# IRA/IRRA®/SEP/SRA

## Substantially Equal Periodic Payment (72(t)) Distribution Form

MERRILL
A BANK OF AMERICA COMPANY

**Use this form to establish Substantially Equal Periodic Payments (SEPPs) from a Merrill:**

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

**Important:** Substantially Equal Periodic Payments can only be distributed in cash. You must have available cash in your account within 15 days of the scheduled distribution date.

## Modifying Or Terminating SEPPs

You cannot modify your SEPPs by changing the balance of the IRA from which you've begun taking your SEPPs. If you modify your SEPPs, the IRS may determine that all of your SEPPs, including those already taken, are subject to both the 10% penalty and retroactive interest on the penalty.

■ **You cannot distribute more or less than your annual calculated amount.** Each year, you are required to receive a Substantially Equal Periodic Payment. Please note that distributions systematically rejected for insufficient funds will be considered a modification.

■ **You cannot make contributions, asset transfers, or rollovers to the IRA.** If the balance of the IRA changes (except for investment gains or losses and your SEPP withdrawal), after you begin taking SEPPs, the IRS considers that to be modifying payments.

■ **You cannot change the IRA from which you withdraw your SEPPs.** If you start taking SEPPs from one IRA, you cannot decide later that you want to take them from another IRA instead. While you can separately calculate and begin taking additional SEPPs from a second IRA, you must continue taking SEPPs from the first IRA for at least five years or until you reach 59½, whichever is later.

**Exceptions for terminating or modifying SEPPs:**

■ You may terminate your SEPPs early due to disability or death, or when your account balance is depleted.

■ If you are using one of the two fixed-payment calculation methods, you may make a one-time, penalty-free switch to the required minimum distribution method.

Any modifications of your payment schedule may result in tax penalties. Please speak with your tax advisor before modifying your payment schedule. In addition, you can refer to the "Understanding Substantially Equal Periodic Payments" fact sheet for a more detailed description.

**Complete, sign and send this form to the appropriate channel for processing. For clients with a Merrill Lynch Wealth Management Advisor please contact your advisor's 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 Wealth Management Clients**

Please contact your personal **advisor**
obtain your advisor's office fax number or address
for prompt processing.

**Merrill Edge Self-Directed and Merrill Guided Investing Clients**

For faster service, this form can be completed electronically by signing into your account on merrilledge.com

or

Please complete this form and fax to 1.877.229.7160 or mail to:
Merrill Document Processing
PO Box 31024
Tampa, FL 33631-3024

## Part 1: Account Owner Information

_____
Your Name *(please print)*

_____
Date of Birth *(month/day/year)*

_____
Merrill Primary Retirement Account Number

**Instruction Type** *(Please select one of the following):*

☐ New ☐ Change

Related Accounts:
List all accounts that were included in your 72(t) annual calculation and indicate the annual amount to be distributed from each account. A minimum of $1 annually must be distributed from each account. For more information, see the Aggregating Account Balances section of this form.

_____ $ _____
Merrill Related Retirement Account Number Must be at least $1.00

_____ $ _____
Merrill Related Retirement Account Number Must be at least $1.00

_____ $ _____
Merrill Related Retirement Account Number Must be at least $1.00

_____ $ _____
Merrill Related Retirement Account Number Must be at least $1.00

## Part 2: Substantially Equal Periodic Payment Distribution Information

(a) Check your calculation method:

☐ Life Expectancy/Required Minimum Distribution ☐ Amortization ☐ Annuitization

(b) Check the corresponding distribution frequency:

☐ Monthly ☐ Quarterly ☐ Semi-Annually ☐ Annually

(c) Check the corresponding distribution measuring period:

☐ Calendar Year – January to December distribution period, regardless of enrollment date in the SEPP Service. The full annual amount must be distributed by 12/31. (72t will be satisfied 12/31 of the year in which both the 5 year and 59 1/2 year rule have been fulfilled.)

☐ Rolling Calendar Year – Rolling 12-month distribution period, distributions to be completed by the 365th day following the date of enrollment

(d) Enter the date you want your new distributions to start:

*(mm/dd/yyyy)* _____

* 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.

(e) Enter the annual computed amount you are required to take under your chosen method of calculation. If you selected the Required Minimum Distribution method, please enter the annual distribution amount calculated for this year.* Annual computed amount: $_____

(f) If this is a new SEPP instruction, enter the same date provided in part(d). If this is a continuation of a Substantially Equal Periodic Plan began at Merrill or elsewhere, enter the date you received the first SEPP distribution.

Date of SEPP distribution: *(mm/dd/yyyy)* _____

(g) If you are transferring your retirement account to Merrill and have taken some of your Substantially Equal Periodic Payments for the current year at another institution, please indicate the amount of distributions you have already taken. If you are taking distributions during a rolling calendar year cycle as indicated in section 2(c), enter the total of all distributions taken YTD from the beginning of your rolling cycle to the last distribution taken at prior firm. If you are taking distributions during a calendar year cycle as indicated in section 2(c), enter the total of all distributions taken YTD from January to the last distribution taken at prior firm.

$ _____

** Note: A copy of your statement from your prior custodian, reflecting total distributions taken year-to-date, is required. If on a rolling calendar cycle, a prior year 1099-R is also required.*

## Part 3: Withholding Election

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

**Withholding Election: You MUST indicate your withholding election below.**

**Complete if you have a U.S. Address:**

### Federal Withholding (2026 IRS Form W-4R Withholding Certificate for Nonperiodic Payments):

***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%. For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100%. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its territories. See page 7 for more information.***

***Complete this line if you would like a rate of withholding that is different from the default withholding rate which is 10%. Enter the rate as a whole number (no decimals). See page 7 for the 2026 Marginal Rate Tables. You may use these tables to help you select the appropriate withholding rate for this payment or distribution. Instructions on how to best use them are included.***

Withhold federal income tax for this distribution at a rate of _____% (must enter rate between 0-100% as a whole number, no decimals)

**Note:** You may choose to have no federal income tax withheld by entering -0- on the above line.

### 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.

☐ Withhold state income tax for the state of _____ from my distribution (check one):

☐ *At a rate of _____% ☐ At $_____

## Part 3: Withholding Election (continued)

### Local Withholding:

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

**Complete if you have a Foreign Address:**

***If you are a U.S. citizen or U.S. resident 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. A valid Form W-8BEN expires after 3 years.***

☐ I am a U.S. Citizen or U.S. resident 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%)

## Withholding Notice

Federal income taxes are required to be withheld (subtracted) from your distribution at a flat rate of 10% unless you provide us with alternate withholding instructions for this transaction. 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, follow the instructions above in Part 3 (Withholding Election) on this 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.

## Part 4: Distribution Method

**Please check one of the boxes below to indicate where you would like your distribution sent.**

☐ **Distribute to a Merrill non-retirement account**

_____

Account Number

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

_____ _____

Account Number ABA Routing Number (voided check not required)

☐ **Mail check to the account address on file**

☐ **Mail check to the address listed here:**

_____

_____

_____

Memo:* _____

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

☐ **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 with your name and address, and your financial institution's address)

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

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

## Part 5: Automatic Liquidation (Optional)

**Complete this section if you would like to fund your scheduled distribution by liquidating mutual funds in your account. To authorize Merrill 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

**Please sign and date the form and return it to your Merrill Lynch Wealth Management Advisor or the Merrill Advisory Center or if you are a Merrill Edge self-directed investing client, return it to the Investment Center.**

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

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

I agree that Merrill 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 that it is my responsibility to ensure that timely instructions are given to Merrill so that such amounts are available to be distributed as scheduled.

I agree that 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 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 to initiate debit or credit transfers to correct erroneous transfers, to the extent permitted by law. (I have reviewed this form in its entirety, and hereby certify that 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. 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.*

*By signing below, I am stating that: (i) my Substantially Equal Periodic Payments are calculated pursuant to an IRS-approved method; (ii) I understand that distribution must continue until the later of five years from the date of the first distribution or until attainment of age 59 ½ ; and (iii) I have not relied on Merrill for tax or legal advice.*

**X** _____ _____

Signature (This form is not valid unless you sign it.) Date (month/day/year)

## SEPPs and Tax Reporting

Early Distributions for clients *enrolled in the Merrill SEPP Service* who also meet SEPP requirements will be reported on IRS Form 1099-R with the following reason code in box 7:

- '2' ("Early distribution, exception applies") for clients under age 59½
- '7' ("Normal distribution") for clients age 59½ and older

Early Distributions for clients *enrolled in the Merrill SEPP Service* who have modified the current payment stream will be reported on IRS Form 1099-R with the following reason code in box 7:

- '1' ("Early distribution, no known exception") regardless of age
- Other reasons for Merrill NOT to report the "early distribution, exception applies" on IRS Form 1099-R:
  - If you transfer your primary or any of your related SEPP accounts from Merrill to another financial institution for a year in which you are scheduled to or already have received Substantially Equal Periodic Payments, Merrill will not report the exemption from the early distribution penalty.
  - Distribution requests systematically rejected for insufficient funds will be considered a modification to the Merrill SEPP service. Please see Modifying SEPPs for further detail.

## Aggregating Account Balances

You may choose to calculate your annual SEPP based on the account balance of a single account or you may choose to calculate your annual SEPP based on the account balances of multiple Merrill IRA, IRRA, SEP or SIMPLE retirement accounts with the same social security number. The latter feature is known as aggregating. In this case, your annual SEPP calculation would be based on the combined account balance of all those accounts designated as part of the SEPP relationship. The accounts remain separate but the balances are combined for the purpose of calculating the annual SEPP distribution amount. In an effort to monitor and track the activity of the entire SEPP relationship, each account must be enrolled in the SEPP Service. Only those accounts designated as part of the SEPP relationship will be monitored. If you maintain other IRA, IRRA, SEP or SIMPLE retirement accounts that are not designated as part of the relationship, those accounts would not be subject to any SEPP Service restrictions.

You have two options for aggregating account balances:

- One account must be designated the primary account. SEPP distributions would only be paid out of that account. The related accounts would be set up to distribute $1 annually in excess of the annually calculated amount; or
- One account must be designated the primary account and all others would be designated as related accounts. Each account will distribute an amount designated by you (all amounts must total the annually calculated SEPP distribution amount) and paid based on the selected frequency.

Clients electing to aggregate their account balances may transfer funds among the primary and the related accounts in order to meet distribution requirements. Transfer requests will only be allowed if the accounts are designated as part of the SEPP relationship on this form.

If one of the combined accounts has activity that violates SEPP guidelines, all of the accounts, including the primary, would be terminated from the service and all distributions for the current year would be reported as "premature, no known exception." IRS Form 1099-R would reflect code "1" in box 7.

Special rules may apply for required minimum distributions. We urge you to consult your tax advisor for further guidance.

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**Investment products:**

| Are Not FDIC Insured | Are Not Bank Guaranteed | May Lose Value |
|---|---|---|

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**General Instructions for IRS Form W-4R Withholding Certificate for Nonperiodic Payments and its substitute. Please complete Part 4: Withholding Election above to document your withholding rate election.**

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**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 or eligible rollover distribution from an employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See page 2 for the rules and options that are available for each type of payment. Don't use Form W-4R for periodic payments (payments made in installments at regular intervals over a period of more than 1 year) from these plans or arrangements. Instead, use Form W-4P, Withholding Certificate for Periodic Pension or Annuity Payments. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

**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.

### 2026 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 page 2 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%** |
| 16,100 | **10%** | 32,200 | **10%** | 24,150 | **10%** |
| 28,500 | **12%** | 57,000 | **12%** | 41,850 | **12%** |
| 66,500 | **22%** | 133,000 | **22%** | 91,600 | **22%** |
| 121,800 | **24%** | 243,600 | **24%** | 129,850 | **24%** |
| 217,875 | **32%** | 435,750 | **32%** | 225,900 | **32%** |
| 272,325 | **35%** | 544,650 | **35%** | 280,350 | **35%** |
| 656,700* | **37%** | 800,900 | **37%** | 664,750 | **37%** |

* If married filing separately, use $400,450 instead for this 37% rate.



**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 2026, 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;
- Qualified long-term care distributions; and
- Emergency personal expense distributions.

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

## General Instructions *(continued)*

**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 $70,000 without the payment. Step 1: Because your total income without the payment, $70,000, is greater than $66,500 but less than $121,800, the corresponding rate is 22%. Step 2: Because your total income with the payment, $90,000, is greater than $66,500 but less than $121,800, 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 $60,000 without the payment. Step 1: Because your total income without the payment, $60,000, is greater than $28,500 but less than $66,500, the corresponding rate is 12%. Step 2: Because your total income with the payment, $80,000, is greater than $66,500 but less than $121,800, the corresponding rate is 22%. The two rates differ. $6,500 of the $20,000 payment is in the lower bracket ($66,500 less your total income of $60,000 without the payment), and $13,500 is in the higher bracket ($20,000 less the $6,500 that is in the lower bracket). Multiply $6,500 by 12% to get $780. Multiply $13,500 by 22% to get $2,970. The sum of these two amounts is $3,750. This is the estimated tax on your payment. This amount corresponds to 19% of the $20,000 payment ($3,750 divided by $20,000). Enter "19" on line 2.

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**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.