

## Virtus Mutual Funds PO Box 534470 Pittsburgh, PA 15253-4470

# Individual Retirement Account Distribution Request Form

## 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	,	,		
Name	U.S. Social Security Number			
All	F 70.11			
Address	Email Address			
City, State, ZIP Code	Fund and Account Number(s)			
	,			
☐ By checking the preceding box, I authorize Virtus Mutual Funds to	Mobile Telephone Number	Evening Telephone Number		
replace any conflicting information and/or add any missing information				
to my account records, with regard to the address, email address and telephone numbers provided in this section.				
		ı		
2. Type of Account				
	h IRA – (Proceed to Section 3 – B	•		
Note: For trustee to trustee transfers, please complete the appropriate r				
intended to facilitate a beneficiary/inherited IRA transfer due to death. F Account (IRA) Combined Disclosure Statement for instructions and infor				
must be received in good order before the distribution request can be he				
Signature Guarantee may be required. Please see the Participant Auth				
Guarantee.				
3. Reason for Distribution				
A. From a Traditional, Rollover or SEP IRA - This distribution  ☐ 1. Normal Distribution-You are age 59 ½ or older.	is being made for the following re	ason (cneck one):		
☐ 1. Normal distribution-rou are age 59 ½ or older. ☐ 2. Early (Premature) Distribution-You are under age 59 ½, i	ncluding distributions due to medic	cal expenses health insurance		
premiums, higher education expenses, first time home but		al expenses, nealth insurance		
☐ 3. Substantially equal periodic payments within the meaning		venue Code. You must		
complete Section 5 (Distribution Amount).				
☐ 4. Permanent disability-You certify that you are disabled wit				
☐ 5. Transfer incident due to divorce or legal separation – Cor				
☐ 6. Removal of excess - You must complete <b>Section 4 (Exc</b>				
☐ 7. Direct rollover to a Qualified Plan, 401(k), TSP or 403(b)-assets issued.	☐ 7. Direct rollover to a Qualified Plan, 401(k), TSP or 403(b)-You are certifying that the receiving custodian will accept the IRA			
□ 8. Qualified Reservist Distribution				
☐ 9. Qualified Hurricane Distribution				
<ul> <li>□ 10. Qualified Birth of Adoption Distribution as defined in section 72(t)(2) of the Internal Revenue Code.</li> </ul>				
B. Qualified Distribution from a Roth IRA - This distribution is being made for the following reason (check one):				
This Roth IRA distribution satisfies the 5-year holding perio	-	o", proceed to Section C)		
☐ 1. Normal distribution-You are age 59 ½ or older.		, proceed to dection o,		
☐ 2. Permanent disability-You certify that you are disabled within the meaning of section 72(m)(7) of the Internal Revenue Code.*				
<b>Note:</b> Distributions not meeting the 5-year required period and f	, ,,			
		·		
C. Non-Qualified Distribution from a Roth IRA - This distribut  ☐ 1. Normal Distribution (prior to the 5-year holding requirement)		g reason (cneck one):		
☐ 2. Early (Premature) Distribution-You are under age 59 ½, i		al expenses health insurance		
premiums, higher education expenses, first time home b		ai expensee, neam mearance		
☐ 3. Substantially equal periodic payments within the meaning		venue Code. You must		
complete Section 5 (Distribution Amount).	,			
☐ 4. Permanent disability-You certify that you are disabled wit				
☐ 5. Transfer incident due to divorce or legal separation— Con				
☐ 6. Removal of excess-You must complete <b>Section 4 (Exce</b>	ss Contribution Election) in its e	ntirety.		
☐ 7. Qualified Reservist Distribution				
	□ 8. Qualified Hurricane Distribution			
<ul> <li>9. Qualified Birth of Adoption Distribution as defined in section 72(t)(2) of the Internal Revenue Code.</li> <li>*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</li> </ul>				
reason of any medically determinable physical or mental impairment where				
indefinite duration.		and the second s		

4. Excess Contribution Election	1		
Amount of excess: \$	Tax year for which the excess w	as 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.			
	come attributable. Distribute accordin	ig to my instructions in Se	
		ion 6 (Distribution Inst	tructions).
C. Redesignating an excess contrib determine your best course of action.			riew your specific situation and to later year, DO NOT RETURN THIS FORM.
5. Distribution Amount			
Choose one:  Liquidate entire account.			
For the following options, distributions	will be taken proportionately acre	ee all funde unloce eno	cific funds and amounts are
indicated in the distribution allocation	instructions below:		inc lulius and amounts are
☐ One-Time Partial Distribution of	\$		
<ul><li>□ Periodic Distributions of \$</li><li>□ Monthly □ Quarterly</li></ul>	☐ Semi-Annually ☐ Annu	. to be distributed at the ally Beginning	e following frequency: (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 15 <sup>th</sup> of the month.			
☐ Substantially Equal Periodic Par	yments ("SEPP" Section 72(t) of the	Internal Revenue Code	e)
<ul> <li>□ Fixed distribution amount of \$or</li> <li>□ If you are requesting BNYM I S Trust recalculate the amount of your SEPP annually using an RMD method leave the line above blank and select one of the following the calculation methods to use:</li> <li>□ Uniform Lifetime Table</li> <li>□ Single Life Table</li> <li>□ Joint and Last Survivor Table*</li> </ul>			
*Beneficiary's Name:		Date of E	3irth:
I acknowledge I have consulted with a qualified tax professional and IRS Publication 590-B; Distributions from Individual Retirement Arrangements (IRAs). I understand I am solely responsible for determining the amount to distribute and for monitoring if a modification of the SEPP under Section 72(t) has occurred. Neither the custodian nor the plan sponsor will monitor the SEPP. I understand the custodian does not report SEPP distributions on IRS Form 1099-R as exempt from the early distribution penalty and that I am expected to file IRS Form 5329 along with my income tax return to the IRS to claim a penalty tax exception for this reason.			
<b>Distribution allocation instructions</b>	<u>:</u>		
Fund:		mount: \$	
Fund:		mount: \$	
Fund:	A	mount: \$	or Percentage:%
Fund:		mount: \$ mount: \$	
Fund:		Amount \$	
I alook to take mani- die dietan oo			
about the 15 <sup>th</sup> of the month.	ons on the day of the	ne month. If no selection	on is made, withdrawals will run on or
An IDA monticinant is allowed and	RESTRICTION ON INDIRECT (60-		As /Traditional Dellever Bett OFF
An IRA participant is allowed only one r SARSEP and SIMPLE) in aggregate the unlimited number of trustee-to-trustee	at a taxpayer owns in any 12-month o	r 365-day period. As an a	alternative, a participant can make an
custodian or trustee. You must con	transfers where the proceeds are deli- tact the receiving institution to initiate a b Individual Retirement Arrangements	a trustee-to-trustee transf	fer. For more information, see IRS

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## 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, you selected a method that requires a signature guarantee and you did not obtain the stamp, or an original voided check is required and we did not receive one, 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.			
receiving custodian and mailed to	3(b) Direct Rollover Deposit (Signature Guarante be the following address. Please be sure to include billover to a qualified plan or 403(b) in Section 3.	e required) – Check will be made payable to the the applicable account number. Only complete this A. Do not use this option for any other payment,		
Type of plan receiving IRA assets	:	employer sponsored qualified plan		
Receiving Custodian	Account Number			
Address				
B. Direct-to-Bank Distributions	Signature Guarantee required)			
☐ One-Time Distribution - May be so an election is not made. Choose		ethods. ACH will be considered the default method if		
the receiving custodian for alt	the next business day. This option is <i>NOT</i> intender ernative payment instructions. Your bank may chance. (CH) – Initiates within one to three business days.	ed for trustee to trustee transfers. Please check with arge a fee for this service.		
be submitted at least 10 business	listributions will be sent through the Automated Cles days prior to the first transaction for the banking i prior to the draft, a check will be issued for that pa			
If you are requesting a one-time partial added to the account for future transact	distribution or periodic distribution, if banking infortions, unless otherwise specified.	mation is provided below, it will automatically be		
your checking account or a letter from t		to have your withdrawals electronically transmitted to g information to have the withdrawals electronically checks will not be accepted.		
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		
shareholder)	nt Account (Signature Guarantee required if the			
Invest proportionally across all f	• •			
☐ Purchase into new non-retireme	ent account – Attach a completed New Accou	unt Application with investment instructions.		

7. Taxes			
Federal Tax Withholding Election Federal income tax will be withheld at the rate of 10% from any distribution, rate of 0% below or have previously elected out of withholding. Tax will be w receiving amounts that are not subject to withholding because they are excess withholding on the payments. If you elect to have no federal taxes income tax withheld from your distribution, you may be responsible for payments if your withholding and estimated tax payments are not sufficient. You time as you make a different election with the Custodian.	ithheld on the gross amount of the payment even though you may be cluded from gross income. This withholding procedure may result in withheld from your distribution, or if you do not have enough federal ent of estimated tax. You may incur penalties under the estimated tax		
☐ I elect federal income tax withholding of 0%. Do not withhold federal income tax from my distributions.* ☐ I elect federal income tax withholding of% must be a whole percent. You may elect any rate from 1% to 100%.*			
See the attached Form W-4R Withholding Certificate for Nonperiodic Padetermining withholding" instructions. You may use these tables and in			
*Generally, you can't elect less than 10% federal income tax withholdi possessions.	ing for payments to be delivered outside the United States and its		
State Income Tax Withholding Election Your state of residence will determine your state income tax withholding require state income tax to be withheld from payments if federal income tax federal tax election. Voluntary states let individuals determine whether the retirement payments. Please consult with a tax advisor or your state's tax a are completing this form, your below election will remain in effect until such the state of t	xes are withheld or may mandate a fixed amount regardless of your ey want state taxes withheld. Some states have no income tax on authority for additional information on your state requirements. If you		
<ul> <li>☐ I elect NOT to have state income tax withheld from my retirement require mandatory state withholding).</li> <li>☐ I elect TO have the following dollar amount or percentage from m (for residents of states that allow voluntary state withholding) \$</li> </ul>	y 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 <b>Medallion Guarantee</b> is required for lump sum distributions that meet the account (not currently maintained on the account), the redemption check is t mailed to an address not presently on our records, the distribution exceeds a days of submitting this request.	to be made payable to someone other than the shareholder and/or \$50,000.00, the address on the account has been updated within 30		
An <b>SVP</b> ( <b>Signature Validation Program</b> ) <b>Stamp*</b> is required for the following are to be sent to a bank account, mailed in check form to a special payee or to the shareholder.	if the funds are to be exchange to an account not solely registered		
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.	Place Stamp Here		
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.			

### Substitute W-4R 2024 - Withholding Certificate for Nonperiodic Payments - For use with IRAs ONLY

Where instructed to provide your withholding election on "line 2" use the space provided on the attached form under "Federal Income Withholding Election."

#### 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 below 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.					

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.

**Purpose of form.** Complete Form W-4R to have payers withhold the correct amount of federal income tax from your nonperiodic payment 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.

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 on line 2. 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-" on line 2. 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-" on line 2. See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

#### **Specific Instructions**

**Line 2 - More withholding.** If you want more than the default rate withheld from your payment, you may enter a higher rate on line 2.

Less withholding (nonperiodic payments only). If permitted, you may enter a lower rate on line 2 (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 on line 2. (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 on line 2. (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 on line 2.

**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" on line 2.

**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 \$1,950 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" on line 2.