

**MANHATTAN LIFE INSURANCE COMPANY  
WESTERN UNITED LIFE ASSURANCE COMPANY**

**Annuity Operations Office**

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**ANNUITY  
DISTRIBUTION  
REQUEST**

**1. IMPORTANT TAX INFORMATION**

Receipt of funds from a withdrawal or surrender of your annuity contract may generate taxable income. In addition, if you are not 59½ years old or permanently disabled, receipt of funds may be a premature distribution, generating an additional income tax. We suggest you contact your tax advisor before completing this request.

**2. ANNUITY CONTRACT INFORMATION**

Owner Full Name	Joint Owner Full Name (if applicable)	Annuity Number
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**3. EMPLOYER INFORMATION REQUIRED FOR TSA 403(B) CONTRACT DISTRIBUTIONS**

Current/Most Recent Employer Name	Phone Number(s)
Address, City, State, Zip Code	Plan Name

**4. PARTIAL SURRENDER (Subject to contract minimums)**

**Mark Appropriate Box**

- a. ☐ I wish to withdraw the free amount from my annuity contract.
- b. ☐ I wish to withdraw \$ \_\_\_\_\_ from my annuity contract. ☐ Gross or ☐ Net
- c. ☐ I wish to start a periodic payment to begin on \_\_\_\_\_ (mm/dd/yyyy) ☐ Gross or ☐ Net  
☐ Free Amount ☐ Interest or ☐ Specific amount of \$ \_\_\_\_\_  
Mode of payment: ☐ Monthly ☐ Quarterly ☐ Semi-Annual ☐ Annual
- d. ☐ I am aware that there may be an early withdrawal charge of approximately \$ \_\_\_\_\_

**5. FULL SURRENDER (Contract Required)**

**Mark Appropriate Box**

- a. ☐ I wish to fully surrender the annuity contract for its Net Cash Value following receipt of both this signed request and the annuity contract at the Company's Annuity Administration Office.  
**(Please be sure to Advise Your Employer to Stop Deductions for this Contract if Applicable)**
- b. ☐ I am aware that there may be an early surrender charge of approximately \$ \_\_\_\_\_

**6. ORIGINAL CONTRACT – FULL SURRENDER ONLY (Contract Required)**

**Mark Appropriate Box**

- a. ☐ **Enclosed** (Specifically the original Page 3 of the contract)
- b. ☐ **Lost/Destroyed** – I hereby declare under penalty of perjury that the above numbered contract has been lost or destroyed; that it has not been delivered to any person having any right, title, or interest in it.

**7. MINIMUM DISTRIBUTION**

**Mark Appropriate Box**

- a. If beneficiary is a spouse who is more than 10 years younger, indicate date of birth: \_\_\_\_\_
- b. Do you want automatic distribution? ☐ Yes ☐ No **If Yes, indicate start date:** \_\_\_\_\_  
Mode of payment: ☐ Monthly ☐ Quarterly ☐ Semi-Annual ☐ Annual

**8. ADDITIONAL COMMENTS OR INSTRUCTIONS**

**INCOMPLETE WITHOUT PAGES 1-2 – COPIES TO PRODUCER AND CLIENT**

**9. ELECTION FOR WITHHOLDING**

Refer to IRS Form W-4R OMB No. 1545-0074

Federal and some State laws make payments subject to withholding. The law requires that you be told three things:

- You do not have to have any money withheld from your distribution.
- After you have made a choice, you can change it at any time by writing to us. Please allow 30 days for the change.
- Even if you elect not to have income tax withheld, you are liable for payment of income tax on the taxable portion of your distribution. You also may be subject to tax penalties under the estimated tax payment rules if your payments of estimated tax and withholding, if any, are not adequate.

**CHECK FEDERAL AND/OR STATE (if applicable)**

**If Not Checked and the Payment Amount is Sufficient, We are Required to Withhold Income Tax.  
We are Required to Withhold if Your Resident Address is Outside of the United States.**

**FEDERAL:**☐ **DO NOT WITHHOLD**

federal income tax from my distribution

☐ **WITHHOLD**

- ☐ 10% of taxable portion
- ☐ 20% of taxable portion (20% is generally required on all qualified funds except IRA's)
- ☐ Other (specify) \_\_\_\_\_

**STATE:** \_\_\_\_\_☐ **DO NOT WITHHOLD**

state income tax from my distribution

☐ **WITHHOLD**

- ☐ % of taxable portion (specify) \_\_\_\_\_
- ☐ \$ of taxable portion (specify) \_\_\_\_\_

**(SEE STATE WITHHOLDING INSTRUCTIONS)****10. TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION**

Substitute IRS Form W-9

I/We understand that failure to furnish my/our correct TIN (taxpayer identification number), may result in a \$50 penalty for each failure, imposed by the Internal Revenue Service (IRS). I/We also understand the Company would be required to withhold an additional amount according to IRS guidelines. IRS Instructions are available upon request or go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Owner's SSN/TIN:** \_\_\_\_\_ **Joint Owner's SSN/TIN:** \_\_\_\_\_

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number; and
- I am not subject to backup withholding due to failure to report interest and dividend income; and  
☐ I have checked this box because I am subject to backup withholding. **(Check ONLY if applicable)**
- I am a U.S. citizen or other U.S. person.

**11. REQUIRED SIGNATURES**

I certify, under penalties of perjury, that all information reported herein is correct.

**The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

Owner Printed Name

Owner Signature

Date

Joint Owner Printed Name (if applicable)

Joint Owner Signature

Date

Producer/Witness Printed Name

Producer/Witness Signature

Date

Contract Owner's Address &amp; Telephone Number

Is this address

☐ Current ☐ New ☐ Seasonal?**INCOMPLETE WITHOUT PAGES 1-2 – COPIES TO PRODUCER AND CLIENT**



## General Instructions (*continued*)

**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 2025, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

**Eligible rollover distributions—20% withholding.** Distributions you receive from qualified retirement plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a 20% default rate of withholding on the taxable amount of the distribution. You can’t choose withholding at a rate of less than 20% (including “-0-”). Note that the default rate of withholding may be too low for your tax situation. You may choose to enter a rate higher than 20% on line 2. Don’t give Form W-4R to your payer unless you want more than 20% withheld.

Note that the following payments are **not** eligible rollover distributions for purposes of these withholding rules:

- Qualifying “hardship” distributions;
- Distributions required by federal law, such as required minimum distributions;
- Distributions from a pension-linked emergency savings account;
- Eligible distributions to a domestic abuse victim;
- Qualified disaster recovery distributions;
- Qualified birth or adoption distributions; and
- Emergency personal expense distributions.

See Pub. 505 for details. See also *Nonperiodic payments—10% withholding* above.

**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 1b

For an estate, enter the estate’s employer identification number (EIN) in the area reserved for “Social security number.”

### 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 on page 1 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 \$65,000 without the payment. Step 1: Because your total income without the payment, \$65,000, is greater than \$63,475 but less than \$118,350, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$85,000, is greater than \$63,475 but less than \$118,350, 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 \$61,000 without the payment. Step 1: Because your total income without the payment, \$61,000, is greater than \$26,925 but less than \$63,475, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$81,000, is

greater than \$63,475 but less than \$118,350, the corresponding rate is 22%. The two rates differ. \$2,475 of the \$20,000 payment is in the lower bracket (\$63,475 less your total income of \$61,000 without the payment), and \$17,525 is in the higher bracket (\$20,000 less the \$2,475 that is in the lower bracket). Multiply \$2,475 by 12% to get \$297. Multiply \$17,525 by 22% to get \$3,856. The sum of these two amounts is \$4,153. This is the estimated tax on your payment. This amount corresponds to 21% of the \$20,000 payment (\$4,153 divided by \$20,000). Enter "21" on line 2.

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request additional federal income tax withholding from your nonperiodic payment(s) or eligible rollover distribution(s); (b) choose not to have federal income tax withheld from your nonperiodic payment(s), when permitted; or (c) change a previous Form W-4R (or a previous Form W-4P that you completed with respect to your nonperiodic payments or eligible rollover distributions). To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s).

Failure to provide a properly completed form will result in your payment(s) being subject to the default rate; providing fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.