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# **Distribution** – Recurring Payments

Use this form to set up automatic, recurring distributions from your 401(a), 401(k), 403(b) or 457(b) governmental employer plan. Fill in by hand using CAPITAL letters and black ink, or on screen (if PDF). If you need more room for information, use a copy of the relevant page.

# Helpful To Know

- · You can only take a distribution if you meet one of the criteria for eligibility (see Section 3).
- · Workplace retirement plan distributions may have tax consequences. You may want to consult a tax or financial professional.
- · Recurring payments that continue for 10 years or longer are not eligible for roll over to an IRA or to other retirement plans.
- · To set up recurring distributions for more than one retirement plan, use a separate form for each plan.
- To get your plan number(s), call your plan sponsor (the employer that provides the plan) or go to mysavingsatwork.com.

- To validate your profile, go to netbenefits.com/profile. To change your address, call your plan sponsor or go to netbenefits.com/profile.
- For most other types of distributions (such as hardship or rollover) 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.
- Before you submit this form, be sure to find out whether your plan requires plan sponsor approval of distribution requests. If your plan does, and there is no plan sponsor signature in Section 10, your request will be denied.

	Owner/Participant			Casial Casurity or Tayrayar ID Number		
	Name		Social Security or Taxpayer ID Number			
	Date of Birth MM YYYY	Evening Phone		Daytime Phone		
	E-mail					
Address	☐ Not married ☐ Married	Your spouse may need	to sign this form. A	Ask your plan spo	onsor or Fidelity.	
If the address we have	e for you is correct, skip to Section	2.				
Providing a new	Address					
address may delay your check unless you get						
a signature guarantee	City	State/Province	Zip/Postal Code	Country		
(see Section 9).						
2. Plan Invo	lved					
T	Name of Plan Sponsor				Plan Number	
To get your plan number, go to	Thanks of Than Sponson				i idii i tainibei	
savingsatwork.com or						
call your plan sponsor.						
3. Reason for	or Distribution					
De audies de les factores de	landari da la					
Required by federal to	ix law and your plan.					
Check ONLY one.	Former Employees					
Contact your plan	Separation from service You no longer work for the plan sponsor.					
sponsor to confirm which reasons your	Current Employees					
plan accepts and	Qualified by age Age requirement varies by plan type.					
whether you qualify.	Other Must be specified in your	,				

Form continues on next page.



i ayını <del>c</del> ını	Calculation Method		
Choose one method, and provide any required information.	Fixed Amount  Select a dollar amount that will be used for each future scheduled withdrawal (Ex. \$500)  Payment Amount  Fixed Percentage  Select an annualized percent to withdraw each period elected (Ex. 3.5%, 4.0%, 4.7%)  Percent	Fixed Timeframe  Select a number of paymer balance over time (Ex. 30)  Payments  Based on life expectancy  Withdraw amounts based Expectancy Table and yo	nts that will payout your entire account annual/120 quarterly/360 monthly) on the IRS Joint Life and Last Survivor ur age (Your age at the time of e withdrawal factor applied)
5. Frequence	cy of Payments		
Check only one. Some ans may not allow all otions. Contact Fidelity confirm which options are available to you.	☐ Once a year ☐ Once a month ☐ Date ☐ Every 3 months ☐ Twice a month	of FIRST Payment MM DD YYYY	Payments will continue until available plan assets are depleted or you tell us in writing to stop them.
6. Tax With	holding		
or rax with			
download, comp found here: http If you fail to pro- be withheld on a Eligible rollow Ineligible rollow Ineligible rollow Ineligible rollow US Citizens and of federal tax w non-resident ali upload the Form Non-Resident Ali withholding rate residence indicate can be found at v Excess Deferra If you are a U.S. for payments the Each state sets in otherwise.	ange to your federal withholding from a periodic polete, print, and sign a copy of the IRS Form .W-4P Ws://www.irs.gov/forms-pubs/about-form-w-4-p. vide a valid federal withholding election form, or the an eligible rollover distribution the following defauver distributions: 20% over nonperiodic distributions: 10% over periodic distributions: Based on your tax statu Resident Aliens If you have an address outside of the ithholding. You must provide IRS Form W-9 prior to en for tax purposes. The form can be found at www m W-9 with your Return of Excess Deferrals Form Liliens If you are not a U.S. citizen or resident alien (the of 30% will apply unless you provide IRS Form W-ated on the form. Failure to provide the proper form www.irs.gov or https://www.irs.gov/forms-pubs/ab	Withholding Certificate for Period e form is not completed, or you all federal withholding will apples to be 50 United States or the District or receiving a distribution from wirs.gov or https://www.irs.gov  hat is, you are a non-resident a -8BEN and the prevailing tax true can result in unexpected tax yout-form-w-8-ben. Please uple reted within 10 years, we will within the plan or IRA, unless you indicate the distributions. We apply these tracted from, the amount of you	dic Pension or Annuity Payments.  I make a request for less than 20% to ly:  ct of Columbia, you cannot elect out in the plan to avoid being treated as a forms-pubs/about-form-w-9. Please lien), the minimum federal mandatory reaty rate applies to the country of a withholding and reporting. The form oad the proper form with your Return of the hold federal taxes at the rate of 20% ate a higher withholding rate below. e rates unless you, or state law, direct ur distribution. Amounts withheld may
State Withh	•	Marital stat	
	state taxes at the applicable rate	☐ Single	☐ Married
	dition to the applicable rate, withhold a dollar amo	Exemptions	exemptions  Provide number (typically you plus the number of your dependants, but can be any number).
Withhold (S	ts of NY, NM, NJ, ND, PA, IN and OH ONLY. d state taxes in the amount of: \$10 minimum) withhold state taxes unless required by law		

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Form continues on next page

Choose ONLY one delivery method and	Electronic Funds Transfer (EFT)			
provide any required information.	☐ EFT is already set up on account Allow 3 business days. Skip to Section 8.  To confirm or add new EFT information to your retirement plan account, login to NetBenefits			
ansaction timings start	Check			
om when your distribu- on request is approved, and are estimates, not guarantees.	☐ Check sent to mailing address ▷ Default if no choice indicated. Allow 7 business days.			
	Deposit Allow 3 business days.			
not guarantees.	Deposit into Fidelity non-retirement account:			
	Account Number			
8. Spouse's	S Consent Complete if you are married and if required by your plan			
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•	<b>Consent</b> Complete if you are married and if required by your plan.  ure MUST either be notarized or be witnessed by a plan representative. A signature guarantee is NOT a notary seal.			
The spouse's signate By signing below, y	ure MUST either be notarized or be witnessed by a plan representative. A signature guarantee is NOT a notary seal.			
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(Notary only.) State of	_ , in the County of	, subscribed and sworn to I	pefore me by
the above-named individual who is persona	ally known to me or who has pr	oducedas identificat	ion, that the
foregoing statements were true and accurat	e and made of his/her own fre	e act and deed, on/	

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

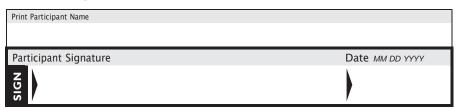
(Notary only.) My commission ends on  $\_\_/\_\_/\_$ .

Form continues on next page. >>

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

By signing below, you:

- · 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 the Special Tax Notice and, if applicable, the Forms of Benefit Notice and the Notice of the Waiver of the Qualified Joint and Survivor Annuity.



If the retirement plan requires a signature from the plan sponsor in Section 10, you do not need a signature guarantee. If the retirement plan does NOT require a plan sponsor signature, you will need a signature guarantee if either of two cases applies:

- · Your distribution is more than \$10,000, it is not being sent using EFT already set up on your account, you are providing a new address, AND it's important that your transaction not be delayed by 10 days.
- · Your distribution is more than \$100,000.

### **Signature Guarantee**

You can get a signature guarantee from most banks, credit unions, and other financial institutions. A Medallion signature guarantee must guarantee at least the amount of your loan. A notary seal/stamp is NOT a signature guarantee.

SIGNATURE GUARANTEE

NOT a Medallion signature guarantee Complete if applicable.

Financial Institution Representative Name

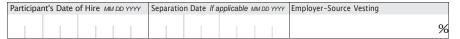
Phone

Extension

Important: You can provide notarization in lieu of a signature guarantee using this same section

10. Plan Sponsor Approval

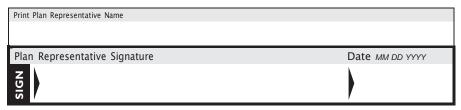
Consult your plan sponsor or Fidelity to determine whether plan sponsor approval is required. You may need plan sponsor approval even if you no longer work for the sponsor.



By signing below, you:

of the form.

- · 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.



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, or for the hearing impaired dial 711, business days (except NYSE holidays) from 8 AM to midnight (ET).

Return this completed form:

## Digitally using the NetBenefit ® Mobile App

Download the NetBenefit <sup>°</sup> app through the App Store<sup>°</sup> or Google Play™ store. **Tap: Actions > Send a Document**Or use one of these alternate methods:

Regular Mail Fidelity Investments PO Box 770002 Cincinnati, OH 45277-0090 Overnight Mail Fidelity Investments 100 Crosby Parkway, KC1E Covington, KY 41015

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On this form, "Fidelity" means Fidelity Investments Institutional Operations Company LLC. 584380.13.0