



Slavic Integrated Administration
1075 Broken Sound Parkway N.W., Suite 100
Boca Raton, FL 33487-3540
Phone: 800-356-3009
Fax: 561-241-1070

HARDSHIP REQUEST

Date : _____ Company Name: _____

Name: _____ Payroll Co. Name: _____
(if different than co. name)

SS#: _____ Reason for hardship: _____

Address: _____ Phone Number: _____
(Daytime number)

Email address: _____

Amount Requested: \$ _____ (Subject to \$40.00 Distribution fee.)

Optional Federal Income tax withholding: _____20% _____30% _____NONE

Note: Only employee contribution amounts may be disbursed in a hardship distribution. This excludes any contributions of earnings, employer match, or profit sharing.

Do You have an outstanding 401(k) loan? Yes _____ No _____

Are You still employed with the above work site employer? Yes _____ No _____

Please be aware that a hardship distribution must be deemed to be of an immediate and heavy financial need, if the distribution is for:

***Please Note Hardship withdrawals are regulated by the Internal Revenue Service**

1. ***Medical Expenses (copy of medical bill(s) not covered by insurance)***
2. ***Purchase of a Primary home (copy of good faith note or contract)***
3. ***Tuition cost for a participant or dependent of a participant (copy of tuition bill)***
4. ***To avoid eviction from the primary home (copy of eviction notice from mortgage co. or landlord)***

Hardship distributions are subject to a 10% penalty and the distribution amount is taxable as income, both are reported on your Federal Income tax return, Form 1040. Your employee contributions to your 401(k) must cease for 6 months.

If your situation does not fall under any of the reasons described above you do not qualify for a hardship withdrawal. Therefore, you can only withdraw from your account upon termination of employment if you do not qualify for a loan.

If your situation does fall under any of the reasons mentioned above you must send in proof of the hardship (documents) in order for us to be able to process your request. After taking a hardship you cannot participate in the 401(k) plan for six months from the date of hardship.

Participants Signature