

For assistance, please contact us at 800-243-1574 or visit our website at Virtus.com

This form is not intended for required minimum distributions, trustee to trustee transfers, recharacterizations, or conversion requests.

1. Account Information

Shareholder Name	Date of Birth	U.S. Social Security Number
Address	Daytime Phone Number	Email Address
City, State, ZIP Code	Account Number	

2. Type of Account

- Traditional/Rollover IRA
 SEP IRA
 Roth IRA – (Proceed to Section 3 – B or C)

Note: For trustee to trustee transfers, please complete the appropriate receiving custodian's trustee to trustee transfer form. This form is not intended to facilitate a beneficiary/inherited IRA transfer due to death. For revocations, refer to the Traditional and Roth Individual Retirement Account (IRA) Combined Disclosure Statement for instructions and information regarding your revocation rights. All required documentation must be received in good order before the distribution request can be honored. All legal documents must be certified and a Medallion Signature Guarantee may be required. Please see the Participant Authorization Section for an explanation of the Medallion Signature Guarantee.

3. Reason for Distribution

A. From a Traditional, Rollover or SEP IRA

This distribution is being made for the following reason (check one):

- 1. Normal Distribution - You are age 59 ½ or older.
- 2. Early (Premature) Distribution - You are under age 59 ½, including distributions due to medical expenses, health insurance premiums, higher education expenses, first time home buyer expenses, or other reasons.
- 3. Substantially equal periodic payments within the meaning of section 72(t) of the Internal Revenue Code.
- 4. Permanent disability - You certify that you are disabled within the meaning of section 72(m)(7) of the Internal Revenue Code.*
- 5. Removal of excess - You must complete **Section 4 (Excess Contribution Election)** in its entirety.
- 6. Direct rollover to a Qualified Plan, 401(k), TSP or 403(b) - You are certifying that the receiving custodian will accept the IRA assets issued.
- 7. Qualified Reservist Distribution
- 8. Transfer incident due to divorce or legal separation – Contact Shareholder Services regarding additional document requirements.
- 9. Qualified Hurricane Distribution

B. Qualified Distribution from a Roth IRA

This Roth IRA distribution satisfies the 5-year holding period requirement: **Yes (If "No", proceed to Section C)**

This distribution is being made for the following reason (check one):

- 1. Normal distribution - You are age 59 ½ or older.
- 2. Permanent disability - You certify that you are disabled within the meaning of section 72(m)(7) of the Internal Revenue Code.*

Note: Distributions not meeting the 5-year required period and for all other reasons not listed above are considered non-qualified.

C. Non-Qualified Distribution from a Roth IRA

This distribution is being made for the following reason (check one):

- 1. Normal Distribution (prior to the 5-year holding requirement) - You are age 59 ½ or older.
- 2. Early (Premature) Distribution - You are under age 59 ½, including distributions due to medical expenses, health insurance premiums, higher education expenses, first time home buyer expenses, or other reasons.
- 3. Substantially equal periodic payments within the meaning of section 72(t) of the Internal Revenue Code.
- 4. Permanent disability - You certify that you are disabled within the meaning of section 72(m)(7) of the Internal Revenue Code.*
- 5. Removal of excess - You must complete **Section 4 (Excess Contribution Election)** in its entirety.
- 6. Qualified Reservist Distribution
- 7. Transfer incident due to divorce or legal separation– Contact Shareholder Services regarding additional document requirements.
- 8. Qualified Hurricane Distribution

*For purposes of section 72(m)(7), an individual shall be considered to be disabled if he is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or to be of long-continued and indefinite duration.

4. Excess Contribution Election

Amount of excess: \$ _____ Tax year for which the excess was made: _____ Date Deposited: _____

Earnings will be removed with the excess contribution if corrected before your federal income tax-return due date (including extensions), pursuant to Internal Revenue Code Section 408(d)(4) and Internal Revenue Service ("IRS") Publication 590. You may be subject to an IRS penalty of 6% for each year the excess remains in the account. In addition, the IRS may impose a 10% early distribution penalty on the earnings, if you are under age 59½. You will receive IRS Form 1099-R for the year in which the excess distribution takes place (not for the year in which the excess contribution was made). Consult IRS Publication 590 for more information pertaining to excess contributions. If you are subject to a federal penalty tax due to an excess contribution, you must file IRS Form 5329.

For the purpose of the excess contribution, we will calculate the net income attributable ("NIA") to the contribution using the method provided in the IRS Final Regulations for Earnings Calculation for Returned or Recharacterized Contributions. This method calculates the NIA based on the actual earnings and losses of the IRA during the time it held the excess contribution. Please note that a negative NIA is permitted and, if applicable, will be deducted from the amount of the excess contribution.

A. The excess is being corrected **before** your federal income tax-filing deadline (including extensions):

- Remove excess plus/minus net income attributable. Distribute according to my instructions in **Section 6 (Distribution Instructions)**.
- Remove excess plus/minus net income attributable. Re-deposit as a **current year** contribution (not to exceed annual IRA contribution limit).

B. The excess is being corrected **after** your federal income tax-filing deadline (including extensions). Earnings on the excess contribution will remain in the account.

- Remove excess and distribute according to my instructions in **Section 6 (Distribution Instructions)**.
- Remove excess and re-deposit as a **current year** contribution (not to exceed annual IRA contribution limit).

C. Redesignating an excess contribution to a later tax year. Please consult a tax advisor to review your specific situation and to determine your best course of action. If you should decide to carry over the excess contribution to a later year, DO NOT RETURN THIS FORM.

5. Distribution Amount – Complete Sections A & B

A. Choose one:

- Liquidate entire account.
- One-Time Partial Distribution of \$ _____
- Periodic Distributions of \$ _____ to be distributed at the following frequency:
 Monthly Quarterly Semi-Annually Annually Beginning _____ (month/year)
I elect to take periodic distributions on the _____ day of the month. If no selection is made, withdrawals will run on or about the 15th of the month.
- *Substantially Equally Periodic Payments (Section 72(t) of the Internal Revenue Code) – In the amount of \$ _____ or
Calculate under the RMD method using Uniform Lifetime Table Single Life Table Joint and Last Survivor Table*
*Beneficiary's Name: _____ Date of Birth: _____

Frequency of distributions:

- Monthly Quarterly Semi-Annually Annually Beginning _____ (month/year)

I elect to take periodic distributions on the _____ day of the month. If no selection is made, withdrawals will run on or about the 15th of the month.

B. Choose one:

- Distribute proportionally across all funds, (or)
- Distribute as indicated below:

Fund: _____	Amount: \$ _____	or Percentage: _____%
Fund: _____	Amount: \$ _____	or Percentage: _____%
Fund: _____	Amount: \$ _____	or Percentage: _____%
Fund: _____	Amount: \$ _____	or Percentage: _____%
Fund: _____	Amount: \$ _____	or Percentage: _____%
Total Amount \$ _____		Total 100%

RESTRICTION ON INDIRECT (60-DAY) ROLLOVERS

An IRA participant is allowed only one rollover from one IRA to another (or the same IRA) across all IRAs (Traditional, Rollover, Roth, SEP, SARSEP and SIMPLE) in aggregate that a taxpayer owns in any 12-month or 365-day period. As an alternative, a participant can make an unlimited number of trustee-to-trustee transfers where the proceeds are delivered directly to the receiving financial institution, successor custodian or trustee. You must contact the receiving institution to initiate a trustee-to-trustee transfer. For more information please visit the Internal Revenue Service's web site www.irs.gov using the search term "IRA One-Rollover-Per-Year Rule".

6. Distribution Instructions

Based on your selected delivery method, a signature guarantee stamp may be required. Please refer to your prospectus, the Signature Guarantee section of this form or call us at the number listed on this form for specific requirements.

If a payment method is not selected, or you selected a method that requires a signature guarantee and you did not obtain the stamp, your payment will be issued as a check payable to you and mailed to your address of record. Your delivery method will remain in effect until we receive notice from you requesting a change.

A. Distribution by Mail – Checks are generally mailed within two business days.

- Name and address on the account, **or**
- Special Payee below (*Signature Guarantee required*)
 - Mail for Deposit* - Check will be made payable to the registered IRA account owner and mailed to the following address.
 - Qualified Plan, 401(k), TSP or 403(b) Direct Rollover Deposit* – Check will be made payable to the receiving custodian and mailed to the following address. Please be sure to include the applicable account number.

Special Payee Name / Receiving Custodian

Special Payee Address

B. Direct-to-Bank Distributions (*Signature Guarantee required*)

- One-Time Distribution* - May be sent to your bank electronically using one of two methods. ACH will be considered the default method if an election is not made. Choose one:
 - Federal Fund Wire* – Initiates the next business day. This option is *NOT* intended for trustee to trustee transfers. Please check with the receiving custodian for alternative payment instructions. Your bank may charge a fee for this service.
 - Automated Clearing House (ACH)* – Initiates within one to three business days.
- Periodic Distributions* – *Periodic distributions* will be sent through the Automated Clearing House (ACH) - **IMPORTANT:** *The form must be submitted at least 10 business days prior to the first transaction for the banking information to be properly verified. If the banking information has not been verified prior to the draft, a check will be issued for that payment.*

Please complete the following section and include a preprinted VOID check to have your withdrawals electronically transmitted to your checking account (no starter checks) or a letter from the bank, on bank letterhead confirming the banking information, to have the withdrawals electronically transmitted to your savings account.

If you wish to have the banking information added to your account for future transactions, please check the following box:

Bank Name

Bank Routing Number

Account Type (Checking or Savings)

Bank Account Holder's Name(s)

Bank Account Number

Bank Telephone Number

ATTACH VOIDED CHECK HERE

C. Purchase into Non-Retirement Account (*Signature Guarantee required if the receiving account is not solely in the name of the shareholder*)

- Purchase into my existing non-retirement account. Account Number: _____
Invest proportionally across all fund(s) (or) Invest in (Fund Name): _____
- Purchase into new non-retirement account – Attach a completed New Account Application with investment instructions.

7. Taxes

Federal Tax Withholding Election

Federal income tax will be withheld at the rate of 10% from any distribution, subject to the IRS withholding rules, unless you elect or have previously elected out of withholding. Tax will be withheld on the gross amount of the payment even though you may be receiving amounts that are not subject to withholding because they are excluded from gross income. This withholding procedure may result in excess withholding on the payments. If you elect to have no federal taxes withheld from your distribution, or if you do not have enough federal income tax withheld from your distribution, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient. If you are completing this form, your below election will remain in effect until such time as you make a different election in writing to the Custodian.

- Do **NOT** withhold federal income tax. (This option is only available for accounts registered with an address in the United States.)
- Withhold 10% federal income tax.
- Withhold _____% federal income tax (must be more than 10%)

State Income Tax Withholding Election

Your state of residence will determine your state income tax withholding requirements, if any. Those states with mandatory withholding will require state income tax to be withheld from payments if federal taxes are withheld. Voluntary states let individuals determine whether they want state taxes withheld. Some states have no income tax on retirement payments. You may wish to consult with a tax advisor or your state's tax authority for additional information on your state requirements.

- I elect **NOT** to have state income tax withheld from my retirement account distributions (only for residents of states that do not require mandatory state withholding).
- I elect **TO** have the following dollar amount or percentage from my retirement account distribution withheld for state income taxes (for residents of states that allow voluntary state withholding) \$ _____ or _____%

8. Authorizing Signature

No information provided by the Virtus Mutual Funds shall be considered to be or is advice on which I may rely as the primary basis for my investment decisions. I agree that I need to make my own decisions, with whatever third-party advice I wish to obtain, and I agree that I am not to rely on any information Virtus Mutual Funds is providing as advice that is a primary basis for my decisions. I expressly confirm, and by signing below, I acknowledge, that none of Virtus Mutual Funds, their distributor, their transfer agent, and their affiliates, has made or is making a recommendation, or has provided or is providing investment advice of any kind whatsoever (whether impartial or otherwise), or is giving any advice in a fiduciary capacity with any decision I may make to invest or otherwise proceed with Virtus Mutual Funds.

I certify that I am the Participant authorized to make these elections and that all information provided is true and accurate. I further certify that the Custodian, the Virtus Mutual Funds, or any employee, officer, director/trustee or agent of either of them has given no tax or legal advice to me, and that all decisions regarding the elections made on this form are my own. The Custodian, Virtus Mutual Funds and the employees, officers, directors/trustees and agents of each may conclusively rely on this certification and authorization without further investigation or inquiry. I expressly assume responsibility for any adverse consequences which may arise from the election(s) and agree that the Custodian, Virtus Mutual Funds and the employees, officers, directors/trustees and agents of each shall be indemnified and held harmless, for any tax, legal or other consequences resulting from my election(s). The Custodian is hereby authorized and directed to distribute funds from my account in the manner requested. I have read and understand and agree to be legally bound by the terms of this form.

Print Name

Signature

Date

9. Signature Guarantee

A **Medallion Guarantee** is required for lump sum distributions that meet the following criteria: Distributions that are being sent to a bank account (not currently maintained on the account), the redemption check is to be made payable to someone other than the shareholder and/or mailed to an address not presently on our records, the distribution exceeds \$50,000.00, the address on the account has been updated within 30 days.

An **SVP (Signature Validation Program) Stamp*** is required for the following circumstances: Withdrawals under a Systematic Withdrawal Plan are to be sent to a bank account, mailed in check form to a special payee or if the funds are to be exchange to an account not solely registered to the shareholder.

A Medallion Guarantee Stamp may be obtained from an eligible guarantor. Eligible guarantors include Commercial Banks, Trust Companies, Savings Associations and Credit Unions, as defined by the Federal Deposit Insurance Act and registered Broker/Dealers.

An SVP (Signature Validation Program) Stamp may be obtained from eligible members of the Medallion Guarantee Program, including banks, Broker/Dealers, credit unions, national securities exchanges, registered securities associations, clearing agencies and savings associations.

**In the event your bank or financial institution does not participate in the SVP Stamp program, we will accept a Medallion Guarantee.*

Notarization from a Notary Public is not acceptable.

Please contact your financial institution in advance to determine their supporting documentation requirements, if any.

Place Stamp Here