

BRIDGEWAY INHERITED IRA DISTRIBUTION REQUEST FORM

For non-reportable transfers, please complete and submit the appropriate receiving custodian's trustee-to-trustee transfer of assets form.

Please Print

1. IRA OWNER (Deceased) and BENEFICIARY INFORMATION

Original IRA Owner:

Name: _____

Social Security Number: _____

Date of Birth: _____

Date of Death: _____

Important: If the owner of a traditional, SEP or SIMPLE IRA died on or after the Required Beginning Date for RMD distributions (see Required Beginning Date on the last page of this document) and had not distributed their RMD amount due in the year of death, the amount must be distributed to the beneficiary(ies) prior to establishing an inherited IRA.

- As the designated beneficiary, trustee, executor, or personal representative I certify that the IRA owner's RMD, due in the year of death, has been satisfied. Year of Death _____

Beneficiary, Trustee, Executor, Authorized Representative (or Responsible Individual, if beneficiary is a minor) Information:

Name: _____

Daytime Telephone: () _____

Social Security Number or EIN under which the Inherited IRA account is registered: _____

Type of Beneficiary (choose one):

- Spouse – person married to the IRA owner as of their date of death
- Non-spouse individual beneficiary of the original owner (if you are the beneficiary of an account already registered as an Inherited IRA choose Successor Beneficiary below)
- Minor child of the original IRA owner
- An entity such as an estate, charity, or trust (other than a qualified "look-through" trust),
- A qualified "look-through" trust; the owner died in 2019 or prior. By choosing this election I affirm I have consulted a qualified tax and/or legal professional and this trust is eligible for life expectancy distributions based on the date of birth of the oldest beneficiary of the trust

 Month / Day / Year
- A qualified "look-through" trust; the owner died on or after 1/1/2020. By choosing this election I affirm I have consulted a qualified tax and/or legal professional and affirm the trust meets all requirements for life expectancy distributions to be made based on the date of birth

 Month / Day / Year
- Successor beneficiary or second-generation beneficiary (the original owner's beneficiary named you as the beneficiary of their Inherited IRA)

2. INHERITED IRA ACCOUNT INFORMATION

Please complete one option below:

- I have an existing Inherited IRA – Enter your Account Number: _____
- I am establishing a new Inherited IRA and an Application is attached for (select one) Inherited Traditional IRA or Inherited Roth IRA

Important: If the inherited IRA is (or was) transferred from another institution, please provide the prior year-end account value.

Prior year-end account value \$ _____

3. ELECTION FOR ONE-TIME DISTRIBUTION CHOOSE ONE

Important: Required distributions must generally commence by the end of the year following the year of death. Any amount distributed from an inherited IRA account cannot be redeposited back into the account. All distributions from inherited IRAs are reported as death distribution on IRS Form 1099-R under Code 4 in Box 7.

- Liquidate Entire Account (skip to Section 6 Delivery Instructions)
- One-Time Partial Distribution - Dollar Amount \$ _____ (or) Shares _____
 (skip to section 5 Distribution allocation)

4. ELECTION FOR SYTEMATIC WITHDRAWAL

Important: Required distributions must commence by the end of the year following the year of death. Any amount distributed from an inherited IRA account cannot be redeposited back into the account. All distributions from inherited IRAs are reported as death distribution on IRS Form 1099-R under Code 4 in Box 7.

Specify your automatic withdrawal plan type below. Due to passage of the SECURE Act legislation, distribution rules for IRA beneficiaries have changed. You should consult a tax advisor prior to completing this form.

- If the original account owner passed away in 2019 or before, complete 4a, skip 4b, and complete 4c
- If the original account owner passed away in 2020 or after, skip 4a and complete 4b and 4c

4a. SYSTEMATIC DISTRIBUTIONS OPTIONS - OWNER PASSED ON OR PRIOR TO DECEMBER 31, 2019

Periodic Distribution of a Specific Dollar Amount \$ _____ If you choose this option rather than one of the options offered below, you may not meet the RMD requirements for your account. You are responsible for ensuring that RMD requirements are met.

OR

Periodic Distribution - Five-Year Rule – Available to designated beneficiaries, trust, charity, entity, or estate beneficiaries when the date of death is prior to the owner's Required Beginning Date for RMDs - This option is always available for Inherited Roth IRAs.

The amount of each payment will vary. The custodian will calculate the amount of each payment by dividing the balance of each fund on the business day prior to each distribution by the remaining number of payments. The number of payments will be based on start date and frequency you select in section 4c and an end date of the 5th year after the year of death provided in section 1. Please note that you are responsible for ensuring that the full balance is redeemed by 12/31 of the 5th year.

OR

CALCULATE LIFE EXPECTANCY DISTRIBUTIONS – SELECT ONE OPTION BELOW - Available to designated beneficiaries and qualified "look-through" trust beneficiaries regardless of the age of the owner at time of death and to non-qualified "look-through" trust, charity, entity, or estate beneficiaries when the date of death is on or after the owner's Required Beginning Date for RMDs.

Spouse or a Trust with the spouse as sole beneficiary of the trust which meets the provisions of a qualified "look-through" trust, as defined in IRS Publication 590-B *Distributions from Individual Retirement Arrangements (IRAs)*. Use spouse beneficiary's single life expectancy recalculated each year

Spouse or a Trust with the spouse as beneficiary of the trust which meets the provisions of a qualified "look-through" trust, as defined in IRS Publication 590-B *Distributions from Individual Retirement Arrangements (IRAs)*. Use spouse beneficiary's single life expectancy calculated in the year following the year of death reduced by one each year thereafter

Non-Spouse Beneficiary life expectancy calculated in the year following the year of death reduced by one for each year after.
Note: If the owner died on or after their Required Beginning Date for RMD and had a longer life expectancy based on their age at the time of their death, the owner's life expectancy will be used.

Qualified "look-through" trust as defined in IRS Publication 590-B *Distributions from Individual Retirement Arrangements (IRAs)* and the owner died in 2019 or prior. By choosing this election I affirm I have consulted a qualified tax and/or legal professional and this trust is eligible to use a life expectancy calculation and I am providing the date of birth of the oldest beneficiary of the trust

_____/_____/_____
Month Day Year

Note: If the owner died on or after their Required Beginning Date for RMD and had a longer life expectancy based on their age at the time of their death, the owner's life expectancy will be used.

Charity, estate, or a trust other than a qualified "look-through" trust, or other entity beneficiary. The owner's date of death was on or after their Required Beginning Date for RMDs, and payments are calculated based on the owner's age at the time of their death.

4b. SYSTEMATIC DISTRIBUTIONS OPTIONS - OWNER PASSED AWAY ON OR AFTER JANUARY 1, 2020

Periodic Distribution of a Specific Dollar Amount \$ _____ If you choose this option rather than one of the options offered below, you may not meet the RMD requirements for your account. You are responsible for ensuring that RMD requirements are met.

OR

Periodic Distribution - Five-Year Rule – Available to trust, charity, entity, or estate beneficiaries when the date of death is prior to the owner's Required Beginning Date for RMDs - This option is always available for Inherited Roth IRAs.

The amount of each payment will vary. The custodian will calculate the amount of each payment by dividing the balance of each fund on the business day prior to each distribution by the remaining number of payments. The number of payments will be based on start date and frequency you select in section 4c and an end date of the 5th year after the year of death provided in section 1. Please note that you are responsible for ensuring the full balance is redeemed by 12/31 of the 5th year.

OR

Periodic Distribution - Ten-Year Rule – Available to Designated Beneficiaries who are not Eligible Designated Beneficiaries without regard to whether the date of death is prior to or on/after the owner's Required Beginning Date for RMDs - This option is always available for all Inherited IRAs with a Designated Beneficiary who is not an Eligible Designated Beneficiary.

The amount of each payment will vary. The custodian will calculate the amount of each payment by dividing the balance of each fund on the business day prior to each distribution by the remaining number of payments. The number of payments will be based on start date and frequency you select in section 4c and an end date of the 10th year after the year of death provided in section 1. Please note that you are responsible for ensuring the full balance is redeemed by 12/31 of the 10th year.

OR (Continued on Next Page)

7a. FEDERAL TAX WITHHOLDING ELECTION (applies to all Inherited IRAs including Roth Inherited IRAs)

Federal income tax will be withheld at the rate of 10% from any distribution, subject to the IRS withholding rules, unless you elect or have previously elected out of withholding. Tax will be withheld on the gross amount of the payment even though you may be receiving amounts that are not subject to withholding because they are excluded from gross income. This withholding procedure may result in excess withholding on the payments. If you elect to have no federal taxes withheld from your distribution, or if you do not have enough federal income tax withheld from your distribution, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient. If you are completing this form, your below election will remain in effect until such time as you make a different election in writing to the Custodian.

Please select one of the following:

- Do not withhold federal income tax. (This option is only available for accounts registered with an address in the United States.)
- Withhold 10% federal income tax
- Withhold _____% federal income tax (must be more than 10%)

7b. STATE TAX WITHHOLDING ELECTION (applies to all Inherited IRAs including Roth Inherited IRAs)

Your state of residence will determine your state income tax withholding requirements, if any. Those states with mandatory withholding may require state income tax to be withheld from payments if federal income taxes are withheld or may mandate a fixed amount regardless of your federal tax election. Voluntary states let individuals determine whether they want state taxes withheld. Some states have no income tax on retirement payments. Please consult with a tax advisor or your state's tax authority for additional information on your state requirements.

- I elect **NOT TO** have state income tax withheld from my retirement account distributions (only for residents of states that do not require mandatory state tax withholding).
- I elect **TO** have the following dollar amount or percentage withheld from my retirement account distribution for state income taxes (for residents of states that allow voluntary state tax withholding). \$ _____ or _____ %

8. AUTHORIZATION

I certify that I am the individual authorized to make these elections and that all information provided is true and accurate. I further certify that the Custodian, the sponsor, or any agent of either of them has given no tax or legal advice to me, and that all decisions regarding the elections made on this form are my own. The Custodian is hereby authorized and directed to distribute funds from the account in the manner requested. The Custodian may conclusively rely on this certification and authorization without further investigation or inquiry. I expressly assume responsibility for any adverse consequences which may arise from the election(s) and agree that the Custodian, sponsor, and their agents shall in no way be responsible, and shall be indemnified and held harmless, for any tax, legal or other consequences of the election(s) made on this form.

X
Authorized Signature (Beneficiary, Trustee, Executor, Responsible Individual, or Personal/Legal Representative) Date:

Please review the Bridgeway prospectus for Medallion Signature Guarantee stamp requirements.

Medallion Signature Guarantee Stamp and Signature: An eligible guarantor is a domestic bank or trust company, securities broker/dealer, clearing agency or savings association that participates in a medallion program recognized by the Securities Transfer Agents Association. The three recognized medallion programs are the Securities Transfer Agents Medallion Program (known as STAMP), Stock Exchanges Medallion Program (SEMP), and the Medallion Signature Program (MSP). A notarization from a notary public is NOT an acceptable substitute for a signature guarantee.

Medallion Signature Guarantee Stamp

Mail to the following:	First Class Mail:	Overnight Mail:	Customer Service:
	Bridgeway Funds P.O. Box 9860 Providence, RI 02940	Bridgeway Funds 4400 Computer Drive Westborough, MA 01581	1-800-661-3550