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## IRA Distribution Request

Tracking Code: **RSBPF7**

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### Name

First Name \*

JOSHUA

Middle Name

M

Last Name \*

CLARDY

Suffix

### Date of Birth

Year \*

1998

### Other Details

SSN/ITIN \*

.....6870

### Contact Details

Email \*

j.clardy@yahoo.com

Email (Confirm) \*

j.clardy@yahoo.com

Daytime Phone No. \*

864-713-0509

We will attempt to reach you by phone and/or email if any additional documentation or verification is required. Please supply the best contact information to ensure we are able to reach you promptly.

## Address Details

### Address Limitations

P.O. Boxes are not acceptable as Residential addresses. Provide the address you use for tax filing.

If you provide a separate mailing address, the mailing address will be saved and stored for reference as your primary address of record. All future mail correspondence will be sent to this address including statements and tax reporting.

**Note:** FedEx cannot be sent to a P.O. Box address.

## Residential Address

Country \*

United States

Address Line 1 \*

122 ARTHUR DR

Address Line 2

City \*

PIEDMONT

State \*

South Carolina

Zip \*

29673

## Mailing Address

Is your Mailing Address the same as your Residential Address? \*

☒ Yes

☐ No

## Age Calculation

We have calculated that you are not yet 59½

Distributions processed on an IRA when the taxpayer has not reached age 59½ may be subject to additional IRS penalties and fees.

Do you agree with this calculation? \*

☒ Yes

☐ No

## Citizenship

Which of the following best describes you? \*

- ☒ I am a U.S. Citizen / U.S. Person (including Resident Alien)
- ☐ Other

## Account Details

Account Type

Account Title

Account Number

## Inherited Account

A retirement account that is left to a beneficiary after the owner's death.

Did you inherit this account as a beneficiary of the account owner? \*

- ☐ Yes
- ☒ No

## Distribution from a Traditional IRA

### What type of distribution do you want to take?

5. **Paid to directly to me:** If you want to withdraw funds from your IRA, payable directly to you, please click the **"Withdraw my funds from my IRA and pay directly to me"** button below. Once your request is processed, your funds will be paid directly to you. Be sure you understand whether any taxes or penalties may apply - read the information in the box below about Early (Premature) Distribution.
6. **Direct rollover to my new employer's retirement plan:** If you want to directly roll over your IRA balance to your new employer's retirement plan, click the **"Directly roll over to my new employer's retirement plan"** button below. You will be directed to the section of this form where you will need to provide information about your employer. Once your request is processed, a check will be issued, **payable to your employer's retirement plan**, and mailed to you. You will need to send the check to your employer's retirement plan in order to complete the rollover.

Choose your distribution type: \*

- ☒ Withdraw my funds from my IRA and pay directly to me
- ☐ Directly roll over to my new employer's retirement plan

### Early (Premature) Distribution

This distribution type would apply to a tax payer that has not reached age 59 ½.

- Distributions before age 59 ½ may be subject to ordinary income tax and may also be subject to a 10% federal penalty tax unless you meet an IRS exception.
- A distribution from a SIMPLE IRA taken within two years of the date the first contribution was made may be subject to a 25% penalty tax unless you meet an IRS exception.

**Note:** If you believe an exception may apply to the early withdrawal penalty, you should consult your tax advisor to determine if you need to submit IRS Form 5329 to the IRS.

Confirmation

Early Distribution (penalties may apply)

Based on the information you have provided your distribution will be processed as an Early Distribution. We urge you to consult a tax advisor if you believe an exception to the early withdrawal penalty applies.

Do you confirm this selection? \*

- ☒ Yes
- ☐ No

Account Information

Cash available for distribution

\$0.01

Available Liquid Assets

You will be prompted to enter your distribution amount on a later screen.

| Description                                   | Shares   | Market Value |
|---|----------|--------------|
| The Standard Guaranteed Fixed Interest Fund Z | 9.926000 | \$269.07     |
| Total Traditional Asset Value                 |          | \$269.07     |

**NOTE:** Asset values are based on yesterday’s closing prices.

Would you like to take a one-time distribution or systematic payments? \*

- ☒ One-time Distribution
- ☐ Systematic Payments (Cash assets will be automatically liquidated)

Would you like to take a Total or Partial Distribution? \*

- ☒ Total Distribution (your account will be closed)
- ☐ Partial Distribution

If additional funds are received for your account after the total distribution, the funds will be automatically distributed to you via the same Payment Delivery method and Tax Withholding you select in this form.

## Federal Tax Withholding Election

How much Federal Tax would you like withheld? \*

- ☒ DO NOT withhold any federal tax from my distribution
- ☐ I elect to have 10% federal tax withheld from my distribution
- ☐ Other (must be greater than 10%)

## Total Tax Withholding Election

Total Tax Withheld

00.00%

## Payment Method

### Available Payment Methods

Inspira is now offering a Prepaid Debit Card as a distribution payment option. This card provides multiple alternatives to access your money:

- Use the card for purchases everywhere debit cards are accepted
- Obtain cash from ATM's

Information on accessing these options will be mailed to you along with the prepaid card. Allow additional time for receipt via US mail.

\* The Prepaid Debit Card is subject to terms and conditions from the card issuer that will be included in the mailing. The Prepaid Debit Card may also be subject to fees and charges from the third-party vendor and/or card issuer.

Which Payment Method would you like? \*

- ☒ Check
- ☐ Prepaid Debit Card
- ☐ Direct Deposit to Bank (ACH)

## Delivery Method

Which Delivery Method would you like? \*

- ☒ U.S. Mail

### Delivery Summary

Your Check will be sent to **122 ARTHUR DR, PIEDMONT, SC, 29673, US** via U.S. Mail.

## Fees

### Fee charges associated with this distribution

Account Closing Fee

\$ 20

☒ I have read and understand the fees applicable to my Account. \*

## Authorization & Certification

### Electronic Services Agreement

This distribution request is being conducted electronically.

To review the Electronic Services Agreement, [click here](#).

Check the box below to agree to the Electronic Services Agreement.

☒ By checking this box, I certify that I have reviewed the Electronic Services Agreement and I agree to conduct transactions electronically and to use my e-signature according to the terms of this Agreement. \*

### IMPORTANT: TAXPAYER CERTIFICATION

If you are a U.S. Citizen or U.S. Resident Alien for United States tax purposes\*, by signing this form, you certify as follows:

**U.S. CITIZEN OR U.S. RESIDENT ALIEN TAXPAYER CERTIFICATION:** Under penalties of perjury, I certify that: (1) the number shown on this form is my correct tax identification number; (2) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding, or if so notified, such notice is no longer in effect; and (3) I am a U.S. citizen or other U.S. person (including a U.S. resident alien). The IRS does not require that I consent to any provisions of this document other than this certification to avoid backup withholding.

If you are a Non-U.S. Person for United States tax purposes\*, by signing this form, you certify as follows:

**NON-U.S. PERSON TAXPAYER CERTIFICATION:** Under penalties of perjury, I certify that: (1) the information on this form with respect to my country of citizenship and foreign tax ID number (if any) is true, correct and complete; and (2) I am not a U.S. person. The IRS does not require that I consent to any provisions of this document other than this certification to establish my status as a non-U.S. person and, if applicable, obtain a reduced rate of withholding. The IRS has stated that for a resident in a FATCA partner jurisdiction, certain tax account information may be provided to such jurisdiction of residence. A beneficial owner claiming certain special rates and conditions with respect to a tax treaty between the United State and another country will need to complete IRS Form W-8BEN. If you think this may apply to you, please discuss with your tax advisor. Inspira Financial does not provide tax advice.

\*If you are not sure of your citizenship/residence status for U.S. tax purposes, please see IRS guidelines for international taxpayers – foreign persons on the IRS website and/or discuss with an accountant or tax advisor. Inspira Financial does not provide tax advice.

## Authorization & Certification

I authorize and direct Inspira as IRA Custodian to make the above withdrawal, and certify that all of the information I have provided on this form is correct. I understand that I am responsible for all federal, state and local taxes, as well as estimated tax payments and penalties, if any. I understand that IRS regulations require tax withholdings at 10% for distributions from non-Roth IRAs unless I elect otherwise.

I understand that distributions from a Roth IRA that are attributable to either converted amounts, retirement plan rollover basis or earnings may be taxed as ordinary income and subject to a 10% early withdrawal penalty unless certain requirements are met.

I understand that all non-Roth IRA distributions will generally be taxed as ordinary income and may be subject to a 10% early withdrawal penalty if taken before age 59½. If I am over 72, I accept full responsibility for withdrawing from my Traditional or Rollover IRA the minimum required distribution required by the Internal Revenue Code.

Under penalties of perjury, I declare that the information I have provided on this form to the extent it relates to any state tax withholding election is correct and complete. I have consulted my tax advisor to the extent I have determined necessary concerning the taxable effect of this withdrawal; and I certify that Inspira Financial has not provided me with tax, investment or legal advice. I indemnify Inspira Financial Trust, LLC, its affiliates, successors, and assigns from any and all liability arising from this withdrawal.

## [IRA Disclosure and Custodial Agreement](#)

☒ By checking this box, I am providing my e-signature which I intend it to be legally valid and binding as my signature to confirm the authorizations and certifications I have made and agreed to above. \*