

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

**1. Important Information**

If you currently receive Required Minimum Distribution ("RMD") payments and you do not want to make any changes to the amount or payment schedule, or if you have already satisfied your annual RMD, you **DO NOT** need to complete or return this form. **Note:** Failure to withdraw your RMD amount by the applicable deadline could result in a 50% penalty tax. The penalty tax would be assessed on the difference between the amount that you were required to take and the amount that was actually distributed, if any. Before making any decision regarding your RMD, we urge you to consult your tax advisor or tax attorney.

**2. Account Information**

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

**3. Distribution Election**

RMD amounts are calculated on the entire account balance including all of the underlying investments in your IRA and will be distributed proportionately, unless otherwise indicated.

Account Number: \_\_\_\_\_  New RMD Election  Change an existing RMD election

Type of Account:  Traditional IRA  SEP IRA  SIMPLE IRA

Distribute my RMD from:  Across all funds proportionately (rounding may occur), or

Distribute from fund(s): \_\_\_\_\_

**4. Calculation Method**

Your RMD amount is calculated in accordance with Internal Revenue Service ("IRS") regulations. The regulations are explained in IRS Publication 590, Individual Retirement Arrangements (IRAs), which includes the life expectancy tables used to calculate RMD amounts. RMD amounts are calculated on the entire account balance including all of the underlying investments in your IRA.

**Note:** Your RMD will be calculated based on the Uniform Lifetime Table, unless the following exception applies to you and you have indicated so by checking the box below.

My sole primary beneficiary is my spouse who is more than 10 years younger than I am. I elect to calculate my RMD based on the Joint and Last Survivor Expectancy Table. Spouse's Date of Birth \_\_\_\_\_

**5. Type of Distribution**

Single Sum / One-Time Distribution Options

**Calculate RMD Amount.** Calculate and distribute immediately upon receipt of this form my  **current year RMD**. I understand that I am responsible for ensuring any future year RMD amounts are satisfied by contacting Virtus Mutual Funds to request subsequent distributions. If you attained the age 70 ½ last year and you are electing to also distribute your **prior year deferred RMD**, check this box  (must be received between January 1<sup>st</sup> and April 1<sup>st</sup>).

**Distribute a fixed amount of \$** \_\_\_\_\_ **immediately upon receipt of this form.** I understand that I am responsible for ensuring my RMD amounts are satisfied each year and for contacting Virtus Mutual Funds to request any subsequent distributions.

**Qualified Charitable Distribution ("QCD")** - mark this box if the amount indicated above is a QCD distribution (SEP and SIMPLE IRAs are excluded). Attach a letter of instruction providing the name of the charity(ies), specific allocation(s) and provide the mailing instructions. The amount(s) distributed as a QCD must not exceed \$100,000. Any amounts in excess of the applicable limit will be distributed based on your instructions provided in the section titled **Distribution Instructions** on the next page. (*Signature Guarantee required*)

Systematic Distribution Options

**Systematic Withdrawal Plan** - Calculate and distribute my **current year RMD amount for this year and all subsequent years**. I understand that the Custodian will continue to calculate and distribute my RMD amount for all subsequent years until I notify them to discontinue the payments. If you attained age 70½ last year and you are electing to also distribute your **prior year deferred RMD** check this box  (must be received between January 1<sup>st</sup> and April 1<sup>st</sup>). Your prior year deferred amount will be issued as a single sum distributed immediately upon receipt of this form.

**Distribute a fixed amount of \$** \_\_\_\_\_ **at the frequency listed below until I notify you to discontinue payments.** I understand that I am responsible for ensuring my RMD amounts are satisfied each year. I also understand that I **am responsible for contacting Virtus Mutual Funds to request any adjustments to the fixed dollar amount or frequency.**

Systematic Distribution Cycle (If a frequency is not selected, your RMD will be distributed annually on or about December 15<sup>th</sup>)

Monthly  Quarterly  Semi-Annually  Annually Beginning \_\_\_\_\_  
(month / day / year)

## 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*)

\_\_\_\_\_  
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.
- Systematic Distributions – Systematic 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 your bank, on bank letterhead, confirming your account information to have the withdrawals electronically transmitted to your savings account.

If banking information is provided below, it will automatically be added to the account for future transactions, unless otherwise specified.

\_\_\_\_\_  
Bank Name

\_\_\_\_\_  
Bank Routing Number

\_\_\_\_\_  
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 application with investment instructions.

## 7. Taxes

### Federal Tax Withholding Election

Distributions from IRAs and qualified retirement plans that are not eligible for rollover are subject to federal income tax withholding unless you affirmatively elect NOT to have withholding apply to such payments. Generally, such distributions are subject to 10% withholding unless you elect to have an additional amount withheld or elect to have no withholding. 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 will remain liable for payment of federal income tax on the taxable portion of the distribution and 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. You may make a withholding election by selecting one of the options below. Your election will remain in effect for any subsequent distributions unless you change or revoke it by providing us with a new election.

- Do NOT withhold federal income tax. (This option is only available for accounts registered with an address in the U.S.)
- Withhold 10% federal income tax
- Withhold \_\_\_\_\_% federal income tax (must be more than 10%)

Federal income tax will be withheld from any distribution subject to the IRS withholding rules if you do not complete and return this election or if you have not previously elected out of withholding. Tax will be withheld on the gross amount of these payments 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.

### 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 Sponsor, or any employee, officer, 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. I expressly assume responsibility for any adverse consequences which may arise from the election(s) made on this form, and I agree that the custodian, the sponsor and their employees, officers, trustees and agents shall be indemnified and held harmless, for any tax, legal or other consequences resulting from my election(s). Virtus Mutual Funds and the Custodian are 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 one-time 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 or if 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.

**Place Stamp Here**

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.**