

## Putnam Investments IRA Fair Fund Reissue Form

This form is being provided to complete your reissuing of your IRA Fair Fund check to either a new payee, beneficiary, or to a new trustee. Please review the information on this form and complete all sections that apply.

Return delivery option:

- Mail this completed form to the address below **OR**
- Fax this signed form to the below fax number

Putnam Investments  
P.O. Box 8383  
Boston, MA 02266-8383

Telephone # 1-800-848-9697  
Fax # 1-800-913-6160

I am the account holder

I am the beneficiary

**A. ELECTION** – I elect to receive a distribution from the Qualified Settlement Fund as follows:

- Issue a check in my name, subject to 10% federal withholding and state withholding, if applicable.  
(Complete Section B, C and F)
- Issue a check in my name as I am the beneficiary of the account owner's IRA  
(Complete Section B, C, D and F)
- Issue a check payable to my §408(d)(3)(c) Inherited IRA (Complete Section B, E and F)
- Issue a check payable to my IRA, qualified retirement plan, 403(a), 403(b), or 457 plan (Complete Section B, E and F)

### B. ACCOUNT HOLDER INFORMATION:

_____		_____-_____-_____	_____	
Account Holder Name (First, M.I., Last)		Social Security Number	Account/Invoice #	
_____/_____/_____	_____	_____-_____-_____	_____	
Check #	Amount of check	Date of Birth	Daytime phone	State of Residence
_____			_____	_____
Mailing Address			City	State ZIP

### C. NOTIFICATION OF ELECTION FOR PAYEES OF NONPERIODIC PAYMENTS

The distribution you receive from the Qualified Settlement Fund is subject to 10% Federal income tax withholding unless you elect not to have withholding apply. State income taxes may be withheld if your address of record is in one of the following states: AR, CA, DE, IA, KS, MA, ME, NC, OK, OR, VT and federal income tax is being withheld. You may elect not to have withholding apply to your distribution payment by signing and dating the following election and returning it to us.

If you elect not to have withholding apply to your distribution payments, or if you do not have enough Federal income tax withheld from your distribution, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient.

**ELECTION FOR PAYEES OF NONPERIODIC PAYMENTS**

Instructions: If you do not want any Federal income tax withheld from your distribution, please check the box located below, sign, and date this election and return it to us.

Even if you elect not to have Federal income tax withheld, you are liable for payment of Federal income tax on the taxable portion of your distribution. You also may be subject to tax penalties under the estimated tax payment rules if your payments of estimated tax and withholding, if any, are not adequate.

**I do not want to have Federal income tax withheld from my distribution**

<b>D. BENEFICIARY INFORMATION:</b>		Beneficiary %: _____	State of Residence: _____	
_____		_____/_____/_____		
Name (First, M.I., Last)		Date of Birth		
Spousal Beneficiary <input type="checkbox"/>	Non-Spouse Beneficiary <input type="checkbox"/>			
_____-_____-_____	_____-_____-_____			
Social Security Number	Daytime phone			
_____	_____	_____	_____	_____
Mailing Address	City	State	ZIP	

<b>E. RECEIVING TRUSTEE:</b>				
_____	_____	_____	_____	
Payee	Account Type	Account #		
_____	_____	_____	_____	_____
Mailing Address	City	State	ZIP	

**F. SIGNATURE** - I am authorized to receive this distribution. I understand that I may receive IRS Form 1099-R reporting this amount. I hereby affirm that the information given is true and correct, and authorize the Qualified Settlement Fund to make the distribution according to the instructions on this form.

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct social security number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

**You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.**

_____	_____	_____
Signature	Printed Name	Date