



ROTH IRA CHECKLISTS

409 Silverside Road, Suite 105
Wilmington, DE 19809
P: 866.540.9364
F: 302.791.5788
www.thebancorpbank.com

Please follow the appropriate checklists to ensure all documents are complete before submitting them to The Bancorp.

If you are not ready to close the Account but wish to assert ownership of it and designate your beneficiary(ies), complete Checklist 1. When you are ready to close the Account you will be required to complete Checklist 2.

If you wish to close the Account, complete Checklists 1 and 2. The closure process cannot begin until all documents are received, all required sections are complete, and your identity has been verified. Missing or incomplete documents will delay processing of your request.

How to Submit Documents

Please visit us at thebancorpbank.com to securely submit your documents online.

You may also submit your documents by mail, using the postage-paid envelope included in your Welcome Kit or your own envelope, or by fax, to:

The Bancorp Bank
ATTN: Safe Harbor Roth IRA
409 Silverside Road
Suite 105
Wilmington, DE 19809
Fax: 302.791.5788

IMPORTANT

TO REVOKE THE ACCOUNT, YOU MUST SEND THE COMPLETED AND NOTARIZED DOCUMENTS USING ONLY FIRST-CLASS MAIL TO THE ADDRESS INDICATED ABOVE, OR BY USING THE POSTAGE-PAID ENVELOPE INCLUDED IN YOUR WELCOME KIT, WITHIN THE TIMEFRAME DISCLOSED IN THE DISCLOSURE STATEMENT.

Checklist 1

<input type="checkbox"/>	PART 1: IRA Owner/Beneficiary Information*
<input type="checkbox"/>	PART 4: Beneficiary Designation: Designate Primary and/or Contingent Beneficiaries.
<input type="checkbox"/>	PART 6: Adoption and Acknowledgment: Date and sign this section in the presence of a notary public.
<input type="checkbox"/>	PART 10: TIN Certification: Date and sign this section in the presence of a notary public.
<input type="checkbox"/>	PART 11: Notary Acknowledgment: This section must be notarized to ensure all signing parties executed the agreement willingly, under their own power, and verified their identity in the presence of the notary public.

*If you are a beneficiary asserting ownership over a deceased IRA owner's account, skip PART 1A and complete PART 1B with your information and enclose the death certificate and any other required documents. **If you wish to close the account, please select 'Inherited IRA distribution' in PART 7 and provide the IRA owner's name and Social Security number.**

Note: PARTS 2, 3, and 5 do not require your signature or additional information to be provided, but it is important that you review each to understand your rights as the Safe Harbor account holder.

Note: If submitting an online closure request, you must re-enter the answers from Checklist 2 into the corresponding sections.

Checklist 2

<input type="checkbox"/>	PART 7: Type of Distribution: Review the options and select the one that applies to you. If you are unsure which option applies to you, please seek the advice of a tax specialist.
<input type="checkbox"/>	PART 8: Mandatory Tax Withholding Requirements: Review the options. If you are unsure which if any option applies to you, please seek the advice of a tax specialist.
<input type="checkbox"/>	PART 9: Payment Instructions: Review the options and select one. The available options are: <ul style="list-style-type: none"><input type="checkbox"/> One-Time Check Payment: Use this option to initiate a rollover or transfer to another IRA trustee/custodian, or to request that a check be sent to you. Please confirm with the receiving IRA trustee/custodian whether it requires documentation to accompany the check.<input type="checkbox"/> One-Time ACH Payment: Provide information about the receiving financial institution or IRA trustee/custodian.



SAFE HARBOR ROTH IRA APPLICATION, ADOPTION AGREEMENT, AND DISTRIBUTION FORM

USA PATRIOT ACT / CUSTOMER IDENTIFICATION

409 Silverside Road, Suite 105
Wilmington, DE 19809
P: 866.540.9364
F: 302.791.5788

THIS FORM MUST BE NOTARIZED.

PARTS 6 AND 10 MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC.

PART 1: IRA Owner/Beneficiary Information

IRA Owner Beneficiary

If you are a beneficiary asserting ownership of a deceased IRA owner's account, skip PART 1A and complete PART 1B with your information and enclose the death certificate and other documents.

PART 1A: IRA Owner Information

IRA Owner's First Name:	IRA Owner's MI:	IRA Owner's Last Name:
IRA Owner's SSN:	IRA Owner's Date of Birth:	
Address:		
City:	State:	ZIP Code:
Home Phone:	Mobile Phone:	Email Address:
Account Type: Safe Harbor Roth IRA		

PART 1B: Beneficiary Information

First Name:	MI:	Last Name:
SSN:	Date of Birth:	
Address:		
City:	State:	Zip:
Home Phone:	Mobile Phone:	Email Address:

PART 2: Investment

The sole contributions permitted to your Safe Harbor Roth IRA Account ("Account" or "Safe Harbor Roth IRA") are the direct rollover distribution(s) made by the plan sponsor or administrator of the eligible retirement plan in which you had previously participated (the "Distributing Plan"). No other contributions are permitted.

The contribution(s) made by the Distributing Plan will be invested in an FDIC-insured money market account maintained by The Bancorp Bank (the "Bank Money Market Account") or such other investment as determined by The Bancorp Bank to be a qualified investment under Department of Labor Regulations 2550.404a-2(c)(3)(i), (ii) and (iii).

Your Safe Harbor Roth IRA is a limited purpose, non-transactional account held for your benefit. You are not permitted to direct the investment of the Account other than in the Bank Money Market Account or other qualified investment designated by The Bancorp Bank. As addressed in the Disclosure Statement, if you conclude that the Account is not invested consistent with your goals, you may direct The Bancorp Bank to distribute your Account, or transfer your Account to another eligible retirement plan or Roth IRA maintained by another Roth IRA provider.

PART 3: Beneficiary Information

The Department of Labor has determined that your Safe Harbor Roth IRA is not controlled by any beneficiary designation under the Distributing Plan and that The Bancorp Bank, as Trustee of your Safe Harbor Roth IRA established on your behalf by the sponsor or administrator of the Distributing Plan, may establish a default beneficiary for such IRA.

The following is The Bancorp Bank's default beneficiary designation and it will be effective until you make alternative beneficiary designations as provided below:

If no beneficiary designation is effective at Grantor's death, then upon Trustee having been notified of the death of the Grantor, and such fact is verified to Trustee's satisfaction, the remaining assets in the Account will be distributed one hundred percent (100%) to the spouse of the Grantor, or if there is no spouse surviving or if the Grantor was never married, distribution shall be to the executor or administrator of the Grantor's estate.

(Part 4 appears on the next page)

SAFE HARBOR ROTH IRA APPLICATION, ADOPTION AGREEMENT, AND DISTRIBUTION FORM

USA PATRIOT ACT / CUSTOMER IDENTIFICATION

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PART 4: Beneficiary Designation

The following individual(s) shall be my primary and/or contingent beneficiary(ies). If neither primary nor contingent is indicated, the individual will be deemed to be a primary beneficiary. If more than one primary beneficiary is designated and no distribution percentages are indicated, the beneficiaries will be deemed to own equal shared percentages in the Account. Multiple contingent beneficiaries with no share percentage indicated will also be deemed to share equally. If any primary or contingent beneficiary dies before me, the beneficiary's interest and the interest of the beneficiary's heirs shall terminate completely, and the percentage share of any remaining beneficiary(ies) shall be increased on a pro rata basis. If no primary beneficiary(ies) survives me, the contingent beneficiary(ies) shall acquire the designated share of my Account. Percentages must total 100%.

If a minor is being designated as a primary or contingent beneficiary, it is recommended that you also complete the "Designation of Custodian for Minor Beneficiaries Under the Uniform Transfers to Minors Act (UTMA)" section in PART 4B.

If you are domiciled in a community or marital property state and are naming as a primary beneficiary someone other than your spouse, please see the spousal consent section in PART 4B.

I, my successors and assigns, agree to indemnify and hold harmless The Bancorp Bank and its affiliates and any directors, officers, employees or agents of these entities from and against any and all claims, liabilities, damages, actions, charges, costs, losses and expenses (including reasonable attorneys' fees) arising out of or resulting from the transfer or payment upon my death of the balance in this Account to the beneficiary(ies) listed in this Adoption Agreement.

PART 4A: Primary Beneficiary Designation(s)

1. Beneficiary Name and Address:	Relationship:	SSN or Federal Tax ID Number:	Date of Birth: (mm/dd/yyyy)	Share: %
2. Beneficiary Name and Address:	Relationship:	SSN or Federal Tax ID Number:	Date of Birth: (mm/dd/yyyy)	Share: %
3. Beneficiary Name and Address:	Relationship:	SSN or Federal Tax ID Number:	Date of Birth: (mm/dd/yyyy)	Share: %
4. Beneficiary Name and Address:	Relationship:	SSN or Federal Tax ID Number:	Date of Birth: (mm/dd/yyyy)	Share: %
				Total: 100%

PART 4B: Contingent Beneficiary Designation(s)

1. Beneficiary Name and Address:	Relationship:	SSN or Federal Tax ID Number:	Date of Birth: (mm/dd/yyyy)	Share: %
2. Beneficiary Name and Address:	Relationship:	SSN or Federal Tax ID Number:	Date of Birth: (mm/dd/yyyy)	Share: %
				Total: 100%

****If designating additional beneficiaries, print extra copies of this page.****

PART 4B: Contingent Beneficiary Designation(s) (continued from previous page)

Designation Of Custodian For Minor Beneficiaries Under The Uniform Transfers To Minors Act (UTMA)

If a minor beneficiary is designated, I designate _____ as Custodian for such minor beneficiary under the Uniform Transfers to Minors Act (UTMA) of the State of my domicile. If the Custodian is unable or unwilling to serve for any reason, I designate _____ as successor Custodian. If no Custodian is named, or if the named Custodian(s) are unable or unwilling to serve for any reason, I designate the executor or administrator of my will as Custodian for my minor beneficiary. If no Custodian is named or acting under the foregoing, the guardian of such minor beneficiary, whether appointed under a will or by court, shall become successor Custodian.

Signature of Account Custodian, if applicable:	Date: (mm/dd/yy)
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Spousal consent: (for use in community or marital property states) I agree to my spouse naming a primary beneficiary other than me. I transfer (transmute) any community property interest I have in this IRA into the separate property of my spouse. I agree to seek the advice of a legal or tax professional, as needed.

Signature of Spouse:	Date: (mm/dd/yyyy)
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PART 5: Trustee Information; Revocation

Name and Address of The Bancorp Bank:

The Bancorp Bank
409 Silverside Road, Suite 105
Wilmington, DE 19809
Attention: Safe Harbor Roth IRA

Revocation

This Safe Harbor Roth IRA may be revoked within seven (7) days of the date of its establishment ("Opening Date") or ten (10) days from the date The Bancorp Bank mailed the original Welcome Kit to you, whichever is later. In order to exercise your right of revocation, you must provide us timely written notice of your election to revoke. You must complete PARTS 1, 10 and 11 of this Adoption Agreement and provide us with your completed, signed and notarized copy of it to be mailed by first-class mail to the name and address of The Bancorp Bank set forth above. Delivery by email or facsimile will not be accepted. Because the Account was established by the Distributing Plan on your behalf, we must confirm your identity before we send you a check for the remaining balance or otherwise take direction from you. This process satisfies our legal requirements under the USA PATRIOT Act and the Bank Secrecy Act, which mandates that we are able to confirm the identity of our customers. See the Disclosure Statement for more information, including a description of the requirement to comply with the USA PATRIOT Act and the rules of the Bancorp Customer Identification Program (CIP).

If you choose to revoke this Safe Harbor Roth IRA, skip ahead to PARTS 10 and 11.

PART 6: Adoption and Acknowledgement

This Adoption Agreement applies to a Safe Harbor Roth IRA established on my behalf by the fiduciary of my former employer's retirement plan pursuant to Section 657(c) of the Economic Growth and Tax Relief Reconciliation Act of 2001 (EGTRRA).

By signing below, I acknowledge receipt of the Safe Harbor Roth IRA Application, Adoption Agreement, and Distribution Form, the Automatic Rollover Roth Individual Retirement Trust Account Agreement (Form 5305-R), the Disclosure Statement, and agree to be bound by their respective terms as well as the terms of such other agreements and disclosures as may apply, as amended by The Bancorp Bank from time to time. I agree to seek the advice of a legal or tax professional, as needed. The Bancorp Bank has not provided me with any legal or tax advice, and I assume full responsibility for this transaction. I will not hold The Bancorp Bank liable for any adverse consequences that may result from this transaction. I agree that the information provided by me on this form is true and correct.

Signature of IRA Owner/Beneficiary:	Date: (mm/dd/yyyy)
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Upon acknowledging receipt of the Adoption Agreement, the Automatic Rollover Roth Individual Retirement Trust Account Agreement (Form 5305-R), the Disclosure Statement, and agreeing to be bound by their respective terms, you have the right to request a distribution of your funds or to roll over your funds directly to a qualified plan (a 401(k) or IRA, for example). If you wish to take a distribution or roll over your funds, continue to PART 7.

If you only wish to assert ownership over the Account and leave the funds in the Account, skip ahead to PARTS 10 and 11.

PART 7: Type of Distribution

Please select a type of distribution by checking only one box below. Consult your tax advisor for information about possible tax penalties. Exceptions must be filed on IRS Form 5329.

ROTH IRA

<input type="checkbox"/>	<p>Normal distribution: I am age 59½ or older.</p> <ul style="list-style-type: none"> You are eligible to begin taking distributions at age 59½, even if you continue working. You are still required to pay taxes on the amount withdrawn. For a Roth distribution, please review any tax consequences with your tax advisor.
<input type="checkbox"/>	<p>Early (premature) distribution: I am under age 59½ .</p> <ul style="list-style-type: none"> Distributions before age 59½ are subject to ordinary income tax and may also be subject to a 10% federal penalty tax, unless you meet an IRS exception. IRS exceptions may include: higher education expenses, qualified first home purchase and substantially equal periodic payments (SEPP). A full list of exceptions is available on the instruction form for IRS Form 5329. To claim an exception from the premature distribution penalty, you must complete IRS 5329 (available at www.irs.gov) and file it with your tax return. Do not send it to The Bancorp Bank for processing.
<input type="checkbox"/>	<p>Rollover to a qualified plan: I want to roll over my IRA directly to a qualified plan (a 401(k) or IRA, for example).</p> <ul style="list-style-type: none"> You cannot roll over after-tax amounts from your IRA. We cannot certify whether your IRA contributions were pre-tax or after-tax; you will need to provide this certification. You must provide the appropriate name and address in the "Receiving IRA Trustee/Custodian" section in PART 9.
<input type="checkbox"/>	<p>Inherited IRA distribution: The IRA owner has died, and I am the beneficiary.</p> <p>Please provide death certificate and other supporting documents.</p> <p>If additional documents are needed, a representative will contact you using the information you provide in PART 1B. If this happens, the account closure may be delayed.</p> <ul style="list-style-type: none"> IRA owner name: _____ IRA owner SSN: _____
<input type="checkbox"/>	<p>Other, please explain _____</p> <ul style="list-style-type: none"> This option should be chosen for those claiming disability or another <u>specific</u> reason not included as an option above.

PART 8: Mandatory Tax Withholding Requirements

We encourage you to consult with your accountant or tax advisor regarding IRA distributions. You may be subject to tax penalties under the estimated mandatory tax payment rules outlined in the table below if your payments of estimated tax and withholding are not accurate as provided in this example:

Distribution requested = \$10,000; Taxes withheld = \$1,000 (10%); Payment = \$9,000

Note: Any federal and applicable state taxes withheld will be deducted from the total requested distribution amount.

If the distribution is from a Roth IRA, it may be exempt from state tax. Consult with your accountant or tax advisor to obtain the most up-to-date information on your state's requirements.

<p>Federal Taxes</p> <p><i>Note: IRS regulations require that at least 10% federal income tax be withheld from a distribution.</i></p> <p><input type="checkbox"/> Do not withhold federal income tax from my IRA distribution.</p> <p><input type="checkbox"/> Withhold federal income tax of _____% (at least 10%) from my IRA distribution.</p> <p>State Taxes</p> <p><i>Note: If no state tax withholding election is indicated, IRS regulations require that the table shown below be followed. If you reside in one of the states that has mandatory withholding, those funds will be withheld from the distribution.</i></p> <p><input type="checkbox"/> Do not withhold state income tax from my IRA distribution.</p> <p><input type="checkbox"/> Withhold state income tax of _____% from my IRA distribution. (Only applies if state income tax is applicable. Please consult a tax advisor or the IRS for guidance.)</p>
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PART 8: Mandatory Tax Withholding Requirements (continued from previous page)

<i>If you live in:</i>	<i>Your options for state tax withholding are:</i>
AR, GA, IA, KS, MA, ME, OK, VT	Mandatory
CA, DE, OR, NC	Mandatory only if you elect federal tax withholding
AL, FL, HI, NH, NV, SD, TN, TX, WA	Prohibited
Residents of all other states and the District of Columbia	<i>For states not referenced in the table, please consult with your tax advisor as we DO NOT offer a state withholding option.</i>

State law is subject to change, which may affect the accuracy of this table.

PART 9: Payment Instructions

Please complete only one section below. A check payable to the account holder will be automatically sent if no other option is selected.

ONE-TIME CHECK PAYMENT

Distribution amount: Note: Tax withholding elections may reduce the total amount received. See PART 8 above.

- Balance of account.

Delivery method:

Standard delivery Overnight delivery* (**\$50.00 Expedited Delivery Fee and \$12.00 Treasurer's Check Fee apply**)

Mailing instructions:

Send to my address listed above Send to receiving IRA Trustee/Custodian** (**\$12.00 Treasurer's Check Fee may apply**)

Name of receiving IRA Trustee/Custodian:	Name of IRA owner:	
Address:		
City:	State:	Zip:

* See Article 10 of the Disclosure Statement for information about this fee. Overnight delivery not available to a P.O. Box address.

**Attach completed Transfer of Assets form if required by receiving IRA trustee/custodian. \$12.00 Treasurer's Check Fee applies. See Article 10 of the Disclosure Statement for information about this fee.

ONE-TIME ACH PAYMENT – Electronic Transfer to Non-Retirement Accounts only (\$5.00 Funds Transfer Fee applies)

Distribution amount: Note: Tax withholding elections may reduce the total amount received. See PART 8 above.

- Balance of account.

Receiving financial institution information:

Type of account: Checking Savings

Name of receiving financial institution:	Account Number:		
Account Name: (must be in same name as IRA Owner/Beneficiary)	ABA Routing Number:		
City:	State:	Zip:	Phone:

(Part 10 appears on the next page)

PART 10: TIN Certification

I certify that, to the best of my knowledge, the information provided on this form is true and correct and may be relied on by the Trustee/Custodian. I understand that this transaction may be subject to fees, taxes and/or penalties. Due to the important tax consequences of this transaction, I agree to seek the advice of a legal or tax professional, as needed. The Trustee/Custodian has not provided me with any legal or tax advice, and I assume full responsibility for this transaction. I will not hold the Trustee/Custodian liable for any adverse consequences that may result from this transaction.

I understand that my IRA was transferred to The Bancorp Bank from a previous plan sponsor. In order for The Bancorp Bank to process my distribution request, I authorize The Bancorp Bank to order consumer reports about me from consumer reporting agencies and instruct any person or consumer reporting agency to compile and furnish any information it may have or obtain about me in response to such inquiries.

Under penalty of perjury, I certify that: (1) the number shown on this form is my correct Taxpayer Identification Number (TIN) (or I am waiting for a number to be issued to me); (2) I am not subject to backup withholding, because (a) I am exempt from backup withholding under Internal Revenue Service (IRS) regulations, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; (3) I am a U.S. citizen (or a U.S. resident alien); and (4) I am exempt from Foreign Account Tax Compliance Act (FATCA) reporting.

CERTIFICATION INSTRUCTION: If you have been notified by the IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return, you must cross out Item 2, above.

I have read and understand the above certification, agreements, authorizations and indemnifications. By signing this application, I agree to be bound by the certification, agreements, authorizations and indemnifications, as well as the terms and conditions of the Account.

THE INTERNAL REVENUE SERVICE DOES NOT REQUIRE YOUR CONSENT TO ANY PROVISION OF THIS DOCUMENT OTHER THAN THE CERTIFICATION REQUIRED TO AVOID BACKUP WITHHOLDING.

Signature of IRA Owner/Beneficiary:	Date: (mm/dd/yyyy)
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PART 11: Notary Acknowledgement (to be completed by Notary Public)

STATE OF _____)
) SS:
COUNTY OF _____)

On this, the ___ day of _____, 20 __, before me _____, the undersigned Notary Public, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to this document, and acknowledged that said person executed the same for the purpose described within. In witness whereof, I hereto set my hand and official seal.

By: _____
Notary Public

My Commission Expires: _____

SEAL:

**Withholding Certificate for
IRA Distributions**

Purpose — The Withholding Election or Change of Election section on this form is for U.S. citizens, resident aliens, or their estates who are recipients of IRA distributions. You may use this form to choose **(a)** not to have any income tax withheld from the IRA distribution (except for IRA distributions to U.S. citizens delivered outside the United States or its possessions) or **(b)** to have an additional amount of tax withheld.

Your previously filed withholding election will remain in effect if you do not complete the Withholding Election or Change of Election section on this form.

Sign this form — The withholding election or change made on this form is not valid unless you sign this form.

Section references are to the Internal Revenue Code.

Other Income — If you have a large amount of income from other sources not subject to withholding (such as interest, dividends, or capital gains), consider making estimated tax payments using **Form 1040-ES**, Estimated Tax for Individuals. Call 1-800-TAX-FORM (1-800-829-3676) to get Form 1040-ES and **Pub. 505**, Tax Withholding and Estimated Tax. You can also get forms and publications from the IRS website at www.irs.gov.

IRA Distributions — 10% withholding. Your payer must withhold at a flat 10% rate from your IRA distributions **unless** you choose not to have income tax withheld. You can choose not to have income tax withheld from your distribution by checking the first box in the Withholding Election or Change of Election section on this form. Generally, your choice not to have income tax withheld will apply to any later distribution from the same IRA. You may specify an additional amount to be withheld by checking the second box and indicating how much you want withheld.

Caution: *If you submit this form without your correct TIN, the payer cannot honor your request not to have income tax withheld and must withhold 10% of the IRA distribution for federal income tax.*

Choosing Not to Have Income Tax Withheld — You (or in the event of death, your beneficiary or estate) can choose not to have income tax withheld from your IRA distributions by checking the first box in the Withholding Election or Change of Election section on this form. For an estate, the election to have no income tax withheld may be made by the executor or personal representative of the decedent. Enter the estate's EIN in the area reserved for "Social Security Number" on this form.

Caution: *There are penalties for not paying enough federal income tax during the year, either through withholding or estimated tax payments. New retirees, especially, should see Pub. 505. It explains your estimated tax requirements and describes penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your IRA distributions using the Withholding Election or Change of Election section on this form.*

Changing Your "No Withholding" Choice — If you previously chose not to have income tax withheld and you now want withholding, check the second box in the Withholding Election or Change of Election section on this form.

Payments to Foreign Persons and Payments Outside the United States — Unless you are a nonresident alien, withholding is required on any IRA distributions that are delivered to you outside the United States or its possessions. You **cannot** choose not to have income tax withheld. See Pub. 505 for additional details.

In the absence of a tax treaty exemption, nonresident aliens, nonresident alien beneficiaries, and foreign estates generally are subject to a 30% withholding tax under section 1441 on an IRA distribution. However, most tax treaties provide that IRA distributions are exempt from withholding and tax. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for details. A foreign person should submit **Form W-8BEN**, Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding, to the payer before receiving any payments. The **Form W-8BEN** must contain the foreign person's TIN.

Statement of Federal Income Tax Withheld from Your IRA — By January 31 of next year, your payer will furnish a statement to you on **Form 1099-R**, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc., showing the total amount of your IRA distribution and the total federal income tax withheld during the year. If you are a foreign person who has provided your payer with **Form W-8BEN**, your payer instead will furnish a statement to you on **Form 1042-S**, Foreign Person's U.S. Source Income Subject to Withholding, by March 15 of next year.

Privacy Act and Paperwork Reduction Act Notice — We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to **(a)** request additional federal income tax withholding from your IRA distribution, **(b)** choose not to have federal income tax withheld, when permitted, or **(c)** change or revoke a previous withholding election. To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s).

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.