

TRADITIONAL IRA WITHDRAWAL

member's name:		member account no.:	
member 5 lidille.		~	
		daytime phone no.:	
address:		~	
~		social security no.:	
~		XXX-XX-~ withdrawal amount:	
~		withdrawar amount.	
country: ~		~_ check if complete close of IRA	
Note: If you live in a foreign country or you are not a U.S. Citizen or non-			
withdrawal can be processed. Revocation of new IRA. (Must be within 7 days of initial deposit – HDQCU only).			
CHECK THE APPROPRIATE TYPE OF WITHDRAWAL			
Service Center Withdrawals	Withdrawa	Is processed by IRA Specialist – HDQCU	
1 -PRIOR TO AGE 59.5 — Withdrawal subject to 10%	2 – CONVERSION TO A ROTH IRA.		
IRS imposed penalty if not deposited as a rollover Into an IRA within 60 days from date of receipt. If you	☐ EXCESS CONTRIBUTION WITHDRAWAL — I made this excess contribution		
elect to use this distribution as a rollover deposit, effective January 1, 2015, an IRA owner may complete only <u>ONE</u> IRA rollover per 365 days, regardless of how many IRAs owned without differentiating between Traditional, ROTH, and SEP IRAs.		on(Check one box below.) 8 CURRENT YEAR EXCESS CONTRIBUTION — Withdrawn BEFORE TAX	
		'URN due date. Contribution was made in the same year as this with-	
		drawal. Income attributable to the excess contribution may be subject to a	
		t0% IRS penalty. P PRIOR YEAR EXCESS CONTRIBUTION — Withdrawn BEFORE TAX	
interest withdrawals must be documented on your Federal Income Tax Return.		RETURN due date. Contribution was made in the year prior to this with-drawal. Income attributable to the excess contribution may be subject to	
		definition in tax code section 72(m)(7).	□ 0 DIRECT TRANSFER TO AN IRA OWNED BY MY SPOUSE— This form must be signed by member in addition to receiving the properly signed transfer form from the other institution. We also require a copy of the divorce decree.
☐ 7 –OVER AGE 59.5 — May be deposited as a rollover			
deposit to an IRA within 60 days from date of receipt.	☐ PERIODIC DISTRIBUTIONS –over age 59 ½. If age 70 ½ or older, do not		
If you elect to use this distribution as a rollover deposit, effective January 1, 2015, an IRA owner may	complete this form. Please complete a Traditional IRA Required Minimum		
complete only ONE IRA rollover per 365 days, regardless	Distribution form. \$ ☐ Monthly ☐ Quarterly ☐ Yearly		
of how many IRAs owned without differentiating between Traditional, ROTH, and SEP IRAs.	Starting		
	(month) (year) MONTHLY DIVIDEND WITHDRAWALS – over age 59 ½.		
]		
Mail to: home address			
or Deposit to my Alliant CU: savings	☐ supplemental savings ☐ Alliant checking		
Remarks: Please refer to IRA custodial agreement and disclosure statement for further information.			
WITHHOLDING NOTICE Payments from your IRA are subject to Federal Income Tax withholding unless you elect not to have withholding. If you do not check the			
Federal "No withholding" election box, Federal withholding will be taken from your payment. You may change your withholding election at any time prior to a disbursement.			
Withholding from IRA payments, when combined with other withholding, MAY relieve you from payment of estimated income tax. However, you may still			
be responsible for payment of estimated tax even if you elect to have withholding from these payments. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are insufficient. The amount of Income Tax you pay is not affected by your withholding decision.			
WITHHOLDING ELECTION Federal (check one) State (check one)			
☐ Withholding: I want 10% Federal Income Tax withheld from my payment(s).		Residents of California Only	
		Withholding: I want State Income Tax withheld from my payment(s).	
		1% withheld for State of California.	
		No withholding: I do not want State Income Tax withheld from my payment(s).	
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credit union representative's authorized signature date		mber's signature (required) date	