

IRA/IRRA®/Roth IRA/SEP/SRA

Distribution Form For Standing Letters



Merrill Lynch
Bank of America Corporation

Use this form to establish a standing letter to take recurring or "as requested" withdrawals (distributions) from a Merrill Lynch:

- Individual Retirement Account (IRA)
- IRRA® (Rollover IRA)
- Roth IRA
- Simplified Employee Pension (SEP) IRA plan, or
- SIMPLE Retirement Account (SRA)

This form should not be used for: Inherited distributions or periodic distributions that are part of a series of substantially equal periodic payments monitored by Merrill Lynch.

Complete, sign and send this form to the appropriate channel for processing.

- **The Start Date cannot fall on a non-business day. This Enrollment Form and Agreement should be received 3 days in advance of the Start Date to allow necessary time for system enrollment. If not received within this time frame, your enrollment may be delayed until the next scheduled payment date. The Expiration Date will be the earlier of the date indicated on this form and the date the Merrill Lynch Account has been closed.**

If you are enrolling in an STLOA and would like to act on it, please contact the appropriate channel below in order to request and receive your first distribution. For clients with a Financial Advisor please contact your branch office directly for the appropriate fax number and address for prompt processing. If forms are sent to the wrong channel processing is not guaranteed. Please retain a second copy of this form for your records.

Merrill Lynch Branch Office Clients

Please contact your personal **Financial Advisor** to obtain your branch office fax number or address for prompt processing.

Merrill Edge Clients (ONLY)

- Fax to: 866.557.2690
- Or, you can mail to the following address:
Merrill Edge®
P.O. Box 29002
Hot Springs, AR 71903-9002

Part 1: Account Owner Information

Please provide all information as requested.

Your Name (please print)

Merrill Lynch Retirement Account Number

Date of Birth (month/day/year)¹

Phone Number

Instruction Type (please select one of the following): New Change Cancel

¹Distributions prior to age 59½ will be reported to the IRS as premature and distributions post age 59½ will be reported to the IRS as normal.

Part 2: Distribution Type & Schedule

Please check the applicable section(s) below and complete each in its entirety. If you select more than one distribution type, the subsequent sections will apply to all instructions.

1. Standing Letter of Instruction (STLOI)

Merrill Lynch will automatically process distributions based on the instructions below.

Periodic Installments of \$ _____

Monthly Quarterly Semi-Annual Annual

Starting date* ____ / ____ / ____ Expiration date ____ / ____ / ____ (optional)

*Start date must be greater than 3 business days if ACH distribution method is selected and greater than 7 business days if Automatic Liquidation is selected.

2. Standing Letter of Authorization (STLOA)

Merrill Lynch will process distributions based on your future requests.

The maximum allowable amount for each transaction will be: \$ _____

Expiration date ____ / ____ / ____ (optional)

3. Cash dividends as they are credited to my account

(Merrill Lynch cannot withhold income taxes for this distribution option. Therefore, US citizens living abroad and Non-Resident Aliens cannot enroll in this option.).

Part 3: Withholding Election

Important: Please read the Withholding Notice before completing this section.

Complete if you are providing a U.S. Address:

Federal Withholding:

Please note that if you do not make a withholding election, federal income tax will be automatically withheld from your distribution at a rate of 10%.

- Do not withhold federal income tax from my distribution.
 Withhold federal income tax from my distribution (check one):
 At a rate of 10% At a rate of _____% (must be greater than 10%)
 At \$ _____ (dollar amount must be greater than 10% of the total distribution value)

State Withholding:

State withholding may also be required in certain states. CA and VT state tax withholding is a percentage of the federal tax withholding. To determine your state's withholding requirements refer to the supplemental State Tax Withholding Rate Document.*

The minimum required for the state of _____ is _____.

- Do not withhold state income tax from my distribution.
 *At a rate of _____% At \$ _____

Local Withholding:

Local withholding may be applicable for the states of Indiana and New York.

Complete if you are providing a Foreign Address:

If you are a U.S. citizen with a foreign address, you may not waive the Federal withholding requirement. If you are a Non-Resident Alien, all distributions are subject to a tax treaty rate or 30% tax withholding and you must complete Form W-8BEN. You must have a valid Form W-8BEN on file. W-8BENs are only valid for 3 years at which time a new W-8BEN needs to be completed or instructions will terminate.

- I am a U.S. Citizen living abroad (check one)
Withhold: At a rate of 10% At a rate of _____% (must be greater than 10%)
 At \$ _____ (dollar amount must be greater than 10% of the total distribution value)
- I am a Non-Resident Alien (check one)
Withhold: At a rate of 30% Tax Treaty rate of _____% Country _____
 At a rate of _____% (must be greater than 30%)

Part 4: Distribution Method

Please check one of the boxes below to indicate where you would like your distribution sent. Distributions going to an alternate payee will require the Third Party Instructions to be completed in addition to your distribution option.

If you choose to distribute to an outside financial institution, please make sure the voided check is preprinted with your name and address, as well as your financial institution's address. If you don't have a preprinted check, or if the account you want to access is not a checking account, you must provide a letter from your financial institution on its letterhead. The letter must be signed by an officer of the institution and must include: 1) your account title, 2) type of account (checking, savings, other), 3) account number, 4) institution's ABA routing/transit number, and 5) your taxpayer identification number.

(a) Distribute to a Merrill Lynch non-retirement account

Account Number _____

(b) Distribute to a Bank of America account (Automated Clearing House)

ABA Routing Number (voided check not required) _____

Account Number _____

(c) Mail check to the account address on file

(d) Mail check to the alternate address listed here:
Alternate Address:

Memo:*

*This information will not be displayed in the envelope window.

Third Party Instructions (This section must be completed if distributing to an alternate payee)

By making an election to pay to a third party, I understand that I will be responsible for any taxes that are due as a result of this distribution.

Please indicate the alternate payee's name, relationship to you and reason for the distribution.

Alternate Payee Name: _____

Relationship: _____

Reason for Distribution: _____

(e) Distribute to an outside financial institution (Automated Clearing House)

Name of Institution _____

Account Number _____

ABA Routing Number _____

Outside Account to Be Credited (please select one)

Checking (Enclose a pre-printed, voided check for the account)

Savings (Enclose a letter of authorization from your financial institution)

Other (Enclose a pre-printed, voided check for the account or a letter of authorization from your financial institution)

Part 5: Automatic Liquidation (Optional) (Applicable to STLOI only)

Complete this section if you would like to fund your scheduled distribution by liquidating mutual funds in your account. To authorize Merrill Lynch to automatically liquidate your eligible mutual funds, please complete the specified fields below. (If additional space is needed, please attach a separate letter).

Mutual Funds/Cash	Security Symbol	Percentage Amount (whole numbers only)
		%
		%
		%
		%
		Total 100%

Notes:

■ Liquidation will only occur from the funds you have authorized. If a selected fund does not have sufficient value to cover the allocated percentage, the order will be restricted to 95% of the market value of the fund to minimize the risk of an order execution in excess of the available amount under volatile market conditions. The remaining unfulfilled amount will be liquidated proportionately from the other specified funds. If the amount is still unavailable, the system will use available cash/cash equivalents to fulfill the distribution.

■ Contingent deferred sales charges (CDSC), redemption fees, and/or transaction fees may apply and result in insufficient funds to process the requested distribution.

■ Clients currently enrolled in Managed Products are not eligible for automatic liquidation.

Part 6: Signature

I acknowledge I have reviewed the information entered above and have read the terms of the Merrill Lynch retirement plan from which I am taking the distribution and the Withholding Notice and my instructions comply with those terms.

I hereby authorize Merrill Lynch to initiate distributions from my Merrill Lynch IRA, IRRA, Roth IRA, SEP IRA, or SIMPLE IRA in the manner specified within this form, either 1) on a recurring basis in such amount, after income-tax withholding, if any, and upon such schedule as I have instructed, or 2) upon my verbal instruction, subject to any limitation I have specified. I also authorize Merrill Lynch to distribute the funds as directed by my instruction from my Merrill Lynch retirement account to another Merrill Lynch non-retirement account, to me by check, or to another financial institution via Automated Clearing House (ACH).

I agree Merrill Lynch will not perform a scheduled distribution if the dollar amount of the scheduled distribution is not available in one or a combination of the following accounts: cash credit balance, money market mutual fund shares, or Retirement Asset Savings Program account balance. I agree it is my responsibility to ensure timely instructions are given to Merrill Lynch so such amounts are available to be distributed as scheduled.

I agree this authorization and my withholding elections will remain in effect until either expires, per my instruction, or until changed by completing a new distribution form.

If electing ACH distributions, I authorize the financial institution holding the bank account to accept ACH transfers to my account without responsibility for the correctness thereof. I agree that Merrill Lynch will not be liable for any loss, liability, cost or expense for acting or failing to act upon my authorization, except to the extent required by applicable law. I authorize Merrill Lynch to initiate debit or credit transfers to correct erroneous transfers, to the extent permitted by law.

I understand that if the distribution is made payable to a third-party payee, I will be responsible for any taxes that are due as a result of these requested or recurring distributions.

I have reviewed this form in its entirety, and hereby certify all information as it appears is correct and may be relied upon by the custodian.

Note: The rules governing distributions can be complex, and you might be subject to taxes based on your distribution. We urge you to consult your tax advisor or attorney for further guidance.

X _____
Signature

Date (month/day/year)

Withholding Notice

Federal income taxes are required to be withheld (subtracted) from your distribution at a flat rate of 10% unless you tell us that you do not want any taxes withheld. State income taxes will be withheld according to the specific requirements of the state in which you reside. You must use this form to instruct us whether you want income taxes withheld from distributions you will receive from your retirement account. Certain states require that you complete their state form to opt-out of state taxes when your distribution is subject to federal income taxes. To determine your state's requirements, please refer to the supplemental State Tax Withholding Rate Document.

Even if you elect to not have federal and state taxes withheld from your distribution, you are liable for payment of federal and state income taxes on the taxable portion of your distribution.

How to choose not to have taxes withheld.

If you do not want any federal taxes withheld from your distributions, check the appropriate boxes in Part 3 (Withholding Election) on the Distribution Form and sign at the bottom. Your selection will also serve as an election not to have state taxes withheld from your distributions. If you do want state taxes withheld, check the appropriate box and indicate the applicable state withholding rates. **If you do not make an election, we will assume you choose to have federal and, if applicable, state income taxes withheld from all distributions.**

Changing your choice. You can change your withholding election at any time or as often as you wish by completing the appropriate federal and state tax withholding sections.

Estimated Taxes. Under Internal Revenue Service Rules, if you choose not to have federal income taxes withheld, or if the amount withheld from your distribution is not sufficient, you may be responsible for paying estimated taxes each quarter. When your actual taxes for a year are determined, you could incur IRS penalties if your estimated federal income tax payments were not sufficient. **You may incur similar tax penalties under state law.**



Merrill Lynch

Bank of America Corporation

Merrill Lynch is the marketing name for Merrill Lynch Wealth Management, and Merrill Edge®, both of which are made available through Merrill Lynch, Pierce, Fenner & Smith Incorporated ("MLPF&S"). Merrill Edge is available through Merrill Lynch, Pierce, Fenner & Smith Incorporated (MLPF&S), and consists of the Merrill Edge Advisory Center (investment guidance) and self-directed online investing.

Investment products:

Are Not FDIC Insured

Are Not Bank Guaranteed

May Lose Value

MLPF&S is a registered broker-dealer, member SIPC and a wholly owned subsidiary of Bank of America Corporation.

© 2018 Bank of America Corporation. All rights reserved.

Code 10187 SL (REV 03/18)