## Breaking News: Huge RIFT Victory!

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#### What is **RIFT**?

Release IRA Funds Timely



#### What We'll Cover Today

#### Introduction RIFT Victory 10 Tips for Your Success State Level RIFT Work "How to" with Fidelity Claims

Where to From Here?

#### Who and What and When?

Delays and draconian paperwork with some financial institutions when paying IRA death claims to charities

#### Key to Understanding

Some IRA custodians won't pay death claims to "beneficiaries."

They only pay if you 1<sup>st</sup> become their "customer."

#### Intense Procedures to Receive Death Proceeds

- Instead of paying a death claim on the IRA, <u>some</u> financial institutions require the charity apply for and open up a <u>new</u> account first & then they transfer the donor's IRA into it
- Called an Inherited IRA (aka Beneficiary IRA)
- In order to establish the new account, the Custodian *interprets* the charity as their "new customer"
- Enter the Patriot Act (Section 326 Know Your Customer but only applies to NEW CUSTOMERS) – Bank Secrecy, etc. the custodians claim these apply

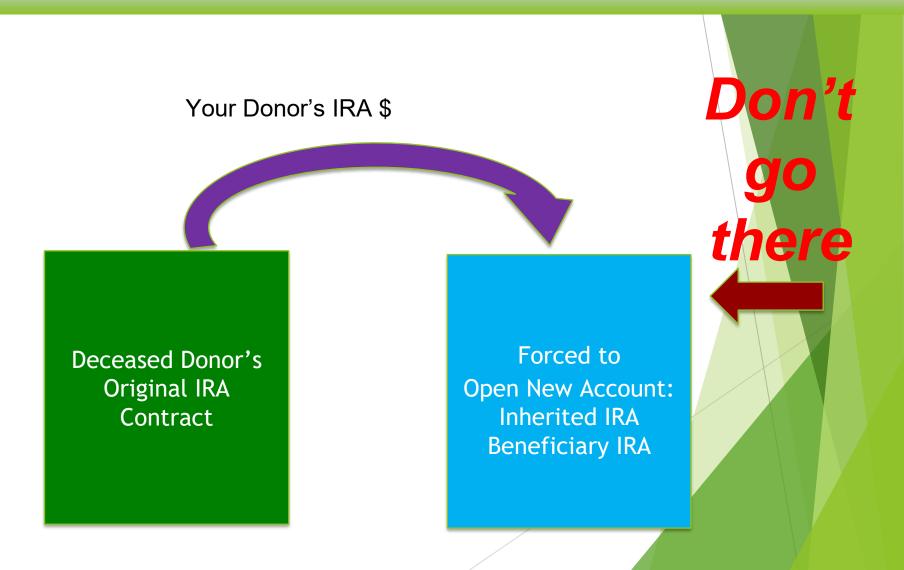
#### **New Account Set-up**

#### Require personal information of staff:

- Social Security number
- Home address
- Driver's license
- Personal financial statements\*
- Credit check\*
- Spouse's maiden name\*
- \*yet "ownership" prong doesn't apply to charities!

#### **Impact on Charities**

- Won't tell you the amount: 10 cents
- Delays: 2 to 3 full-ride scholarships
- Delays: 6 years
- Never told they were a beneficiary: 16 years
- CFO's personal 401(k)
- Withholding taxes how to get it back?
- Won't pay any charity until all beneficiaries have ALL sent in paperwork



Some custodians claim they can't do a 1099-R at death

Deceased Donor's Original IRA Contract

New Account: Inherited IRA

hey only do a 1099

#### **Does the Patriot Act\* Apply?**

The Financial Crimes Enforcement Network (FinCEN) is the government agency that regulates compliance with the Patriot Act:

"If the beneficiary <u>continues to maintain</u> the account after the passing of the previous customer, the bank should treat them as a customer."

-FinCEN's Resource Center

6/20/2019

## **FinCEN**

#### Reconfirmed in October 2022 with 7 of their lawyers

#### But stay tuned...more later...



## "Asset Conservation" Technique

#### Used by Some IRA Custodians

#### "It's Not About the Money".....RIGHT!

# Some charge multiple types of fees for opening the new account or closing accounts.

It's a money maker!

#### Most important!

#### No law requires a charity to open a new account or provide an employee's SSN

 It's all just the company's "thoughtless" business policy

#### What Custodians Have Said

## "You have two choices:

1: Give us the SSN, or

2: Disclaim the account!"

### **Ancillary Problems**

# Some custodians won't EVEN tell you you're a beneficiary in the first place!!!!

"Schwab has no obligation to locate or notify any beneficiary or to independently verify any information submitted either by your Authorized Party or any person claiming an interest in your account."

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CC2711121 (0519-9GXP) APP10149-19 (12/19)

#### **Problem Expanded**

Some Financial Institutions require a 2<sup>nd</sup> account for <u>non-IRA</u> accounts – "TOD accounts"

## **Tax Withholding Issues**

Improper withholding of federal or state income taxes by financial institutions

Costing charities 10-20% or more of their death claim

Years to get money back chasing it from the IRS as part of an income tax return/refund

#### **RIFT Database**

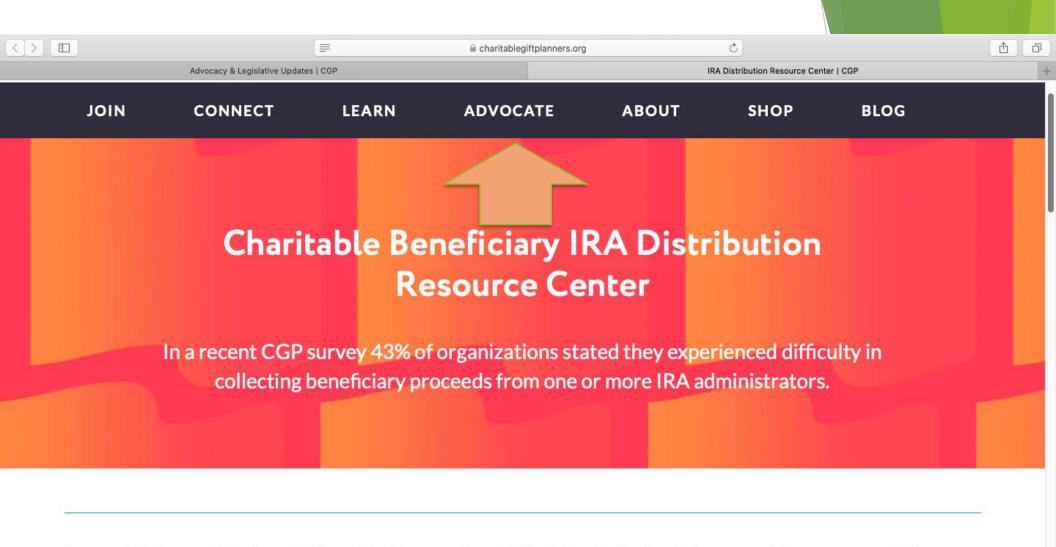
#### Database of IRA Custodians

- How to work through each IRA Custodian's process
- Who to contact
- What paperwork is required
- Sample letters and when to use each one
- NACGP gives charities and advisors free access

#### **Free Access to Database**

## Don't need membership of national CGP to use website

www.charitablegiftplanners.org/ ira-distribution-resource-center



In a recent CGP survey 43% of organizations stated they experienced difficulty in collecting beneficiary proceeds from one or more IRA administrators. This is a matter of great concern to nonprofit organizations across the country. Many individuals and organizations are working to improve the timely distribution of beneficiary proceeds from financial institutions. Through awareness, advocacy and the collection of valuable information to assist organizations, they have created a number of resources to expedite distributions and promote change in institutional policy. The goal of the center is to organize the results of their efforts in one location to benefit the entire nonprofit sector.

This center is meant to be dynamic with new resources and information added as they become available. If you have information to share or

| -                                 |  |                    | _          |  |       |
|-----------------------------------|--|--------------------|------------|--|-------|
| C                                 | National Association of Charitable Gift Planners - CGP |                    | C          | IRA Distribution Resource Center   CGP |       |
| • < >                             | O E  | 🔒 charitablegiftpl | anners.org | ى 🕑                                    | Ŋ + D |
|                                   |  |                    |            |  |       |
| National Association of Charita X | RIFT Database of IRA Custodial X                       | +                  |            |  | ~     |

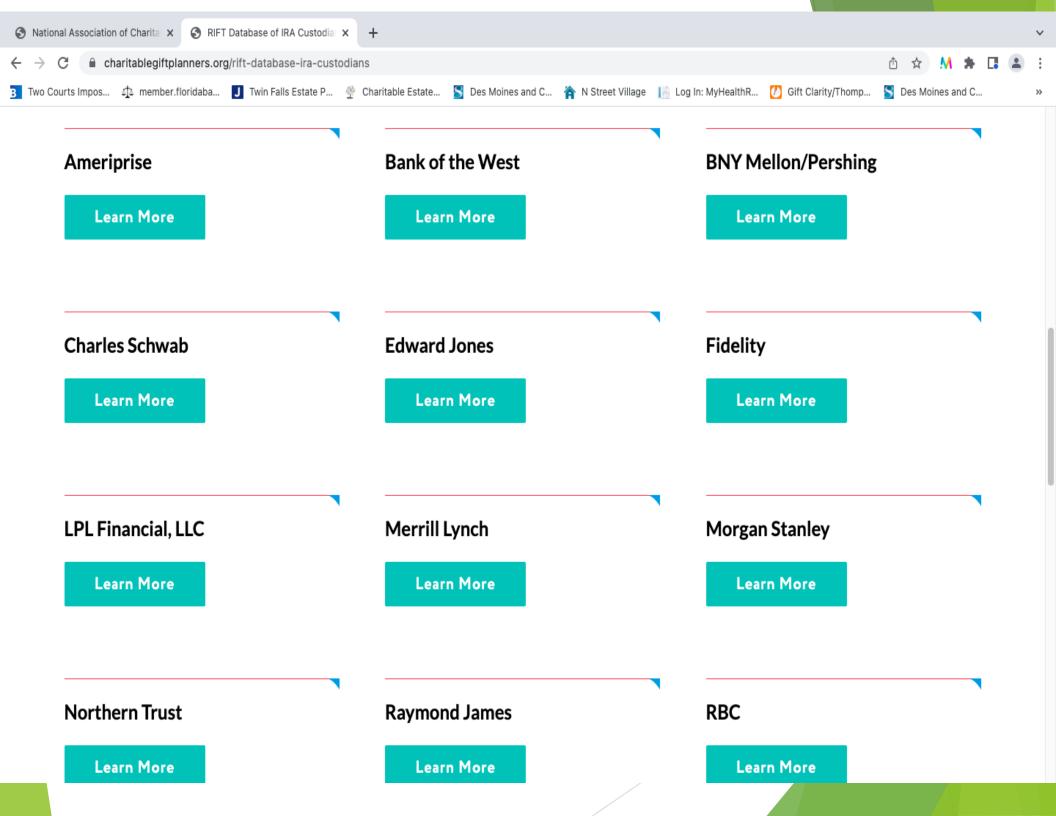
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- Read About the Issue: Unmasking the Unthinkable: Financial Institutions Hoard Intended Charitable Gifts August 5, 2022
- RIFT Database of IRA Custodians
- Join RIFT Advocates Working Group
- Transfer on Death (TOD) letter
- A Word About Income Tax Withholding
- New IRS Form W-4R in 2023
- Sample Corporate Resolution
- Royalty-Free Donor Audience Article
- Additional Reading
- Contact Us/Comments



Login



#### Who Does <u>Not</u> Require an Inherited IRA

As of 7/1/2023:

- Ameriprise (new)
- Bank of the West (new)
- BNY Mellon/Pershing
- Edward Jones another success
- Merrill Lynch
- Morgan Stanley\*
- Raymond James

TD Ameritrade TIAA T Rowe Price (new) US Bank Vanguard\* Wells Fargo Bank Wells Fargo Advisors (new)

#### \*Yet TOD's require opening a new account

#### Who'll Make an Exception?

As of 7/1/2023: KEY! Charities have to ask for the exception—it is not automatic. Use the RIFT letter made especially for this exception.

- Charles Schwab very easy to work with once you ask for the exception. If you
  don't ask for it, they'll make you open the Inherited IRA. Last case was 48 pages of
  paper to complete.
- Equitable (new to this list) given if the charity pushes back against their requirements

#### Latest FinCEN

#### Requested FinCEN ruling against Fidelity August 2022

Responded April 2023

#### No legal requirement for a 2<sup>nd</sup> account to pay a charity!!!!



Financial Crimes Enforcement Network U.S. Department of the Treasury

Washington, D.C. 20220

April 14, 2023

#### VIA ELECTRONIC MAIL



*Re:* Community Foundation Request for an Administrative Ruling Pursuant to 31 CFR § 1010.711

Dea

This responds to your request for an administrative ruling on behalf of Community Foundation (the "Foundation"), submitted to the Financial Crimes Enforcement Network (FinCEN) on July 28, 2022 (the "Request").<sup>1</sup>

The Request states that the Foundation is the named beneficiary of an individual retirement account (IRA)<sup>2</sup> maintained by Fidelity Brokerage Services L.L.C. ("Fidelity"). who is deceased and held the original IRA, designated the Foundation as the beneficiary of the IRA. The Request further states that in order to receive the funds, Fidelity is requiring the Foundation to open a new IRA and submit information required by the Customer Identification Program (CIP) and Customer Due Diligence (CDD) Rules, including personal information about the Foundation's members of the Board of Directors or senior management. The Request asks whether a broker-dealer must comply with identity verification requirements in the CIP Rule<sup>3</sup> and CDD Rule<sup>4</sup> when distributing to a beneficiary of an IRA funds inherited as part of a charitable estate.

#### However.....

But...... <u>if</u> Fidelity requires the OPENING OF A NEW ACCOUNT, then charity has to produce the following:

- Name of control person
- Address (use charity's address)
- Okay to give Charity's EIN don't have to give SSN of employee/staff/board – HUGE VICTORY!

#### Huge!

## A big sea change in how these claims will be paid

- We are on the front-end of this change
- RIFT database updated
- Letters to each custodian

#### **Did Fidelity Know Ahead of Time?**

A few weeks **prior** to the formal ruling, Fidelity changed their procedures which coincidentally matched the ruling's outcome (we've tested)

FinCEN used specific language in the ruling only used by the Fidelity attorney in the past.....

Hmmmm....

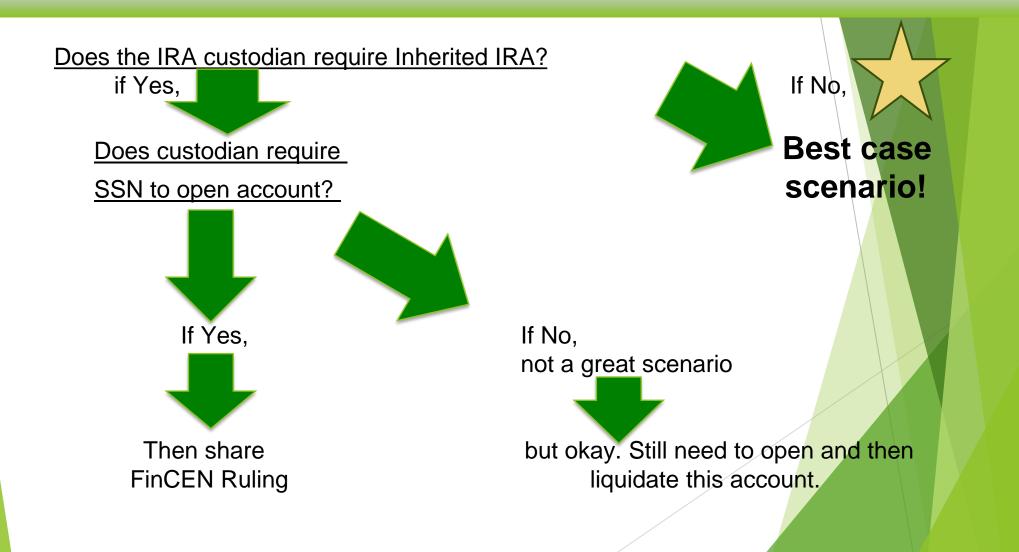
#### **Fidelity Now**

- Karen will walk us through the new Fidelity form & procedures
- Means no more personal financial info, spouse's maiden name, copy of DL, etc.!

#### **Claims in Process**

- Key: use FinCEN Ruling for all <u>new claims</u> with other financial institutions who require a personal SSN or other personal info beyond name of control person – database is updated for this
  - Fidelity claims <u>already in process where you've</u> held off on personal info
    - Other custodian <u>claims already in process where</u> you've held off on personal info

#### **IRA Death Claim**



#### **10 Tips for Success**

- **1.** Follow-up at least weekly or biweekly
- Keep copies of EVERYTHING you send they'll lose it – 8 times
- 3. Reject information not required of charities ownership/equity prong vs. control prong
- 4. Get to know when/where to use new IRS Form W4-P
- 5. Use the RIFT database check every time due to new updates

#### **10 Tips for Success**

- 6. Know whose paper your death claim is written on work with them and avoid middlemen if possible
- 7. Realize the custodian may not tell you the amount of your claim

  push back that's your account now; also ask if there are other
  charitable beneficiaries so you can work together to push back

  8. Beware of income tax withholding issues especially with qualified plans. Jump on it right away if they withhold make them fix it immediately
- 9. Know that IRAs can be processed differently than TOD accounts
  10. Avoid asking for exceptions from anyone but legal department others have no authority

# **RIFT won a HUGE battle!**

# Yet, war not over...



# Receiving IRA Funds Timely

Eliminating Delays When Requesting IRA & Other Death Claims

Promoting Change through:

- Awareness
- Federal and State Government Advocacy
- Sharing Resources



Reset

# **Fidelity IRA Beneficiary Distribution**—Charity, Foundation, or a University

Use this form if you are an Authorized Individual/Manager/Partner ("Authorized Party") of a charity, foundation, public university, or tax-exempt private university and need to establish a temporary inherited IRA account for the receipt and distribution of assets inherited from an existing Fidelity IRA. Do not use this form for a non-tax-exempt private university. Go to *Fidelity.com* to download the appropriate forms, or contact Fidelity. Type on screen or fill in using CAPITAL letters and black ink. If you need more room for information, make a copy of the relevant page.

#### Helpful to Know

- In this application, "You," "you," and "your" refers to all Authorized Parties of the charity, foundation, or university ("Entity"). Each Authorized Party agrees that any Authorized Party has authority on behalf of this account.
- Upon receipt of this form, a temporary account will be established in the name of the Entity to facilitate the inheritance and distribution of assets.
  - The assets will be transferred in kind from the original IRA to this temporary account.
  - All assets transferred from the original IRA must be liquidated to a core position ("Core Position"), which will be the Fidelity® Government Money Market Fund, a money market mutual fund, and then distributed via check from the Core Position. The temporary account will be closed once the distribution is complete.
  - The timing of the transaction depends on when we receive this form, which is outside of your control. Note: Certain securities (such as options, certain fixed income securities, and thinly traded securities) may not be eligible to sell via this form, which may result in Fidelity not being able to process a withdrawal as requested.

- Any fees charged or expenses incurred in connection with instructions to liquidate all assets will be assessed at the rep-assisted rates. Please refer to the Schedule of Fees for more information.
- All transactions made using this form are reported to the IRS as an IRA death distribution on Form 1099-R.
- Nonresident aliens must provide IRS Form W-8BEN when completing this form. The nonresident alien tax-withholding rate of 30% will generally apply to all distributions, and the entire transaction will be reported to the IRS on Form 1042-S.

#### Additional Required Documents

- · Copy of the death certificate.
- Entity's Articles of Incorporation or other formation documentation.
- Inheritance tax waiver form, if required by the deceased's state of residence.

Please note: Fidelity may require additional documentation in some cases.

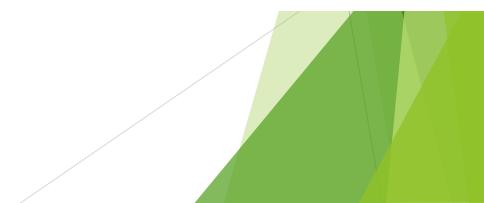
## 1. Deceased IRA Owner's Information Include a copy of the deceased's death certificate and,

if required by the deceased's state of residence, a state inheritance tax waiver.

| Provide the information 🕨                   | First Name                     | Middle Name                | Last Name                       |                         |
|---|--------------------------------|----------------------------|---------------------------------|-------------------------|
| of the IRA owner from<br>whom the Entity is |                                |                            |                                 |                         |
| directly inheriting.                        | Security Number                | Date of Birth MM DD YYYY   | Date of Death MM DD YYYY        |                         |
|   |                                |                            |                                 |                         |
| Provide the deceased's 🕨                    | Fidelity IRA/Roth IRA Number   |                            |                                 | -                       |
| existing IRA number.                        |                                |                            |                                 | Donor                   |
|   | If the nerson listed above was | NOT the original owner and | Linharitad the IPA from company | alaa plaasa provida tha |

If the person listed above was NOT the original owner and inherited the IRA from someone else, please provide the original owner's information below.

| First Name             | Middle Name              | Last Name                |  |
|------------------------|--------------------------|--------------------------|--|
|                        |                          |                          |  |
| Social Security Number | Date of Birth MM DD YYYY | Date of Death MM DD YYYY |  |
|                        |                          |                          |  |



## 2. Entity Information

| Provide the following information for the charity, | foundation, | or university- | –all information ar | d required | documentation | must be provided |
|--|-------------|----------------|---------------------|------------|---------------|------------------|
| in order for this form to be processed.            |             | -              |                     |            |               | ·                |

| Enter full Entity name 🕨  | Entity Name                        |  |                |                                       |               |  |  |  |  |
|---|------------------------------------|--|----------------|---------------------------------------|---------------|--|--|--|--|
| as evidenced  |                                    |  |                |                                       |               |  |  |  |  |
| by the relevant   |                                    |  |                |                                       |               |  |  |  |  |
| formation document  | Taxpayer ID Number                 | Primary Phone  |                | Entity State/Country of Organization  |               |  |  |  |  |
| (e.g., partnership<br>agreement, articles of<br>incorporation). |                                    |  |                |                                       |               |  |  |  |  |
|   | Indicate the status of the Entity  | :  |                |                                       |               |  |  |  |  |
| <b>Response required.</b><br>Check one.                         | Operating Nonoperating             | Examples can include, bu<br>shell company, or similar. |                | , a holding company, personal investr | ment company, |  |  |  |  |
|   | For universities only, provide th  | e following informat                                   | ion:           |                                       |               |  |  |  |  |
|   | Public university                  |  |                | •                                     | charity       |  |  |  |  |
|   | Tax-exempt private university      |  |                |                                       |               |  |  |  |  |
| Permanent Address   | This is the legal address of the E | ntity used for tax repo                                | orting.        |                                       |               |  |  |  |  |
|   | Street Address                     |  |                |                                       |               |  |  |  |  |
|   |                                    |  |                |                                       |               |  |  |  |  |
|   | City                               | State/Province   | ZIP/Postal Coo | le Country                            |               |  |  |  |  |
|   |                                    |  |                |                                       |               |  |  |  |  |
|   |                                    | I  |                | I                                     |               |  |  |  |  |

Mailing Address This may be a PO box, drop box, or c/o location.

| $\Box$ Same as above address $arsigma$ Default i | ] Same as above address $arprop$ Default if no other information indicated below. |                 |         |  |  |  |  |
|--|---|-----------------|---------|--|--|--|--|
| Mailing Address                                  |   |                 |         |  |  |  |  |
|  |   |                 |         |  |  |  |  |
| City   | State/Province  | ZIP/Postal Code | Country |  |  |  |  |
|  |   |                 |         |  |  |  |  |

Form continues on next page.

## 3. Authorized Party Information

Provide the following information for each Authorized Individual, Manager, or Partner authorized to act on behalf of the Entity. To provide information on additional individuals, make a copy of this Section 3.

Check if applicable.



This individual is also the Control Person for the Entity. A Control Person is defined as an individual person with significant responsibility for managing the Entity (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer). This account requires that there be at least one Control Person named. If the Control Person is not an Authorized Party, his or her information MUST be provided in Section 4.

| Enter full first and last 🕨 | First Name                                    | Middle Nam    | e                           | Last Nam   | е       |    |       |               |
|-----------------------------|---|---------------|-----------------------------|------------|---------|----|-------|---------------|
| name as evidenced by        |   |               |                             |            |         |    |       |               |
| a government-issued,        |   |               |                             |            |         |    |       |               |
| unexpired document (e.g.,   | Control Person Title <b>Required</b> (e.g., C | hief Executiv | e Officer, General Partner, | President) |         |    |       |               |
| driver's license, passport, |   |               |                             |            |         |    |       |               |
| permanent resident card).   |   |               |                             |            |         |    |       |               |
|                             | Date of Birth MM DD YYYY                      | Social Sec    | urity or Taxpayer ID Num    | oer        |         |    |       |               |
|                             |   |               |                             |            | SSN     | OR | 🖌 TIN |               |
|                             |   |               |                             |            |         |    |       |               |
| Provide phone number(s) 🕨   | Primary Phone                                 |               |                             | Secondary  | / Phone |    |       |               |
| to be used to verify and/or |   |               | Mobile Number               |            |         |    |       | Mobile Number |
| authorize transactions.     |   |               |                             |            |         |    |       |               |
|                             | Email   |               |                             |            |         |    |       |               |
|                             |   |               |                             |            |         |    |       |               |
|                             |   |               |                             |            |         |    |       |               |
|                             |   |               |                             |            |         |    |       |               |

Use TIN

### Copy of ID No Longer Required!

3. Authorized Party Information, continued

**Income Source** Industry regulations require us to ask for this information. Not applicable to public universities.

| Check one and provide information. | Employed [<br>Occupation | Self-employed                               |                | Employer Leave blank | if self-employed. |
|------------------------------------|--------------------------|---|----------------|----------------------|-------------------|
|                                    | Employer Address         | ;   |                |                      |                   |
| Skip this section                  | City                     |   | State/Province | ZIP/Postal Code      | Country           |
|                                    |                          | Not employed<br>Pension, investments, spous | e, etc.        |                      |                   |

Associations Not applicable to public universities.

As a person associated with a member firm, you If you are employed by or associated with a broker-dealer, stock exchange, exchange member firm, the Financial Industry Regulatory Authority (FINRA), a municipal securities dealer, or other financial institution, or are the spouse or an immediate family member residing in the same household of someone who meets the aforementioned employ-

#### 3. Authorized Party Information

| ٨                    | Provide the following ir information on addition                                      |                                   |  |   |  | tner authoi                                    | ized to act o                 | on behalf of the                    | e Entity. To provide       |
|----------------------|---|-----------------------------------|--|---|--|--|-------------------------------|-------------------------------------|----------------------------|
| $\mathbf{X}$         |   | This<br>sign<br>Ope<br><b>req</b> | s individual is also the<br>nificant responsibility fo<br>erating Officer, Manag | Control F<br>r manag<br>ing Merr<br><b>least on</b> | Person for the Enti<br>ing the Entity (e.g<br>Iber, General Partr<br>e <b>Control Person</b> | ., a Chief<br>her, Preside<br><b>named. If</b> | Executive Of<br>ent, Vice Pre | ficer, Chief Fin<br>sident, or Trea |                            |
|                      | Enter full first and last<br>name as evidenced by                                     | First Na                          | me   | Middle N  | ame  | Last Nar                                       | ne                            |                                     |                            |
|                      | a government-issued,  |                                   |  |   |  |  |                               |                                     |                            |
|                      | unexpired document (e.g.,<br>driver's license, passport,<br>permanent resident card). | Control                           | Person Title Required (e.g   | 1., Chief E   | xecutive Officer, Gener  | al Partner, Pr                                 | resident)                     |                                     |                            |
|                      |   | Date of                           | Birth MM DD YYYY   | Social S  | Security or Taxpayer ID  | Number   | SSN                           | o <b>□</b> r                        |                            |
|                      |   |                                   |  |   |  |  | TIN                           |                                     |                            |
| Use TIN              | Provide phone number(s)<br>to be used to verify and/or<br>authorize transactions.     | Primary                           | Phone  |   | Mobile<br>Number   | Seconda  | y Phone                       |                                     | Mobile<br>Number           |
|                      | auchorize transactions.   | Email                             |  |   | Number   |  |                               |                                     | Nulliber                   |
|                      |   |                                   |  |   |  |  |                               |                                     |                            |
| Skip this<br>section |   | Street A                          | adress   |   | State/Province   | ZIP/Post                                       | al Code                       | Country                             |                            |
| section              |   |                                   |  |   |  |  |                               |                                     |                            |
| 500000               | Mailing Address Th  | nis mav k                         | pe a PO box. drop box.   | or c/o la   | ocation.   |  |                               |                                     |                            |
|                      | 0   |                                   | ne as residential addre  |   |  | rted   |                               |                                     |                            |
|                      |   |                                   | Address  |   | ,  |  |                               |                                     |                            |
|                      |   |                                   |  |   |  |  |                               |                                     |                            |
|                      |   | City                              |  |   | State/Province   | ZIP/Post                                       | al Code                       | Country                             |                            |
|                      | Citizenship   |                                   |  |   |  |  |                               |                                     |                            |
|                      | Indicate your   |                                   | S. citizen Skip to incor   | ne sourc  | 0  |  |                               |                                     |                            |
|                      | citizenship status.   | _                                 | ermanent U.S. resident   |   |  | Citizenship                                    | below.                        |                                     |                            |
|                      |   | 🗆 Fo                              | oreign citizen Informa   | tion in th  | is box must be cor   | npleted.                                       |                               |                                     |                            |
|                      | Attach a copy of  | Countr                            | y of Citizenship   |   |  | Country<br>U.S.                                | of Tax Residen                | cy Only applicab                    | ole to nonresidents of the |
|                      | a valid and unexpired<br>government ID showing  |                                   |  |   |  | 0.5.   |                               |                                     |                            |
|                      | number and photo.   | ч                                 |  |   |  |  |                               |                                     |                            |

### 4. Control Person – Beneficial Ownership Information

Under the Customer Due Diligence Rules, Fidelity is required to collect certain information regarding a Control Person in order to satisfy our regulatory obligations as a broker-dealer. This account requires that there be at least one Control Person named.

Complete this section to provide information for the Control Person (as defined below) that is NOT already listed as an Authorized Individual in Section 3 of this form. Only the individual(s) listed in Section 3 have authority to act on the account. If the Control Person is already listed in a section 3, check the box below and skip to Section 5.

The Control Person is defined as: An individual person with significant responsibility for managing the Entity (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer). This account requires that there be at least one Control Person named.



**The Control Person has been listed in Section 3**. You agree that you will notify Fidelity if or when beneficial ownership information of the Entity changes. *Skip to Section 5.* 

If Authorized Party Information is the same as the Control Person, the information Is entered only once in Section 3 Authorized Party Information.

If you check the box also in Section 3, skip Section 4.

IF YOU ARE ENTERING INFORMATION FOR SEPARATE AUTHORIZED PARTY AND CONTROL PERSON.....

#### **Control Person**

| Enter full first and last<br>name as evidenced by                                     | First Name                                      | Middle Name                       | Last Name |            |  |
|---|---|-----------------------------------|-----------|------------|--|
| a government-issued,  | Control Descen Title <b>D</b> escripted (e.e. P | anidant Consul Data an            |           |            |  |
| unexpired document (e.g.,<br>driver's license, passport,<br>permanent resident card). | Control Person Title <b>Required</b> (e.g., Pr  | esident, General Fartner).        |           |            |  |
| permanent resident card).   | Date of Birth MM DD YYYY                        | Social Security or Taxpayer ID Nu | umber     |            |  |
|   |   |                                   |           | SSN OR TIN |  |

#### **Residential Address (where you live)** This is your legal address you use for tax reporting.

|   | Street Address |                |                 |         |
|---|----------------|----------------|-----------------|---------|
|   |                |                |                 |         |
| 1 | City           | State/Province | ZIP/Postal Code | Country |
| 1 | -              |                |                 |         |
|   |                |                |                 |         |

#### Citizenship

| Indicate<br>citizenship s  | e your 🕨<br>status. | <ul> <li>U.S. citizen Skip to income source.</li> <li>Permanent U.S. resident Must provide (</li> </ul> | Country of Citizenship below. | Skip this section                           |
|--|---------------------|---|-------------------------------|---|
| Attach a co<br>a valid and unexy<br>government ID sho<br>number and pl | bired<br>wing       | Foreign citizen Information in this box     Country of Citizenship                                      | ·                             | Only applicable to nonresidents of the U.S. |
|  | USI                 | E YOUR TIN – SSN<br>uired   | no longer                     | Form continues on next page. ►►             |
|  | USI                 | E YOUR BUSINESS   | S ADDRESS                     |   |

### 5. Distribution Information and Tax Withholding

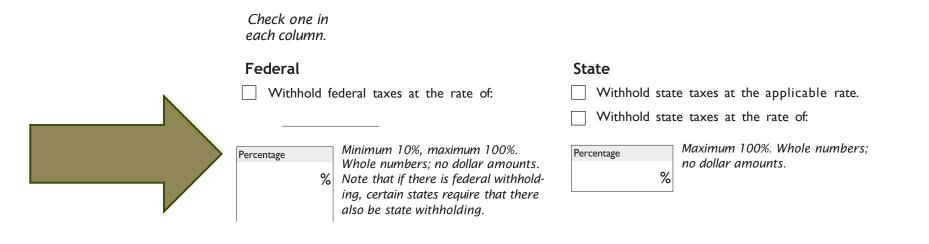
Important to note: The timing of the transaction depends on when we receive this form, which is outside of your control. Once we receive this form in good order, you cannot cancel this distribution request. The account will be closed upon distribution.

A check will be sent to the mailing address provided in Section 2. All positions will be liquidated. Trades may take up to five business days to process once determined to be in good order. Certain securities may not be eligible to sell via this form. Examples of ineligible securities include options, certain fixed income securities, and thinly traded securities. In the event that transactions cannot be processed within five business days of determining your request to be in good order, Fidelity will notify you, and you may have to take additional action on the unsold positions within the account.

#### Tax Withholding

Generally, distributions from a non-Roth IRA are subject to federal and, where applicable, state income tax withholding. Neither federal nor state income tax will be withheld from the IRA distribution, unless you elect for tax to be withheld below. If there are nondeductible contributions in the original IRA, any tax withholding may result in excess withholding from the distribution. If taxes are not withheld from the distribution, the Entity may be responsible for payment of estimated tax. The Entity may incur penalties under the estimated tax rules if the withholding and estimated tax payments are not sufficient. See State Tax Withholding information — IRA Withdrawals at the end of this form.

To elect for federal and/or state taxes to be withheld, provide the percentages below.



To help the government fight financial crimes, federal regulation requires Fidelity to obtain and verify your name, date of birth, address, and a government-issued ID number before opening your account, and to verify the information. In certain circumstances, Fidelity may obtain and verify comparable information for any person authorized to make transactions in an account. Also, federal regulation requires Fidelity to obtain and verify the beneficial owners and control persons of legal entity customers. Requiring the disclosure of key individuals who own or control a legal entity helps law enforcement investigate and prosecute crimes. Your account may be restricted or closed if Fidelity cannot obtain and verify this information. Fidelity will not be responsible for any losses or damages (including, but not limited to, lost opportunities) that may result if your account is restricted or closed.

You acknowledge that this account is governed by a predispute arbitration clause, which appears on the last page of the Agreement, and that you have read the predispute arbitration clause.

By signing below, you acknowledge that you have read, understand, and agree to be bound by the provisions of this form, including the above terms and conditions for this account.

A Medallion signature guarantee is required if the transaction is greater than \$100,000.

If the form is completed at a Fidelity Investor Center with all signers present, the Medallion signature guarantee is not required. You can get a Medallion signature guarantee from most banks, credit unions, and other financial institutions. A notary seallstamp is NOT a Medallion signature guarantee.

Please note: All Authorized Parties of the Entity must sign this form. Please print additional copies of this page if more signature boxes are needed.

| PRI  | NT AUTHORIZED PARTY NAME |
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🕶 MEDALLION SIGNATURE GUARANTEE 🥣

**Did you sign the form?** Send the ENTIRE form, death certificate, any additional required forms/documents, and a state inheritance tax waiver, if required, to Fidelity Investments.

Regular mail Fidelity Investments PO Box 770001 Cincinnati, OH 45277-0039 Overnight mail Fidelity Investments Attn: Account Reregistration Services 100 Crosby Parkway KCIC Covington, KY 41015

Questions? Call 800-544-0003.

| WHERE TO FIND THE NEW FIDELITY FOR               |   |                   |               |
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| RIFTAdvocates<br>CGP's RIFT discussion<br>group. | arch  |                   | Q             |
|  | er <b>T</b><br>Fidelity IRA Beneficiary Distribution - Charity, Foundat<br>ion or University Form.pdf |                   | Upload Date 🔸 |
|  |   | 🔥 Like            | 🛓 Download    |
|  | WF IRA Beneficiary Designation Cover Sheet.2.docx   |                   |               |
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## Charitable Beneficiary IRA Distribution Resource Center (RIFT Project)

https://charitablegiftplanners.org/ira-distribution-resource-center

# **NEW!**

# "RIFT Advocates" Bequest Working Group

To join, contact:

Karen Smedley – Duke University

Phone: 919-684-0367



