

**1 Account Information** *(you must have an Entrust account)*

NAME <i>(as it appears on your account application)</i>	ENTRUST ACCOUNT NUMBER	ACCOUNT TYPE <i>(Traditional, Roth, SEP, etc.)</i>
EMAIL ADDRESS <i>(required)</i>		DAYTIME PHONE NUMBER
MAILING ADDRESS <i>(must be on file with Entrust)</i>		
DISTRIBUTION AMOUNT <i>(minimum \$100)</i>		
\$		

**2 Distribution Type/Frequency**

**NOTE: Any withholding elected below will be applied to any amount indicated in this section. The Entrust Group myDirection Card will be funded net of any tax withholding, if applicable.**

<b>Distribution Type</b>			
<input type="checkbox"/> DISTRIBUTION OVER AGE 59 ½	<input type="checkbox"/> REQUIRED MINIMUM DISTRIBUTION OVER AGE 70 ½		
<b>Set Up Recurring Card Funding</b>			
<input type="checkbox"/> YES <i>(if yes, please complete Frequency of Recurring Card Funding below)</i>	AMOUNT: \$		
<input type="checkbox"/> NO			
<b>Frequency of Recurring Card Funding</b>			
<input type="checkbox"/> ANNUALLY	<input type="checkbox"/> QUARTERLY	<input type="checkbox"/> MONTHLY	<input type="checkbox"/> OTHER:
START DATE:		END DATE:	

**3 Notice of Income Tax Withholding on Distributions**

**Initial Here:** The distributions you receive from your individual retirement account, ESA, or HSA established with The Entrust Group are subject to federal income tax withholding unless you elect not to have withholding apply. You may elect not to have withholding apply to your distribution payments by completing the "Withholding Election" section below. If you elect not to have withholding apply to your distribution payments, or if you do not have enough federal income tax withheld from your distribution, you may be responsible for payment for tax(es) due. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient. You acknowledge that you have read the Notice of Withholding and have completed the Withholding Election below. You further certify that no tax advice has been given to you by the Administrator and/or Custodian, that distributions are reported to the IRS, and that all decisions regarding this withdrawal are your own. You expressly assume the responsibility for any adverse consequences which may arise from this withdrawal and you agree that the Administrator or Custodian shall in no way be responsible for those consequences.

<b>Federal Withholding</b>	<b>State Withholding</b>
<input type="checkbox"/> I ELECT NOT TO HAVE FEDERAL INCOME TAX WITHHELD FROM MY DISTRIBUTION(S) <input type="checkbox"/> I ELECT TO HAVE _____% FEDERAL INCOME TAX WITHHELD <i>(must be greater than 10%)</i> <input type="checkbox"/> IN ADDITION TO THE PERCENTAGE <i>(indicated above)</i> , I ELECT TO HAVE \$_____ FEDERAL INCOME TAX WITHHELD FROM MY DISTRIBUTION	<input type="checkbox"/> I ELECT NOT TO HAVE STATE INCOME TAX WITHHELD FROM MY DISTRIBUTION(S) <input type="checkbox"/> I ELECT TO HAVE _____% STATE INCOME TAX WITHHELD FROM MY DISTRIBUTION* *State withholding will only be processed for the following state: California

## 4 Fees and Limits

Fees	
Set-Up Fee	\$0
Monthly Maintenance Administration Fee	\$0
CitiBank Account Maintenance Fee <i>(if applicable—see below)</i>	\$3
All Domestic non-Citibank (Out of Network) ATM withdrawals <i>(per transaction)</i>	\$2
ATM outside of the US (International) ATM withdrawal fees <i>(per transaction)</i>	\$3.50
International Transaction Fee <i>(per transaction)</i>	3.00%
ATM Inquiry Fee <i>(per transaction)</i>	\$.75
ATM Decline Fee <i>(per transaction)</i>	\$.75
Point of Sale/Signature Transaction Fee	\$0**
Decline Point of Sale Fee <i>(per transaction)</i>	\$.75
Card Re-Issuance Fee <i>(lost or stolen cards)</i>	\$6.95
Non-Sufficient Funds (NSF) Transaction <i>(no daily maximum limit)</i>	\$25
** ATM owner/merchant operator may impose a fee for using their ATM or terminal. Fees are deducted from your card.	
Limits	
Minimum Opening Balance	\$100
ATM Withdrawal Daily Limit <i>(Domestic or International)</i>	\$1,000*
Signature Based Transactions	\$10,000*
* Limits are based on a 24 hour period. Different transaction limits may apply, depending on the terminal or ATM used.	
Description	
<p><b>CitiBank Account Maintenance Fee:</b> Subject to applicable law, a monthly maintenance fee will be applied to all accounts, provided that the fee for months 1-6 will not be collected until the 6 month anniversary date. Fees thereafter will be collected monthly. Fees will be waived if the following criteria are met: 1)There have been funds added to your account in last 3 months; 2)There have been purchases made with your account in last 3 months. The charge will be recurring each month unless the account is active as stated in (1) and (2) above or the balance of the account is \$0.00.</p>	
<p><b>International Transaction Fee:</b> A 3% fee will be applied to all transactions made outside the United States. This fee is included in the total amount of the settled transaction. See the Terms of Use for additional information regarding Foreign Transactions.</p>	

**5 Acknowledgement**

I understand that my account is self-directed and that the Administrator and/or Custodian will not review the merits, legitimacy, appropriateness and/or suitability of any investment in general, including, but not limited to, any investigation and/or due diligence prior to making any investment, or in connection with my account in particular. I acknowledge that I have not requested that the Administrator and/or Custodian provide, and the Administrator and/or Custodian have not provided, any advice with respect to the investment directive set forth in this The Entrust Group myDirection Visa® Prepaid Card Application. I understand that it is my responsibility to conduct all due diligence, including, but not limited to, search concerning the validity of title, and all other investigation that a reasonably prudent investor would undertake prior to making any investment. I understand that neither the Administrator nor the Custodian determine whether this transaction is acceptable under the Employee Retirement Income Securities Act (ERISA), the Internal Revenue Code (IRC), or any applicable federal, state, or local laws, including securities laws. I understand that it is my responsibility to review any investments to ensure compliance with these requirements.

I understand that neither the Administrator nor the Custodian is a "fiduciary" for my account and/or my investment as such terms are defined in the IRC, ERISA, and/or any applicable federal, state or local laws. I agree to release, indemnify, defend and hold the Administrator and/or Custodian harmless from any claims, including, but not limited to, actions, liabilities, losses, penalties, fines and/or claims by others, arising out of this The Entrust Group myDirection Visa® Prepaid Card Application and/or this investment, including, but not limited to, claims that an investment is not prudent, proper, diversified or otherwise in compliance with ERISA, the IRC and/or any other applicable federal, state or local laws. In the event of claims by others related to my account and/or investment wherein Administrator and/or Custodian are named as a party, Administrator and/or Custodian shall have the full and unequivocal right at their sole discretion to select their own attorneys to represent them in such litigation and deduct from my account any amounts to pay for any costs and expenses, including, but not limited to, all attorneys' fees, and costs and internal costs (collectively "Litigation Costs"), incurred by Administrator and/or Custodian in the defense of such claims and/or litigation. If there are insufficient funds in my account to cover the Litigation Costs incurred by Administrator and/or Custodian, on demand by Administrator and/or Custodian, I will promptly reimburse Administrator and/or Custodian the outstanding balance of the Litigation Costs. If I fail to promptly reimburse the Litigation Costs, Administrator and/or Custodian shall have the full and unequivocal right to freeze my assets, liquidate my assets, and/or initiate legal action in order to obtain full reimbursement of the Litigation Costs. I also understand and agree that the Administrator and/or Custodian will not be responsible to take any action should there be any default with regard to this investment.

I am directing you to complete this transaction as specified above. I understand that no one at Administrator and/or Custodian has authority to agree to anything different than my foregoing understandings of Administrator's and/or Custodian's policy. If any provision of this The Entrust Group myDirection Visa® Prepaid Card Application is found to be illegal, invalid, void or unenforceable, such provision shall be severed and such illegality or invalidity shall not affect the remaining provisions, which shall remain in full force and effect. For purposes of this The Entrust Group myDirection Visa® Prepaid Card Application, the terms Administrator and Custodian include The Entrust Group, its agents, joint ventures, affiliates and/or business associates. I declare that I have examined this document, including accompanying information, and to the best of my knowledge and belief, it is true, correct and complete.

I agree to release, indemnify, defend and hold Administrator and Custodian harmless from any claims arising from the issuance of The Entrust Group myDirection Visa® Prepaid Card in compliance with ERISA, the Internal Revenue Code or any other applicable federal, state or local laws. I assume all responsibility in ensuring that the Administrator is provided with full instructions (including, but not limited to, amounts, account number, tax withholding, etc.). This shall be valid and in full force and effect until revoked in writing to Administrator. I authorize the Administrator to receive statements and transaction information related to The Entrust Group myDirection Visa® Prepaid Card. I understand this is necessary for proper record keeping and reporting under IRS rules and regulations. The Administrator will NEVER disburse or sell any client information without the signed approval of you, as its client. I understand that in no event shall the Administrator be liable for any consequential, special, incidental, punitive, or indirect loss or damage which you may incur or suffer in connection with this agreement, The Entrust Group myDirection Visa® Prepaid Card, unauthorized transactions or authorized transactions.

***I have read and understood the disclosure above.***

**SIGNATURE:**

**DATE:**