# SYSTEMATIC WITHDRAWAL REQUEST

# SILAC INSURANCE COMPANY

### Mail completed form to:

SILAC Insurance Company

PO Box 30245, Salt Lake City, UT 84130-0245

FIA Fax Number: 801-812-8789 MYGA Fax Number: 336-419-0279 **Contact us:** 

FIA Policyholder Service - 888-352-5122 MYGA Policyholder Service - 833-889-0910

Annuity Contract Number: Owner:								
				SSN/T	IN Num	ber:		
Married	Married Single Widowed Divorced-Please specify: Date State							
In accordanc	e with the ter	ms of the Annu	uity Contract, I	hereby e	lect to w	ithdraw: (check	one of the following.	)
	LATED INTER frequency must		to 3/31. Semi An	nual frequ	ency mus	t be chosen prior to	6/30.	
Initial Distril	bution Date:							
Distribution	Frequency:	(Check one)	Monthly	Qua	arterly	Semi Annual	Annual	
	um withdraw ill change to		100. If withd	rawal do	oesn't m	eet the minimu	m the frequency of	
SPECIFIE	D AMOUNT \$	\$				ACCUMULATED		
after withdray	val must be at le		3/31. Semi Annua	al frequen	cy must be	e chosen prior to 6/3	30. Minimum remaining	account value
Initial Distril	oution Date:							
Distribution	Frequency:	(Check one)	Monthly	Qua	arterly	Semi Annual	Annual	
REQUIR	ED MINIMU	IM DISTRIBUT	ΓΙΟΝ (RMD)					
		•		•	•	t be chosen prior to	6/30.	
•		December 15th of	f the year requiri	ng distribi	ı			
Initial Distrii	oution Date:					ear End Account \ cies in 1st policy year		
Distribution	Frequency:	(Check one)	Monthly	Quarte	rly	Semi Annual	Annual	
Single Li Joint life	ife (based on (your spouse	RMD calculated the Uniform Di e must be your n:	istribution Tabl sole primary b	le) eneficiar	•	ust be more thar	n 10 years younger th	an you)
Inherite					•			
Decease	d's date of bi	irth:			_			
1						use the Single Li	fe Expectancy Table	
	ed Value and y					Irawal/Periodic act applicable to	Payment of the the amount withdra	wn.
						ctly in your bank following instruc	account using Electrition.	onic Funds
Chec	k here if you	d prefer to rece	ive payment b	y check t	to your n	nailing address.	Please move on to th	e next section.
Account Name (as it appears on the account)				Bank N	Bank Name			
Routing Nu	nber (botton	n left of check)			Accour	nt Number (botto	om center of check)	
Savii	cking - Please ngs	attach a voided				eck. If EFT is not a	available for your acc	ount, we will
	pay you by cl		,	, -			,	•

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TAX WITHHOLDING		
The IRS requires that we withhold 10% federal income tax from us otherwise. Applicable state income tax will also be withhe taxable portion, please select the appropriate option below a Do not withhold federal or state income taxes from my payment Withhold% federal income taxes from my payment.	ld as appropriate. If you <b>do not</b> want us to and submit a completed W-4R Form. ayment.	
Please consult a tax advisor for more information on withhold Note: Whether or not taxes are withheld, you will be liable for taxable portion of this distribution. You may also be subject t estimated tax payments are not sufficient.	payment of all applicable federal and state	
CERTIFICATION OF TAXPAYER IDENTIFICATION		
Under penalties of perjury, I certify that:  1. My Social Security Number or taxpayer identification 2. I am not subject to backup withholding due to failure 3. I am a U.S. citizen or other U.S. person (as defined in th	to report interest or dividend income; ne Internal Revenue Code); and	n the United States.
Certification Instructions - You must cross out item 2 above it to backup withholding because you have failed to report all citizen or other U.S. person for tax purposes, please cross ou priate IRS documentation.	interest or dividends on your tax return.	If you are not a U.S.
The IRS does not require your consent to any provision of this withholdings.	document other than the certifications rec	quired to avoid backup
Owner(s) and/or Assignee(s) Signature(s) (required)	Title (if corp or trust)	Date (mm/dd/yyyy)
All Irrevocable Beneficiaries	Name and Title	Date (mm/dd/yyyy)
Other Required Signatures (if any)	Name and Title	Date (mm/dd/yyyy)
SPOUSAL CONSENT		
If you reside in the following states AZ, CA, GU, ID, LA, NV, NM, Unless the Company has been notified of a community proper belief that no community property interest exists, and we asso	rty interest in this policy, we are entitled to	
ADDITIONAL INFORMATION		
Notary signature is required for any withdrawal exceeding \$25	0,000 or 50% of the account value.	
County of day of Month	[SEAL]	
Signature of Notary		
My commission expires:		

Please note: For your security we will mail a check for withdrawals greater than \$10,000 to the last address on record. We will not allow address changes at time of withdrawal.

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Department of the Treasury

Internal Revenue Service

# Withholding Certificate for Nonperiodic Payments and **Eligible Rollover Distributions**

Give Form W-4R to the payer of your retirement payments.

OMB No. 1545-0074

1a First name and middle initial	Last name	1b Social security number
Address		•
City or town, state, and ZIP code		
Your withholding rate is determined by the type of par	yment you will receive.	
• For nonperiodic payments, the default withholding r 0% and 100% on line 2. Generally, you can't choose	·	, ,

territories. • For an eligible rollover distribution, the default withholding rate is 20%. You can choose a rate greater than 20% by entering the rate

See page 2 for more information.

	Complete this line if you would like a rate of withholding that is different from the default withholding rate. See the instructions on page 2 and the Marginal Rate Tables below for additional information.		
	Enter the rate as a whole number (no decimals)	2_	%
Sign Here			
пеге	Your signature (This form is not valid unless you sign it.)  Date		

#### General Instructions

Section references are to the Internal Revenue Code.

on line 2. You may not choose a rate less than 20%.

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 pavers 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.

# 2023 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			filing jointly or urviving 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%
13,850	10%	27,700	10%	20,800	10%
24,850	12%	49,700	12%	36,500	12%
58,575	22%	117,150	22%	80,650	22%
109,225	24%	218,450	24%	116,150	24%
195,950	32%	391,900	32%	202,900	<b>32</b> %
245,100	<b>35</b> %	490,200	35%	252,050	35%
591,975*	37%	721,450	37%	598,900	37%

<sup>\*</sup>If married filing separately, use \$360,725 instead for this 37% rate.

Form W-4R (2023) Page  $\bf 2$ 

# **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 2023, 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: (a) qualifying "hardship" distributions, and (b) distributions required by federal law, such as required minimum 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 \$60,000 without the payment. Step 1: Because your total income without the payment, \$60,000, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$80,000, is greater than \$58,575 but less than \$109,225, 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 \$42,500 without the payment. Step 1: Because your total income without the payment, \$42,500, is greater than \$24,850 but less than \$58,575, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$62,500, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. The two rates differ. \$16,075 of the \$20,000 payment is in the lower bracket (\$58,575 less your total income of \$42,500 without the payment), and \$3,925 is in the higher bracket (\$20,000 less the \$16,075 that is in the lower bracket). Multiply \$16,075 by 12% to get \$1,929. Multiply \$3,925 by 22% to get \$863.50. The sum of these two amounts is \$2,792.50. This is the estimated tax on your payment. This amount corresponds to 14% of the \$20,000 payment (\$2,792.50 divided by \$20,000). Enter "14" on line 2.

Form W-4R (2023)

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.

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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.