

# Required minimum distribution (RMD) request



**Mail to:** P.O. Box 9261, Des Moines, IA 50306-9261  
**Overnight:** 8300 Mills Civic Pkwy, West Des Moines, IA 50266-3833  
**Phone:** 1-866-747-3421 | **Email:** SecuritiesPi@sfgmembers.com

This form is to be completed when requesting withdrawals to satisfy your IRS-Required Minimum Distribution (RMD). You can use this form to request a one-time withdrawal or to set up automatic distributions to satisfy current and future RMD requirements for this contract. Please consult with and rely upon your own tax and legal professionals for additional information concerning RMD requirements.

## 1. Contract information

Contract number

Owner's name (first, middle initial, last)			Social Security number
Street address			Apartment/suite number
City	State	ZIP	Phone number

## 2. Life expectancy options

Please select one of the following:

- Individual life expectancy** – This method provides the minimum amount available without incurring an IRS penalty.
- Joint life expectancy** – You may select this option only if your spouse is more than 10 years younger than you and is the sole primary beneficiary on the contract. If not, we will default to the individual life expectancy method.

Complete only if selecting joint life option:

Spouse's name (first, middle initial, last)	
Spouse's date of birth (mm/dd/yyyy)	Spouse's Social Security number

### 3. Distribution instructions

Required Minimum Distributions (RMD) for each year are calculated using the prior December 31<sup>st</sup> account balance divided by the appropriate age-based factor from the IRS Uniform Distribution Table. **If this qualified annuity contract was issued in this current calendar year and was transferred from another company, please use distribution option 3.**

Initiate new distribution     Change existing distributions     Terminate existing distributions

**Please indicate your election below:**

**Option 1:** Please calculate and process my RMD as a one-time lump sum payment for the current tax year immediately. By selecting this option, a new form will have to be completed and returned each tax year.

**Option 2:** Please calculate and process my RMD as a series of systematic payments beginning on\*:

Date\* (mm/dd/yyyy): \_\_\_\_\_

**\* Please select a day of the month between the 1st and the 28th. If the date is not complete or an invalid date is chosen, the form will be considered "Not in Good Order." If the date listed has already passed, the first distribution will be processed immediately, and the systematic distributions will start on the next frequency from this date.**

**Distribution frequency:** Please elect the frequency in which you would like to receive your RMD payments. If Option 2 is elected and no frequency is chosen, the Contract will be set up to receive annual distributions.

Monthly     Quarterly     Semi-Annually     Annually

**Option 3:** Please calculate and process my RMD for the current tax year immediately using the statement provided.

December 31<sup>st</sup> Contract value: \_\_\_\_\_

**(If this qualified contract was issued in this current calendar year and was transferred from another company, please provide the prior year's December 31<sup>st</sup> value for the transferred contract, along with a copy of the prior carrier's statement, for an accurate calculation. You will receive this first year's RMD as a lump sum distribution only. If you do not provide a statement, we will calculate your RMD based on the contract value at issue.)**

### 4. Method of payment

**Please check one of the following options. If no election is indicated, a check will be mailed to you.**

I would like this withdrawal to be paid to me by check and sent to the mailing address listed in section 1 of this form.

I would like this withdrawal to be sent via Automated Clearing House (ACH) to the financial institution account indicated below. I understand the proceeds will arrive at my financial institution account in approximately three to five business days. I authorize Midland National and the financial institution listed below to automatically deposit distributions into my account. **Please attach a voided check.**

Type of Account:     Checking     Savings

Name(s) on account (first, middle initial, last)

Financial institution name

Financial institution phone number

Financial institution routing number (ABA #)

Financial institution account number

**Include a preprinted, voided check, or letter from the bank on their letterhead, to ensure accurate account information for the Automated Clearing House (ACH) debit.**

**Note:** Checks must be preprinted with your name and address. We cannot accept starter or counter checks.

**5. Federal election of withholding**

See the instructions on page 4-5 and Marginal Rate Tables for additional information.

Your withholding rate is determined by the type of payment you will receive.

- For non-periodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100%. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its possessions.
- For an eligible rollover distribution, the default withholding rate is 20%.

I would like the default withholding rate.

I would like rate of withholding that is different from the default withholding rate.

\_\_\_\_\_ % Enter the rate (percent) as a whole number (enter a rate between 0% and 100%, no decimals)

**6. State election of withholding**

Important state tax withholding information: If you reside in a state that requires tax withholding, we will withhold state income tax in accordance with the respective state's rules.

Withhold state taxes - (select yes or no)

No  Yes \_\_\_\_\_ %

**7. Acknowledgment and signature**

I hereby acknowledge that the information provided herein is to the best of my knowledge true and accurate. I also acknowledge that this form must be fully completed, and failure to complete any portion of this form may delay the processing of the request. The completion of this form is necessary to satisfy the Written Notice Requirement as defined in your Contract.

**Taxpayer certification**

Under penalty of perjury, my signature certifies that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me);
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, (b) I have not been notified by the Internal Revenue Service 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;
3. I am a U.S. citizen or U.S. resident alien; and
4. I am exempt from FATCA reporting.

**8. Fraud Statements**

**CA Residents:** For your protection California law requires the following to appear on this form:

Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Owner/Assignee's signature	Date signed (mm/dd/yyyy)

Securities distributed by Sammons Financial Network®, LLC., member FINRA. Insurance products are issued by Midland National® Life Insurance Company (West Des Moines, IA). Sammons Institutional Group®, Inc. provides administrative services. Sammons Financial Network®, LLC., Midland National® Life Insurance Company and Sammons Institutional Group®, Inc., are wholly owned subsidiaries of Sammons® Financial Group, Inc.

Sammons Institutional Group®, Inc., Sammons Financial Network®, LLC., member FINRA, and Midland National® Life Insurance Company do not give tax, legal, or investment advice. Please consult with and rely on your own tax, legal, or investment professional(s). Taxes are payable upon withdrawal of funds, and a 10% IRS penalty may apply to withdrawals prior to age 59½.



## General Instructions and Marginal Rate Tables for withholding for non-periodic payments and eligible rollover distributions.

Use the information provided on pages 4-5 to guide you in completing withholding section 5, page 3.

### General Instructions

Section references are to the Internal Revenue Code.

**Future developments** - For the latest information about any future developments related to Form W-4R, such as legislation enacted after it was published, go to [www.irs.gov/FormW4R](http://www.irs.gov/FormW4R).

**Purpose** - Complete section 5, page 3, to have payers withhold the correct amount of federal income tax from any non-periodic payment or eligible rollover distribution from an employer retirement plan, annuity (including a commercial annuity), or individual retirement account (IRA). See pages 4-5 for the rules and options that are available for each type of payment.

**Caution** - If you have too little tax withheld, you will generally owe tax when you file your tax return, and you may also owe a penalty, unless you make timely payments of estimated tax. If too much tax is withheld, you will generally be due a refund when you file your tax return. Your withholding choice (or an election not to have withholding on a non-periodic payment) will generally apply to any future payment from the same plan or IRA. Submit a new Form W-4R if you want to change your election.

### 2023 Marginal Rate Tables

You may use these tables to help you select the appropriate withholding rate for this payment or distribution. Add your income from all sources and use the column that matches your filing status to find the corresponding rate of withholding. See the following page for more information on how to use this table.

Single or married filing separately		Married filing jointly or Qualifying surviving spouse		Head of household	
Total income over—	Tax rate for every dollar more	Total income over—	Tax rate for every dollar more	Total income over—	Tax rate for every dollar more
\$0	0%	\$0	0%	\$0	0%
13,850	10%	27,700	10%	20,800	10%
24,850	12%	49,700	12%	36,500	12%
58,575	22%	117,150	22%	80,650	22%
109,225	24%	218,450	24%	116,150	24%
195,950	32%	391,900	32%	202,900	32%
245,100	35%	490,200	35%	252,050	35%
591,975*	37%	721,450	37%	598,900	37%

\* If married filing separately, use \$360,725 instead for this 37% rate.

**For Privacy Act and Paperwork Reduction Act Notice, see page 5.**

**Non-periodic payments—10% withholding** - Your payer must withhold at a default 10% rate from the taxable amount of nonperiodic payments **unless** you enter a different rate in section 5, page 3. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. Note that the default rate of withholding may not be appropriate for your tax situation. You may choose to have no federal income tax withheld by entering “-0-”. See the specific instructions below for more information. Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including “-0-”) on any payments to be delivered outside the United States and its possessions.

**Note:** If you don’t give Form W-4R to your payer, you don’t provide an SSN, or the IRS notifies the payer that you gave an incorrect SSN, then the payer must withhold 10% of the payment for federal income tax and can’t honor requests to have a lower (or no) amount withheld. Generally, for payments that began before 2022, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

**Eligible rollover distributions—20% withholding** - Distributions you receive from qualified retirement plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a 20% default rate of withholding on the taxable amount of the distribution. You can’t choose withholding at a rate of less than 20% (including “-0-”). Note that the default rate of withholding may be too low for your tax situation. You may choose to enter a rate higher than 20% in section 5, page 3. Don’t give Form W-4R to your payer unless you want more than 20% withheld.

Note that the following payments are **not** eligible rollover distributions: (a) qualifying “hardship” distributions, and (b) distributions required by federal law, such as required minimum distributions. See Pub. 505 for details. See also *Non-periodic payments—10% withholding above*.

**Payments to nonresident aliens and foreign estates.** Do not use Form W-4R. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for more information.

**Tax relief for victims of terrorist attacks.** If your disability payments for injuries incurred as a direct result of a terrorist attack are not taxable, enter “-0-” in section 5, page 3. See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

## Specific Instructions

For an estate, enter the estate's employer identification number (EIN) in the area reserved for "Social security number."

**More withholding** - If you want more than the default rate withheld from your payment, you may enter a higher rate in section 5, page 3.

**Less withholding (non-periodic payments only)** - If permitted, you may enter a lower rate in section 5, page 3 (including "-0-") if you want less than the 10% default rate withheld from your payment. If you have already paid, or plan to pay, your tax on this payment through other withholding or estimated tax payments, you may want to enter "-0-".

**Suggestion for determining withholding** - Consider using the Marginal Rate Tables on page 4 to help you select the appropriate withholding rate for this payment or distribution. The tables are most accurate if the appropriate amount of tax on all other sources of income, deductions, and credits has been paid through other withholding or estimated tax payments. If the appropriate amount of tax on those sources of income has not been paid through other withholding or estimated tax payments, you can pay that tax through withholding on this payment by entering a rate that is greater than the rate in the Marginal Rate Tables.

The marginal tax rate is the rate of tax on each additional dollar of income you receive above a particular amount of income. You can use the table for your filing status as a guide to find a rate of withholding for amounts above the total income level in the table.

To determine the appropriate rate of withholding from the table, do the following. Step 1: Find the rate that corresponds with your total income not including the payment. Step 2: Add your total income and the taxable amount of the payment and find the corresponding rate.

If these two rates are the same, enter that rate in section 5, page 3. (*See Example 1 below.*)

If the two rates differ, multiply (a) the amount in the lower rate bracket by the rate for that bracket, and (b) the amount in the higher rate bracket by the rate for that bracket. Add these two numbers; this is the expected tax for this payment. To get the rate to have withheld, divide this amount by the taxable amount of the payment. Round up to the next whole number and enter that rate in section 5, page 3. (*See Example 2 below.*)

If you prefer a simpler approach (but one that may lead to over withholding), find the rate that corresponds to your total income including the payment and enter that rate in section 5, page 3.

**Examples** - Assume the following facts for Examples 1 and 2. Your filing status is single. You expect the taxable amount of your payment to be \$20,000. Appropriate amounts have been withheld for all other sources of income and any deductions or credits.

**Example 1** - You expect your total income \$60,000 without the payment. Step 1: Because your total income without the payment, \$60,000, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$80,000, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. Because these two rates are the same, enter "22" in section 5, page 3.

**Example 2** - You expect your total income to be \$42,500 without the payment. Step 1: Because your total income without the payment, \$42,500, is greater than \$24,850 but less than \$58,575, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$62,500, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. The two rates differ. \$16,075 of the \$20,000 payment is in the lower bracket (\$58,575 less your total income of \$42,500 without the payment), and \$3,925 is in the higher bracket (\$20,000 less the \$16,075 that is in the lower bracket). Multiply \$16,075 by 12% to get \$1,929. Multiply \$3,925 by 22% to get \$863.50. The sum of these two amounts is \$2,792.50. This is the estimated tax on your payment. This amount corresponds to 14% of the \$20,000 payment (\$2,792.50 divided by \$20,000). Enter "14" in section 5, page 3.

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request additional federal income tax withholding from your non-periodic payment(s) or eligible rollover distribution(s); (b) choose not to have federal income tax withheld from your non-periodic payment(s), when permitted; or (c) change a previous Form W-4R (or a previous Form W-4P that you completed with respect to your non-periodic payments or eligible rollover distributions). To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding of your payment(s). Failure to provide a properly completed form will result in your payment(s) being subject to the default rate; providing fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.