



**Princor Representatives and Shareholders Only**

P.O. Box 10423  
Des Moines, IA 50306-0423  
800-247-4123

**Overnight Mail:**

711 High Street  
Des Moines, IA 50392-0001

**All Other Representatives and Shareholders**

P.O. Box 8024  
Boston, MA 02266-8024  
800-222-5852

**Overnight Mail:**

30 Dan Road  
Canton, MA 02021-2809

**IRA Distribution Form**

- Use this form to take Non-Mandatory distributions from your Traditional, Roth, SIMPLE, or SEP IRA.
- Indicate type of IRA:  Traditional IRA  Roth  SIMPLE  SEP
- DO NOT use this form if you would like Principal Funds to calculate your Required Minimum Distribution (RMD) from your IRA or to convert your Traditional IRA to a Roth IRA. For RMD use form MM2628, for Roth Conversion use form MM1759. If taking distributions under the IRC 72(t) rule, please call for a *72(t) Distribution* form.
- A Medallion Signature Guarantee MUST be provided on all distribution requests that are: mailed to an address other than the address of record, sent to a bank account not on file, the amount is greater than \$100,000, or made payable to anyone other than the account owner.
- For death distributions, please complete a *Retirement Plan Beneficiary Distribution* form.
- **DO NOT FAX; ORIGINAL SIGNATURE REQUIRED.**

**1. Please provide us with the following information**

Please provide your current address and account information so we can ensure that your account is up to date.

New Address within past 30 days

Account Number

First Name, Middle Initial, Last Name

Social Security Number

Date of Birth (MM/DD/YYYY)

Street Address (no P.O. Box Address), City, State, Zip

( )

( )

Daytime Phone Number

Evening Phone Number

E-mail address

**Automatic Investment Plan (AIP)**

If you have established an AIP for this account, do you wish to continue or stop the draw from your bank account?

Continue Automatic Investment Plan  Stop Automatic Investment Plan

**2. Reason for Distribution**

Distributions from your IRA, other than a return of non-deductible contributions, are subject to applicable Federal and State income tax. Distributions prior to age 59½ are subject to a 10% non-deductible penalty under the Internal Revenue Code (25% for SIMPLE IRAs within the first two years). Exceptions to the 10% penalty include: death, disability, divorce decree, first time home purchase, qualified education expenses, certain medical expenses and when following a series of substantially equal payments. Qualified Roth distributions may be taken tax and penalty free if your account has been funded for 5 years and one of the following applies: death, disability, qualified first time home purchase or you reach age 59½ (distributions of regular contributions are always tax and penalty free). It is your responsibility to determine if taxes or penalties apply to you. Please refer to IRS Publications 590 and 560, or contact the IRS at 800-892-1040 or at www.irs.gov for more information.

- Normal Distribution
- SIMPLE IRA distribution within 2 years of first deposit (25% IRS Penalty applies)
- SIMPLE IRA distribution after 2 years of first deposit
- Premature Distribution (Exceptions to penalty may apply at tax filing; please ask your tax advisor)
  - Disability – attach a copy of your Social Security approval or disability benefits
  - Divorce – attach a certified copy of the divorce decree or separation agreement
  - Excess – complete section 5 of this form
  - Rollover to: –  Qualified Plan  Other
    - Make check payable to new company but mail to me (Medallion Signature Guarantee is required for this option)
    - Send directly to new company. (Please attach Direct Rollover/Transfer form from the new company. Must include an acceptance signature.) Note: If the redemption is a transfer or rollover and made payable to another company, taxes will not be withheld. Disregard Section 7-Tax Withholding Election.

Other \_\_\_\_\_

### 3. Distribution Payment Options

Please indicate if you would like dividend and capital gains distributions paid in cash -OR- a one-time distribution -OR- to establish systematic distributions (minimum account balance of \$5,000 is required). To take your distribution in installments, please indicate the beginning date and method of distribution.

A. Please select your distribution payment option below, then complete Section 3B.

Lump Sum Distribution

All Shares

**OR**

Partial shares (choose one)  Dollar amount \_\_\_\_\_  Number of shares \_\_\_\_\_

Installments: (Please select one of the following.)  Monthly  Quarterly  Annually \_\_\_\_\_  
Beginning on (MM/DD/YYYY)

Dividend and/or Capital Gains Distributions paid in cash

B. Take my distributions from:  All funds in equal % – OR –  \*Pro Rata – OR –  As indicated below:

\_\_\_\_\_  
Portfolio/Fund Name Portfolio/Fund Number \$ \_\_\_\_\_ – OR – \_\_\_\_\_ %

\_\_\_\_\_  
Portfolio/Fund Name Portfolio/Fund Number \$ \_\_\_\_\_ – OR – \_\_\_\_\_ %

\_\_\_\_\_  
Portfolio/Fund Name Portfolio/Fund Number \$ \_\_\_\_\_ – OR – \_\_\_\_\_ %

*\*Pro Rata distribution will be taken from your account based on share balances at the time of request.*

### 4. Proceeds Instructions

Principal Funds offers a variety of payment methods for your distribution. Please review and choose one of the options below. **For payments sent to a bank or address that is not currently on file, please provide a Medallion Signature Guarantee in Section 6 of this form.** To verify if your account is already linked to a bank account, please call Principal Funds at 800-222-5852.

Deposit to my linked bank account (already on file)

Deposit to my bank account not on file (Please complete Section 6.)

Establish a new non-retirement account (Please complete an application and return with this form.)

Send a check to my address of record

Overnight check to address of record (additional fee applies)

### 5. Excess Contributions

Removal of Excess Contributions: Was tax return filed?  Yes  No

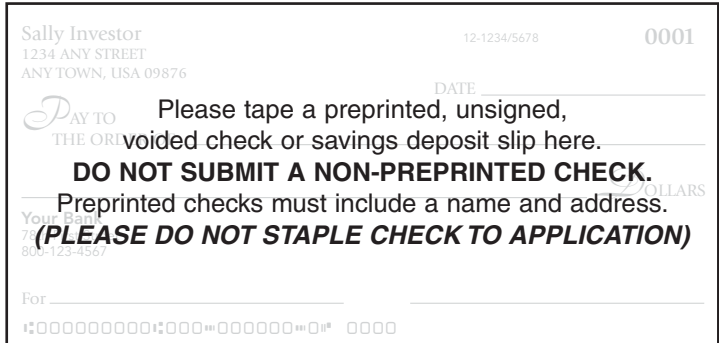
\$ \_\_\_\_\_  
Amount of Excess Contribution Date Excess Contribution was made (MM/DD) Tax Year (YYYY)

**6. Banking Information**

If you would like to establish banking information for the purpose of making electronic funds transfers between your Principal Funds account and your bank account, please complete the information below. If you DO NOT provide a preprinted voided check, savings deposit slip or proof of account from your banking institution, a **Medallion Signature Guarantee** is required below. ACH redemptions are transferred on the second business day following the request **free of charge**. Bank Wire redemptions are transferred the following business day, if requested before the close of the New York Stock Exchange. **Principal Funds charges a \$10 fee each time funds are sent by Bank Wire. Your bank may also charge a fee. Please allow 15 business days for your bank account information to be established and validated.**

- Checking Account** (please tape a preprinted check)
- Savings Account** (please tape a preprinted deposit slip or proof of account from your banking institution)

Name of Bank \_\_\_\_\_ ABA Routing Number \_\_\_\_\_ Bank Account Number \_\_\_\_\_



If the registration of your Principal Funds account does not match the bank information provided above, we require all Principal account and bank account owners to provide their signatures along with a Medallion Signature Guarantee granting permission for you to access the account for either deposits to or withdrawals from the account. **All Principal account and bank account owners must sign below.**

**I am the owner/co-owner of the bank account listed above and/or the Principal account owner. I give permission to Principal Funds to access my account in order to make deposits to or take withdrawals from it on behalf of the registered account owner(s). I understand transactions to/from my account will continue until I notify Principal Funds, in writing, that my account may no longer be accessed.**

\_\_\_\_\_  
Bank Account Owner's First Name, Middle Initial, Last Name

**Medallion Signature Guarantee:**

\_\_\_\_\_  
Bank Account Owner's Signature

\_\_\_\_\_  
Bank Account Owner's First Name, Middle Initial, Last Name

\_\_\_\_\_  
Bank Account Owner's Signature

\_\_\_\_\_  
Principal Account Owner's First Name, Middle Initial, Last Name

\_\_\_\_\_  
Principal Account Owner's Signature

\_\_\_\_\_  
Principal Account Owner's First Name, Middle Initial, Last Name

\_\_\_\_\_  
Principal Account Owner's Signature

## 7. Tax Withholding

I have reviewed the below "Withholding Notice". I understand my withholding election or default from this form stays in effect for all future telephone distributions (if applicable) until I change it in writing. If CDSC applies, it will be taken above the amount requested.

### Federal Tax Withholding

I understand that 10% of my distribution will be withheld for Federal Income Tax unless I make a different election below. No tax will be withheld from a Roth IRA unless instructed to do so.

I elect **NOT** to have federal income tax withheld.

Please withhold federal income tax at the following percentage: \_\_\_\_\_% (whole percentage only)

### State Tax Withholding

Check one of the following boxes to indicate whether you wish to have state income taxes withheld. State tax withholding may apply even if you do not check a box below. Also, some states do not offer state tax withholding. Refer to the instructions for specific information concerning your state.

I elect **NOT** to have state income tax withheld.

I elect to withhold state taxes at the rate of \_\_\_\_\_% (whole percentage only)

Note: You are urged to discuss distributions from a Roth IRA with your tax advisor before making a withholding election. Many Roth IRA distributions are partially or wholly nontaxable.

## Withholding Notice

This section must be completed. Your most current election remains in effect for phone redemptions until you change it in writing. You may change your current withholding election at any time by providing new written instructions to the custodian by submitting a new Distribution Form or the IRA Telephone Distribution Form.

### Federal Tax Withholding

Distributions from your IRA are subject to federal income tax withholding in the amount of 10% unless you elect not to have withholding apply. Distributions from your Roth IRA are not subject to income tax withholding unless you elect to have withholding apply.

### State Tax Withholding

If federal income tax withholding is applied to your distribution, your state may also require state income taxes to be withheld. Laws regarding tax withholding are subject to change at any time without notice. Please see your tax advisor for additional information. Depending on your state of residency, the following rules apply:

If your state of residence has:	Your options for state tax withholding are:
Mandatory State Withholding	If you elect federal tax withholding, state tax withholding <u>will</u> be applied, and will be calculated based on your state's applicable minimum requirements. You may also elect a specific percentage, however, your requested amount must be equal or greater than your state's minimum withholding requirement, otherwise we will apply your state's applicable minimum withholding requirement.
Non-Participatory State Withholding	You may not elect state tax withholding. State tax withholding is <u>not available</u> even if your state has state income taxes.
Voluntary State Withholding	You may elect voluntary state income tax withholding. You must provide a specific percentage to be applied for state tax withholding.

Regardless of whether you elect to have federal, and if applicable, state tax withholding apply, you are liable for the payment of federal income tax, any state or local taxes, and any penalties which may apply to your distribution. You also may be subject for tax penalties under the estimated tax payment rules if your estimated tax payments and withholding are not adequate. IRS Publication 505 should be reviewed, especially by new retirees.

## 8. Please Read and Sign

I hereby request a distribution from my Principal Funds IRA for the reason indicated in Section 2. I acknowledge that I have read and understand this Non-Mandatory IRA Distribution form and understand that distributions from an IRA will be subject to a 10% income tax withholding requirement unless I elect not to have withholding apply, and that distributions from a Roth IRA will not have income tax withheld unless I elect to have withholding apply. I also understand that a penalty tax of 10% or more (in addition to any ordinary income tax) may apply to this distribution as prescribed by the Internal Revenue code (the "Code") and Regulations. I agree to obtain such legal and tax advice as may be necessary to make this determination. The custodian may rely on all information provided on this form as accurate and complete. If I have determined the amount of the distribution under Option A and B of Section 3 or under Section 5, I hereby release and hold harmless Principal Life Insurance company and any of its affiliates from any liability for any loss, damage, or injury I may sustain as a result of the establishment of a withdrawal plan. I certify, under penalty of perjury, that my Social Security number shown on this applicator is correct. (The IRS does not require your consent to any provision of this document other than the certification regarding your Social Security number.)

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Signature of Account Owner

Date (MM/DD/YYYY)

Spouse of Participant pursuant to divorce decree or separation agreement (Medallion Signature Guarantee required)

**Medallion Signature Guarantee:** (required for adding a new linked bank account, alternative payee, alternative address, or distributions greater than \$100,000)