

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.

1. Account Owner/Participant

Name		Social Security or Taxpayer ID Number	
Date of Birth MM DD YYYY		Evening Phone	Daytime Phone
E-mail			

☐ Not married ☐ Married ▷ Your spouse may need to sign this form. Ask your employer or Fidelity.

Address

If the address we have for you is correct, skip to Section 2.

Address			
City	State/Province	Zip/Postal Code	Country

2. Plan Involved

To get your plan number, go to fidelity.com/atwork or call the employer sponsoring your plan.

Plan Number	Name of Employer Sponsoring Plan
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Form continues on next page. ►►

3. Year(s) for Which You are Requesting an MRD

Check any that apply and provide any required information.

- ☐ This year AND future years ▷ Complete "Recurring Payments" below.
- ☐ This year This year ONLY Distribution will be paid immediately upon approval of your request.
- ☐ 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 Payments

Complete ONLY if you checked the first option above. We may sometimes make payments earlier or later than the date(s) you request in this section. Examples include payments that are scheduled for a day when the stock market is closed or for a day that doesn't exist in every month (29th - 31st), or payments scheduled close to the beginning or end of the year. Be sure that your date of first payment is at least 10 days later than the date when you mail this application.

Check one payment frequency and provide date.

- ☐ Once a year ☐ Once a month
- ☐ Every 3 months ☐ Twice a month

Date of FIRST Payment	MM	DD	YYYY

Payments will continue until available plan assets are depleted or you tell us to stop them.

4. MRD Calculation Method

For more information on IRS life-expectancy tables, go to www.irs.gov/pub/irs-pdf/p590.pdf.

Check ONLY one calculation option and provide any required information.

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	MM	DD	YYYY

This calculation method results in lower payments than using the Uniform Life Table.

ONLY for 403(b) plan participants who are under 75. Check only one. ▶ **Calculation Adjustments for 403(b) Plan Pre-1987 Balances**

You may exclude plan assets accumulated as of December 31, 1986 from your MRD calculation, provided that they were accounted for separately by Fidelity.

- ☐ Include ALL available plan assets when calculating MRD
▷ Default if no choice indicated and if no previous exclusion is on file at Fidelity for your plan.
- ☐ Exclude adjusted December 31, 1986 plan balance on record at Fidelity when calculating MRD
Available ONLY for a ONE-TIME distribution that is a portion of your total MRD.

Available for all 403(b) plan participants. To learn more, call Fidelity. ▶

Self-Calculated Option

- ☐ Use the following amount:

Amount
\$

Form continues on next page. ▶▶

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, NJ, ND, PA** and **RI**, 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
on file at Fidelity
determines which
state's tax rules apply.

Federal Withholding

- ☐ 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.*

- ☐ Add an additional dollar amount of:

Amount (\$10 minimum)
\$

This dollar amount will be withheld in addition to any amount calculated based on your marital status and number of exemptions.

- ☐ Do NOT withhold federal taxes

Marital Status for Filing

- ☐ 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).

State Withholding

- ☐ 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, NJ, ND, PA** and **RI** ONLY. Withhold state taxes in the amount of:

Withhold (\$10 minimum)
\$

- ☐ Do NOT withhold state taxes unless required by law

6. Delivery Method

Choose ONLY one delivery method and provide any required information. The method you choose will be used for any payment(s) requested on this form. Transaction timings start from when your distribution request is approved, and are estimates, not guarantees.

If your request
is received after
December 1 (or
March 1 if deadline
is April 1) your pay-
ment, or first yearly
payment, may be sent
by regular mail.

Electronic Funds Transfer (EFT)

At least one owner's name must be exactly the same on both accounts.

- ☐ EFT is already set up on account. *Allow 3 business days. Skip to Section 7.*

- ☐ Set up EFT to bank or credit union account:

Allow 13-16 business days (includes verification, set-up, and transaction processing).

- ☐ Checking ▷ *Provide account information or attach voided check.* ☐ Savings ▷ *Attach deposit slip.*

Bank Routing Number <i>Nine digit number starting with 0, 1, 2, 3, or 4.</i>	Bank Name
Bank Account Number	Bank Account Owner(s) Name(s)

Ask your bank for the
routing number.

Check

- ☐ Check sent to mailing address ▷ *Default if no choice indicated. Allow 7 business days.*

- ☐ Check sent by UPS delivery. *A fee of \$25 will be deducted from your account. Allow 2 business days.*

Deposit *Allow 3 business days.*

- ☐ Deposit into Fidelity non-retirement account:

Fidelity Non-Retirement Account Number

For one-time pay-
ments ONLY; not
available for PO Box
or foreign address.

Form continues on next page. ►►

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 _____, subscribed and sworn to before me by the above-named individual who is personally known to me or who has produced _____ as identification, that the foregoing statements were true and accurate 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:

- 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. ▶▶

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

Participant's Date of Hire <i>MM DD YYYY</i>	Separation Date <i>If applicable MM DD YYYY</i>	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 <i>MM DD YYYY</i>
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