree that I will meet the terms of the **Distribution Method** selected as stipulated in **Section 3, STEP 2**.

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I understand service fees may be incurred and are not included in the gross distribution amount requested. I understand that if taking a premature distribution, I may be subject to taxes and/or penalties unless an exception applies.



Accountholder or Beneficiary Signature

Date

Print Name

Form Submission Options

- Fax: 512.495.9554
- Email: Operations@StrataTrust.com
- US Mail: PO Box 23149, Waco, TX 76702
- Overnight: 7901 Woodway Drive, Waco, TX 76712

APPENDIX A: 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. See the instructions below for more information on how to use this table.

Single or Married Filing Separately		Married Filing Jointly or Qualifying Surviving Spouse		Head of Household	
Total Income Over:	Tax Rate for Every Dollar More	Total Income Over:	Tax Rate for Every Dollar More	Total Income Over:	Tax Rate for Every Dollar More
\$0	0%	\$0	0%	\$0	0%
14,600	10%	29,200	10%	21,900	10%
26,200	12%	52,400	12%	38,450	12%
61,750	22%	123,500	22%	85,000	22%
115,125	24%	230,250	24%	122,400	24%
206,550	32%	413,100	32%	213,850	32%
258,325	35%	516,650	35%	265,600	35%
623,950*	37%	460,400	37%	631,250	37%

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

Suggestion for determining withholding. Consider using the Marginal Rate Tables on page 1 to help you select the appropriate withholding rate for this payment or distribution. The tables are most accurate if the appropriate amount of tax on all other sources of income, deductions, and credits has been paid through other withholding or estimated tax payments. If the appropriate amount of tax on those sources of income has not been paid through other withholding or estimated tax payments, you can pay that tax through withholding on this payment by entering a rate that is greater than the rate in the Marginal Rate Tables.

The marginal tax rate is the rate of tax on each additional dollar of income you receive above a particular amount of income. You can use the table for your filing status as a guide to find a rate of withholding for amounts above the total income level in the table.

To determine the appropriate rate of withholding from the table, do the following. Step 1: Find the rate that corresponds with your total income not including the payment. Step 2: Add your total income and the taxable amount of the payment and find the corresponding rate.

If these two rates are the same, enter that rate on line 2 of the IRS W-4R form or in option 3, *Federal Withholding Election* section, of form substitute W-4R contained within STRATA's IRA Distribution Request form or Withholding Notice and Election form. (See Example 1.)

If the two rates differ, multiply (a) the amount in the lower rate bracket by the rate for that bracket, and (b) the amount in the higher rate bracket by the rate for that bracket. Add these two numbers; this is the expected tax for this payment. To get the rate to have withheld, divide this amount by the taxable amount of the payment.

Round up to the next whole number and enter that rate. (See Example 2.)

If you prefer a simpler approach (but one that may lead to overwithholding), find the rate that corresponds to your total income including the payment and enter that rate.

Examples. Assume the following facts for Examples 1 and 2. Your filing status is single. You expect the taxable amount of your payment to be \$20,000. Appropriate amounts have been withheld for all other sources of income and any deductions or credits.

Example 1. You expect your total income to be \$62,000 without the payment. Step 1: Because your total income without the payment, \$62,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$82,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Because these two rates are the same, enter "22".

Example 2. You expect your total income to be \$43,700 without the payment. Step 1: Because your total income without the payment, \$43,700, is greater than \$26,200 but less than \$61,750, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$63,700, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. The two rates differ. \$18,050 of the \$20,000 payment is in the lower bracket (\$61,750 less your total income of \$43,700 without the payment), and \$1,950 is in the higher bracket (\$20,000 less the \$18,050 that is in the lower bracket). Multiply \$18,050 by 12% to get \$2,166. Multiply \$1,950 by 22% to get \$429. The sum of these two amounts is \$2,595. This is the estimated tax on your payment. This amount corresponds to 13% of the \$20,000 payment (\$2,595 divided by \$20,000). Enter "13".

APPENDIX B: STATE INCOME TAX AND WITHHOLDING INFORMATION

Elections regarding dollar amounts and specific percentages may be made for residents of some states by completing the appropriate section of the distribution form. Certain states will require a minimum percentage. The minimum state-required amount will be withheld when applicable. All state withholding amounts will be rounded up to the nearest whole dollar.

Rates are subject to change without notice.

State of Residence	State Income Tax Withholding Information
AK, FL, NH, NV, SD, TN, TX, WA, WY	No state income tax withheld.
AL, AZ, CO, DC*, GA, HI*, ID, IL, IN, KY, LA*, MD, MS*, MT, ND, NJ, NM, NY*, OH, PA, RI, SC, UT*, VA, WI, WV	State income withholding tax is voluntary. A specific withholding percentage must be provided if withholding is elected. Please contact your tax professional with additional withholding questions.
IA, MI, OK	<p>State income tax withholding is required when federal withholding is elected.</p> <ul style="list-style-type: none"> IA: 5.00% of the distribution amount MI: 4.25% of the distribution amount OK: 4.75% of the distribution amount
ME, NE	<p>State income tax withholding is required when federal withholding is elected, unless opted out specifically by the client.</p> <ul style="list-style-type: none"> ME: 5.00% of the distribution amount NE: 5.00% of the distribution amount
CT, DE*, VT	<p>State income tax withholding is required regardless of federal withholding election.</p> <ul style="list-style-type: none"> CT: 6.99% of the distribution amount DE: 5.00% of the distribution amount if federal withholding is elected. If NO federal withholding is elected, 5.00% or more may be withheld. VT: 30.00% of the federal withholding amount
AR, CA, KS, MA, MN, MO, NC, OR	<p>State income tax withholding is required regardless of federal withholding election, unless opted out specifically by the client.</p> <ul style="list-style-type: none"> AR: 3.00% of the distribution amount CA: 10.00% of the federal withholding amount KS: 5.00% of the distribution amount MA: 5.00% of the distribution amount MN: 6.25% of the distribution amount MO: 4.80% of the distribution amount NC: 4.00% of the distribution amount OR: 8.00% of the distribution amount
*Special Circumstances	<ul style="list-style-type: none"> DC: 10.75% state withholding required only if requesting a total distribution, unless opted out, specifically by the client. DE: Can only opt out of federal withholding, not state withholding HI and NY: 0% of the distribution amount LA: Up to 4.80% of the distribution amount when state withholding is elected. MS: 4.70% state withholding required only if an “early” or “excess” distribution is requested UT: 4.55% minimum of the distribution amount when the state withholding is elected.