

## 401(a) PLAN DISTRIBUTION FORM

### Participant Information

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_ Employer \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Social Security # \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

### Reason for Distribution

- Employer \_\_\_\_\_
- Terminated employment effective \_\_\_\_/\_\_\_\_/\_\_\_\_
  - Retired from employer effective \_\_\_\_/\_\_\_\_/\_\_\_\_
  - Became permanently and totally disabled on \_\_\_\_/\_\_\_\_/\_\_\_\_
  - Termination of plan by employer
  - Death of participant on \_\_\_\_/\_\_\_\_/\_\_\_\_
  - Required Minimum Distribution (age 70 ½)

### Distribution Instructions (Where to Direct Funds)

**Cash Distribution** -  Check box for partial withdrawal of \$ \_\_\_\_\_  
If you choose this option, mandatory 20% Federal income tax withholding will be deducted from your final distribution. The distribution check will be made payable to you and will be sent directly to the address in the 'Participant Information' section above. Federal Law requires an automatic 20% Federal income tax withholding deduction for balances over \$200.00.

**Qualified Rollover** (IRA, 403(b), 457(b), 401(k), 401(a), etc)  
If you choose this option, contact your IRA or eligible employer plan administrator or trustee to verify that the IRA or employer plan will accept your rollover. Complete your institution's required rollover paperwork and **forward both this form and the completed rollover paperwork from your financial institution** to JEM. Once this information is received by JEM, the distribution check will be made payable to your traditional IRA or eligible employer plan and will be sent directly to the financial institution accepting the rollover.

**Send Completed Paperwork to:** JEM Resource Partners ATTN: Distributions  
900 S. Capital of Texas Hwy. Suite 350 Austin, TX 78746

**Contact me about an IRA**  
I would like JEM to contact me about setting up an IRA to rollover the proceeds from my JEM, 401(a) program. (Please note that your account balance must generally be greater than \$1,000 to make the IRA fees charged by most companies practical.)

### Authorization Signature

By my signature below, I represent that I am the owner of the account listed above and authorize the distribution of assets as indicated.

\_\_\_\_\_  
SIGNATURE OF PARTICIPANT

\_\_\_\_\_  
DATE

**Important Note: If additional contributions are received after a distribution has occurred, JEM will process the second distribution exactly as specified on this form and an additional Distribution Fee will be charged.**

**\*\*EMPLOYER SIGNATURE WILL BE COLLECTED BY JEM\*\***

I hereby affirm that the Plan from which the funds requested are being distributed is a tax qualified plan under the Internal Revenue Code Section specified above and that the funds are eligible to be distributed.

\_\_\_\_\_  
SIGNATURE OF PLAN SPONSOR (employer)

\_\_\_\_\_  
DATE