

**TRADITIONAL****IRA****REQUIRED MINIMUM DISTRIBUTION SCHEDULED PAYMENT ELECTION**

*This form may be used to establish a scheduled payment election that will meet or exceed your required minimum distribution (RMD). Refer to the attached Withholding Instructions for additional withholding information. Do not complete this form if you wish to take a total distribution of your Traditional IRA. For this purpose, complete a Withdrawal Authorization form.*

**PART 1. IRA OWNER**

Name (First/MI/Last) \_\_\_\_\_  
 Social Security Number \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Phone \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Account Number \_\_\_\_\_ Suffix \_\_\_\_\_

**PART 2. IRA TRUSTEE OR CUSTODIAN**

*To be completed by the IRA trustee or custodian*

Name \_\_\_\_\_  
 Address Line 1 \_\_\_\_\_  
 Address Line 2 \_\_\_\_\_  
 City/State/ZIP \_\_\_\_\_  
 Phone \_\_\_\_\_ Organization Number \_\_\_\_\_

**PART 3. FIRST YEAR RMD DELAYED PAYMENT**

*If this is your first year RMD, complete this section only if you wish to delay your first year RMD and take it next year. Choosing to delay your first year RMD will require you to take two years' worth of RMD payments next year.*

Delayed Payment Month (Select one)

January  February  March

Delayed Payment Amount (Select one)

RMD Amount  Specific Amount \$ \_\_\_\_\_ (Amount must be greater than your RMD amount)

**PART 4. PAYMENT INFORMATION**

*Complete this section for payments other than any first year RMD delayed payment specified in Part 3.*

**PAYMENT OPTIONS** (Select one)

- Distribute the RMD Each Year
- Distribute \$ \_\_\_\_\_ Per Payment  
 (Total payments for the year must meet or exceed your RMD)
- Distribute the IRA Over \_\_\_\_\_ Years  
 (The number of years must be less than your life expectancy as determined using the applicable life expectancy table.)
- Do not establish scheduled payments for my RMD. I will be responsible for withdrawing the RMD. (If selected, skip to Part 8.)

**PAYMENT START DATE AND FREQUENCY** (Complete and select one frequency)

Start Date (Month/Year) \_\_\_\_\_  
 (If this is your first RMD, this date cannot be later than your required beginning date.)

Monthly  Quarterly  Semiannually  Annually

**PART 5. LIFE EXPECTANCY DETERMINATION**

*If the statement below is true, the joint life expectancy of you and your spouse may be used to calculate your RMD. Otherwise the Uniform Lifetime Table may be used.*

- My spouse is more than 10 years younger than I am and will be my sole primary beneficiary for the entire calendar year.

Spouse's Name (First/MI/Last) \_\_\_\_\_

Spouse's Date of Birth \_\_\_\_\_

Name of IRA Owner \_\_\_\_\_, Account Number \_\_\_\_\_

**PART 6. WITHHOLDING ELECTION** (Form W-4R/OMB 1545-0074)

Do not complete this section if you are a nonresident alien.

If this is an annuitized payment from an individual retirement annuity, do not complete this section. Instead, complete IRS Form W-4P, Withholding Certificate for Periodic Pension or Annuity Payments, which may be found at www.irs.gov.

**FEDERAL WITHHOLDING**

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

For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100% below. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its possessions. (See the Withholding Instructions for more information.)

Complete this section if you would like a rate of withholding that is different from the default withholding rate. See the instructions and the Marginal Rate Tables that follow for additional information. Enter the rate as a whole number (no decimals).

Withhold \_\_\_\_\_%

**STATE WITHHOLDING** (If applicable, select one)

Name of Withholding State \_\_\_\_\_

- Withhold \_\_\_\_\_% of gross distribution amount
- Withhold \_\_\_\_\_% of federal withholding amount (only available in limited states)
- Withhold \$ \_\_\_\_\_
- Do Not Withhold State Income Tax

**NOTE:** State income tax withholding may not be available for all states. If applicable, mandatory state income tax will be withheld from the distribution in accordance with state tax guidelines.

**PART 7. PAYMENT INSTRUCTIONS**

**ASSET HANDLING** (Assets identified below will be liquidated and distributed in the order in which they are listed, unless otherwise specified in the Special Instructions section.)

Asset Description	Amount to be Withdrawn	Special Instructions
_____	_____	_____
_____	_____	_____
_____	_____	_____

**PAYMENT METHOD**

- Check** Make payable to \_\_\_\_\_
- Internal Account** Account Number \_\_\_\_\_ Type (e.g., checking, savings) \_\_\_\_\_
- External Account** (e.g., EFT, ACH, wire) (Additional documentation may be required and fees may apply.)  
Name of Organization Receiving the Assets \_\_\_\_\_ Routing Number (Optional) \_\_\_\_\_  
Account Number \_\_\_\_\_ Type (e.g., checking, savings) \_\_\_\_\_

**PART 8. SIGNATURES**

I certify that all of the information provided by me is true and accurate. I have received a copy of the Withholding Notice Information. No tax advice has been given to me by the trustee or custodian. All decisions regarding these payments are my own. I assume responsibility for any consequences that may result from these payments and I agree that the trustee or custodian is not responsible for any consequences that may result from executing this request. I authorize the trustee or custodian to make payments as indicated above until instructed otherwise.

**X** \_\_\_\_\_  
Signature of IRA Owner \_\_\_\_\_ Date (mm/dd/yyyy) \_\_\_\_\_

**X** \_\_\_\_\_  
Notary Public/Signature Guarantee (If required by the trustee or custodian) \_\_\_\_\_ Date (mm/dd/yyyy) \_\_\_\_\_

**X** \_\_\_\_\_  
Authorized Signature of Trustee or Custodian \_\_\_\_\_ Date (mm/dd/yyyy) \_\_\_\_\_

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## RULES AND CONDITIONS APPLICABLE TO REQUIRED MINIMUM DISTRIBUTION PAYMENTS

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You are required to take an RMD from your IRA by your required beginning date and by the end of each year thereafter. Your required beginning date is April 1 of the year following the year you attained age 70½ (if you were born before July 1, 1949), or April 1 of the year following the year you attained age 72 (if you were born on or after July 1, 1949, but before January 1, 1951), or April 1 of the year following the year you attained age 73 (if you were born on or after January 1, 1951). If you fail to withdraw the RMD, you may be subject to a 25 percent IRS penalty tax which may be further reduced to 10 percent if the failure is corrected in a timely manner. The RMD generally is calculated by dividing the account balance by the applicable distribution period (your life expectancy).

**Account Balance.** The account balance is the balance of the IRA on December 31 of the previous year adjusted by adding any outstanding rollovers or transfers taken in the preceding year and received this year.

**Applicable Distribution Period.** The applicable distribution period is your life expectancy factor. To determine your life expectancy, refer to the Uniform Lifetime Table using your age in the year for which the payment is due. If your spouse is your sole primary beneficiary for the entire calendar year and more than 10 years younger than you are, refer to the Joint Life Expectancy Table. Life expectancy tables may be found in IRS Publication 590-B, *Distributions from Individual Retirement Arrangements (IRAs)*.

### RMD CALCULATION

$$\frac{\$ \text{ (12/31 Account Balance)} + \$ \text{ (Outstanding Rollovers/Transfers)}}{\text{(Life Expectancy)}} = \$ \text{ (RMD)}$$

### PAYMENT OPTIONS

**Distribute the RMD Each Year.** Your RMD will be paid to you each year. This is the minimum amount you must withdraw each year.

**Distribute Specific Payment Amount.** You may choose a specific payment amount to be paid to you each year. This amount must meet or exceed your RMD.

**Distribute the IRA Over a Specific Number of Years.** You may choose a specific number of years for your payments to be paid to you. The amount distributed each year will be determined by dividing the account balance by the number of years remaining in your election. This amount must meet or exceed your RMD.

**Do Not Establish Scheduled Payments for my RMD.** You must withdraw your RMD from this or any other of your IRAs by the applicable deadline.

# WITHHOLDING INSTRUCTIONS (Form W-4R/OMB No. 1545-0074)

## 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 of form.** Complete Form W-4R to have payers withhold the correct amount of federal income tax from your nonperiodic payment or eligible rollover distribution from an employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See below for the rules and options that are available for each type of payment. Don't use Form W-4R for periodic payments (payments made in installments at regular intervals over a period of more than 1 year) from these plans or arrangements. Instead, use Form W-4P, *Withholding Certificate for Periodic Pension or Annuity Payments*. For more information on withholding, see Pub. 505, *Tax Withholding and Estimated Tax*.

**Caution:** If you have too little tax withheld, you will generally owe tax when you file your tax return and may 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 nonperiodic 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.

**Nonperiodic 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 the Withholding Election section. 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-” in the Withholding Election section. 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 territories.

**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 2024, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

**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 the Withholding Election section. See Pub. 3920, *Tax Relief for Victims of Terrorist Attacks*, for more details.

### 2024 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 instructions 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%
14,600	10%	29,200	10%	21,900	10%
26,200	12%	52,400	12%	38,450	12%
61,750	22%	123,500	22%	85,000	22%
115,125	24%	230,250	24%	122,400	24%
206,550	32%	413,100	32%	213,850	32%
258,325	35%	516,650	35%	265,600	35%
623,950*	37%	760,400	37%	631,250	37%

\* If married filing separately, use \$380,200 instead for this 37% rate.

## Specific Instructions

### Withholding Election

**More withholding.** If you want more than the default rate withheld from your payment, you may enter a higher rate in the Withholding Election section.

**Less withholding (nonperiodic payments only).** If permitted, you may enter a lower rate in the Withholding Election section (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 above 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 the Withholding Election section. (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 the Withholding Election section. (See Example 2 below.)

If you prefer a simpler approach (but one that may lead to overwithholding), find the rate that corresponds to your total income including the payment and enter that rate in the Withholding Election section.

**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 to be \$62,000 without the payment. Step 1: Because your total income without the payment, \$62,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$82,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Because these two rates are the same, enter "22" in the Withholding Election section.

**Example 2.** You expect your total income to be \$43,700 without the payment. Step 1: Because your total income without the payment, \$43,700, is greater than \$26,200 but less than \$61,750, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$63,700, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. The two rates differ. \$18,050 of the \$20,000 payment is in the lower bracket (\$61,750 less your total income of \$43,700 without the payment), and \$1,950 is in the higher bracket (\$20,000 less the \$18,050 that is in the lower bracket). Multiply \$18,050 by 12% to get \$2,166. Multiply \$1,950 by 22% to get \$429. The sum of these two amounts is \$2,595. This is the estimated tax on your payment. This amount corresponds to 13% of the \$20,000 payment (\$2,595 divided by \$20,000). Enter "13" in the Withholding Election section.

**Privacy Act and Paperwork Reduction Act Notice.** The IRS asks 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 nonperiodic payment(s) or eligible rollover distribution(s); (b) choose not to have federal income tax withheld from your nonperiodic 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 nonperiodic 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 on 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 territories for use in administering their tax laws. The IRS 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.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, the IRS would be happy to hear from you. See the instructions for your income tax return.