

Questions? Call 1-800-343-0860, business days from 8 AM to midnight Eastern Time.

# **Distribution** — MRD

Use this form to request a Minimum Required Distribution (MRD) for the current, deferred, or a missed year from your 401(a), 401(k), 403(b), or 457(b) governmental employer plan. Do NOT use this form to request an MRD for the current year if your plan has arranged with Fidelity to automatically pay MRDs. Fill in by hand using CAPITAL letters and black ink, or on screen (if PDF).

#### **Helpful To Know**

- The IRS requires that you begin taking MRDs from retirement plans by April 1 of the year after you turn 70½ or you retire from the employer sponsoring your plan, whichever happens later.
- MRDs cannot be rolled over into any type of retirement plan.
- If you are a beneficiary or qualified domestic relations order (QDRO) alternate payee, call Fidelity instead of using this form.
- To request distributions for more than one plan, use a separate form for each plan.
- Many plans require plan sponsor approval of MRDs, even for participants who no longer work for the employer sponsoring the plan. To determine if you need approval for this MRD request, call your plan sponsor or Fidelity.

- Workplace retirement plan distributions may have tax consequences. You may want to consult a tax or financial professional.
- If your address has changed from the one Fidelity has on file, AND you are requesting more than \$10,000, be sure to submit this form by December 15 to ensure that your MRD occurs in the correct calendar year.
- To get your plan number(s), call your plan sponsor or go to fidelity.com/atwork.
- To validate your profile or change your address, go to netbenefits.com/profile or call Fidelity.
- For other types of distributions in addition to your MRD find the appropriate forms at fidelity.com/atwork.
- Non-resident aliens must provide IRS form W-8BEN and a U.S. taxpayer ID number to claim any tax treaty benefits.

Form continues on next page.

## 1. Account Owner/Participant

	Name		Social Security or Taxpayer ID Number		
	Date of Birth MM DD YYYYY Evening Phone Daytime Phone  E-mail				
Address	☐ Not married ☐ Married ▷ Your s	spouse may need to sign	n this form. Ask you	r employer or Fidelity.	
If the address we have for you is correct,	Address				
skip to Section 2.	City	State/Province	Zip/Postal Code	Country	
2. Plan Invo	ved				
To get your plan number, go to fidelity.com/atwork or call the employer sponsoring your plan.	Plan Number Name of Employer Spo	onsoring Plan			

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Check any that apply	☐ This year AND future years ▷ Complete "Recurring Payments" below.
and provide any required information.	This year This year ONLY Distribution will be paid immediately upon approval of your request.
oquilou illiorilluuloili	Deferred MRD from last calendar year Applies ONLY if you have deferred your FIRST required MRD. Distribution will be paid immediately upon approval of your request.
	☐ Missed MRD from more than one year ago:
	Do NOT combine with deferred MRD from last calendar year. Applies ONLY if you have not taken the MRD(s) for an earlier year(s). Distribution will be paid immediately upon approval of your request.
	Missed Year YYYY Missed Year YYYY Missed Year YYYY
Recurring Paymen	ts
this section. Example month (29th - 31st), c	u checked the second option above. We may sometimes make payments earlier or later than the date(s) you request in s include payments that are scheduled for a day when the stock market is closed or for a day that doesn't exist in every or payments scheduled close to the beginning or end of the year. Be sure that your date of first payment is at least 10 ate when you mail this application.
	Once a year Once a month
Chack and now	
Check one pay- ment frequency and provide date.	Every 3 months Twice a month plan assets are depleted or you tell us to stop them.
ment frequency and provide date.	pian assets are depieted or you tell us
ment frequency and provide date.  4. MRD Calc	Every 3 months  Twice a month to stop them.
ment frequency and provide date.  4. MRD Calc For more information Check ONLY one	Every 3 months  Twice a month to stop them.
ment frequency and provide date.  4. MRD Calc For more information	Every 3 months Twice a month to stop them.  Culation Method  on IRS life-expectancy tables, go to www.irs.gov/pub/irs-pdf/p590.pdf.
ment frequency and provide date.  4. MRD Calc  For more information  Check ONLY one calculation option and provide any	Every 3 months ☐ Twice a month to stop them.  Culation Method  on IRS life-expectancy tables, go to www.irs.gov/pub/irs-pdf/p590.pdf.  Fidelity-Calculated Options ☐ Use the Uniform Lifetime Table Appropriate for most plan participants. ▷ Default if no choice indicated. ☐ Use the Joint Life and Last Survivor Expectancy Table:
ment frequency and provide date.  4. MRD Calc  For more information  Check ONLY one calculation option and provide any	Every 3 months  Twice a month to stop them.  Culation Method  on IRS life-expectancy tables, go to www.irs.gov/pub/irs-pdf/p590.pdf.  Fidelity-Calculated Options  Use the Uniform Lifetime Table Appropriate for most plan participants. Default if no choice indicated.
ment frequency and provide date.  4. MRD Calc  For more information  Check ONLY one calculation option and provide any	Every 3 months  Twice a month to stop them.  Culation Method  on IRS life-expectancy tables, go to www.irs.gov/pub/irs-pdf/p590.pdf.  Fidelity-Calculated Options  Use the Uniform Lifetime Table Appropriate for most plan participants. Default if no choice indicated.  Use the Joint Life and Last Survivor Expectancy Table: Your spouse MUST be your sole beneficiary and be MORE than ten years younger than you.
ment frequency and provide date.  4. MRD Calc  For more information  Check ONLY one calculation option and provide any	Every 3 months  Twice a month to stop them.  Culation Method  on IRS life-expectancy tables, go to www.irs.gov/pub/irs-pdf/p590.pdf.  Fidelity-Calculated Options  Use the Uniform Lifetime Table Appropriate for most plan participants. Default if no choice indicated.  Use the Joint Life and Last Survivor Expectancy Table: Your spouse MUST be your sole beneficiary and be MORE than ten years younger than you.  Spouse's Date of Birth MMDDYYYY This calculation method results in lower payments than using the Uniform Life Table.
ment frequency and provide date.  4. MRD Calc  For more information  Check ONLY one calculation option and provide any required information.  ONLY for 403(b) plan participants who are under 75. Check	Every 3 months  □ Twice a month
ment frequency and provide date.  4. MRD Calc  For more information  Check ONLY one calculation option and provide any required information.  ONLY for 403(b)	Every 3 months  □ Twice a month
ment frequency and provide date.  4. MRD Calc  For more information  Check ONLY one calculation option and provide any required information.  ONLY for 403(b) plan participants who are under 75. Check	Every 3 months  □ Twice a month
ment frequency and provide date.  4. MRD Calc  For more information  Check ONLY one calculation option and provide any required information.  ONLY for 403(b)  olan participants who are under 75. Check only one.	Every 3 months  □ Twice a month
ment frequency and provide date.  4. MRD Calc  For more information  Check ONLY one calculation option and provide any required information.  ONLY for 403(b)  ONLY for 403(b)  olan participants who are under 75. Check only one.  Available for all 403(b) plan participants. To learn	Every 3 months  □ Twice a month
ment frequency and provide date.  4. MRD Calc  For more information  Check ONLY one calculation option and provide any required information.  ONLY for 403(b)  Johan participants who are under 75. Check only one.  Available for all 403(b) plan par-	Every 3 months

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## 5. Tax Withholding

If you are a U.S. person but do NOT make a federal tax selection below, the IRS requires us to withhold federal taxes — we will withhold at the rate for a married person with 3 dependents. For non-resident aliens, the minimum federal mandatory withholding rate of 30% will apply, unless the prevailing tax treaty rate applies because you have a valid IRS Form W-8BEN on file with Fidelity. Each state sets its own withholding rates and requirements on taxable distributions. We apply these rates unless you, or state law, direct otherwise.

For residents of CT, NY, NM, and NJ, you must provide a dollar amount for state withholding if you would like it withheld (\$10 minimum), otherwise no amount will be withheld.

Note that the amount of tax withheld will be calculated on, and subtracted from, the amount of your distribution. Amounts withheld may be less or more than what you actually owe in taxes. Taxes will not be withheld if the distribution amount is less than the federal or state tax withholding threshold for your marital status and number of exemptions. For recurring payments, the withholding instructions you provide here will remain in effect for this account until you give us new instructions.

Account address	Federal Withholding	State Withholding
on file at Fidelity determines which state's tax rules apply.	<ul> <li>Withhold federal taxes based on marital status and number of exemptions. Note that if there is federal withholding, certain states require that there also be state withholding.</li> <li>□ Add an additional dollar amount of:</li> <li>■ Amount (\$10 minimum)</li> <li>\$ This dollar amount will be withheld in addition to any amount calculated based on your marital status and number of exemptions.</li> <li>□ Do NOT withhold federal taxes</li> </ul>	□ Withhold state taxes at the applicable rate     □ In addition to the applicable rate, withhold a dollar amount of:     ○ Withhold (\$10 minimum)     \$     □ Residents of CT, NY, NM and NJ ONLY. Withhold state taxes in the amount of:     ○ Withhold (\$10 minimum)
		\$
	Marital Status for Filing	☐ Do NOT withhold state taxes unless required by lav
	☐ Married filing jointly	
	☐ Married filing as individual	
	Single	
	Number of Exemptions	
	Exemptions  Provide number (typically you plus the number of your dependants, but can be any number).	
	<b>Nethod</b> ivery method and provide any required information. The methor. Transaction timings start from when your distribution reques	
If your request	Electronic Funds Transfer (EFT)	
is received after December 1 (or	At least one owner's name must be exactly the same on both	
March 1 if deadline	EFT is already set up on account Allow 3 business days. Ski	ip to Section 7.
is April 1) your pay- ment, or first yearly	Set up EFT to bank or credit union account: Allow 13-16 business days (includes verification, set-up, and trans	saction processing).
payment, may be sent by regular mail.	☐ Checking ▷ Provide account information or attach voided ch	
	Bank Routing Number Nine digit number starting with 0, 1, 2, 3, or 4.	Bank Name
Ask your bank for the routing number.	•	
	Bank Account Number	Bank Account Owner(s) Name(s)
For one-time payments ONLY; not available for PO Box or foreign address.	Check  ☐ Check sent to mailing address ▷ Default if no choice indica ☐ Check sent by UPS delivery A fee of \$25 will be deducted from  Deposit Allow 3 business days. ☐ Deposit into Fidelity non-retirement account:  Fidelity Non-Retirement Account Number	
		Form continues on next page.

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### 7. Spouse's Consent If not married, or if plan does not require spouse's consent, skip to Section 8.

If your spouse's signature is required, then it must either be notarized OR, if allowed by your plan, be witnessed by a plan representative. A signature guarantee is NOT a notary seal.

By signing below, you, the spouse:

- Voluntarily consent to the distribution(s) indicated on this form, knowing that your spouse's request is not valid without your consent.
- Acknowledge that you may be giving up your right to receive assets that would otherwise go to you upon your spouse's death.
- Acknowledge that your spouse's waiver of a qualified joint and survivor annuity, if applicable, is not valid without your consent.
- Agree that if the distribution described in this form is not processed within 180 days of the date you sign this form, your consent expires.
- Acknowledge that you cannot take back your consent unless your spouse allows you to, and files a new form with Fidelity.

Print Spouse Name	
Spouse Signature	Date MM DD YYYY
SIGN	•

#### **Notarization or Plan Representative Witness**

(Notary only.) State of	, in the County of	, subsc	ribed and sworn to before me by
the above-named individual who is per-	sonally known to me or who has produced		as identification, that the
foregoing statements were true and acc	curate and made of his/her own free act and deed on	/ /	

Print Notary/Plan Representative Name	
Notary/Plan Representative Signature	Date MM DD YYYY
SIGN	

➤ NOTARY SEAL/STAMP ➤

(Notary only.) My commission ends on \_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_

## 8. Signature and Date Account owner/participant must sign and date.

By signing below, you:

- $\bullet$  Authorize Fidelity to act on all instructions given on this form.
- Accept all terms and conditions described in this form.
- Certify that all information you provided is correct to the best of your knowledge.
- Acknowledge that you have received, if applicable, the Forms of Benefit Notice and the Notice of the Waiver of the Qualified Joint and Survivor Annuity.

Print Participant Name	
Participant Signature	Date MM DD YYYY
SIGN	

Form continues on next page.

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# **9. Plan Sponsor Approval** Plan representative to complete, if required by your plan.

Participant's Date of Hire	MM DD YYYY	Separation Date If app	licable MM DD YYYY	Employer-Source Vesting	
					%

By signing below, you:

- Acknowledge that the distribution as requested on this form is permitted by the employer's plan.
- Certify that you are on record with Fidelity as being authorized to sign on behalf of the plan sponsor.

Print Plan Representative Name	
Plan Representative Signature	Date MM DD YYYY
SIGN	•

Did you print and sign the form, and attach any necessary documents? Did ALL required individuals sign? Send the ENTIRE form and any necessary documents to Fidelity.

**Questions?** Go to fidelity.com/atwork or call 1-800-343-0860 (TTY, 1-800-259-9743), business days (except NYSE holidays) from 8 AM to midnight (ET).

Unless otherwise directed, deliver to:

Regular mail Fidelity Investments PO Box 770002 Cincinnati, OH 45277-0090

Fax 1-877-330-2476

Overnight mail

Fidelity Investments 100 Crosby Parkway KC1E Covington, KY 41015

On this form, "Fidelity" means Fidelity Investments Institutional Operations Company, Inc. 591742.3.0 (11/2012)

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