

from your withdrawal, you may be responsible for payment of estimated tax. Rollovers to an IRA or other qualified plan are not subject to federal taxes, and no withholding will be made.

Check this box if you want to have extra withholding (greater than 20%) taken from your withdrawal. Provide the percentage of your withdrawal that you would like withheld: _____%.

Check box if you want to rollover your withdrawal to an IRA or another plan.

Check below to indicate whether or not you elect a direct rollover of your withdrawal amount:

I want to roll over my payment directly to an IRA or other qualified retirement plan that accepts rollovers. The IRA or other retirement plan is named below.

I would like to have only part of my payment directly rolled over. Please roll over \$ _____ to the IRA or qualified retirement plan named below and pay the remainder of my benefit to me, after withholding 20 percent for federal income taxes as required by law.

If your distribution is being rolled over please complete the section below. Your distribution check will be mailed to the address you provide below:

Name if IRA Trustee or Qualified Retirement Plan: _____

Address: _____
Street or Po Box City State Zip

Account Number: _____

Your signature below provides authorization for the Lake County, Illinois Plasterers and Cement Masons Retirement Savings Fund to process your In-Service Withdrawal and that the information you provide is true and correct:

Print Participant Name: _____

Signature of Participant: _____

Date: _____

Fund Office Use Only

The Fund has verified that the amount of In-Service Withdrawal requested does not exceed the maximum amount of withdrawal under this In-Service Withdrawal provision.

Amount: _____

Signed: _____

Date: _____