

# Virtus Mutual Funds PO Box 534470 Pittsburgh, PA 15253-4470

Non-Spouse, Trust, Estate or Entity IRA Beneficiary Election Form

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

# Important Information

- > This form is intended to be used for IRA accounts in which BNY Mellon Investment Servicing Trust Company is the named custodian.
- According to IRS guidelines, an inheritance election must be elected by December 31<sup>st</sup> of the year following the shareholder's death.
- > Each beneficiary option may have tax consequences and/or be irrevocable. We strongly suggest that you contact your Financial or Tax Professional to determine the best course of action for your particular situation.
- RBD Required Minimum Distributions for Traditional, SEP and SIMPLE IRAs The required beginning date ("RBD") for life expectancy distributions for any IRA participant is April 1st of the year following the year in which the IRA participant attained age 72. Note, if the shareholder was born in 1951 or after, RBD distribution age will be 73 and not 72. A shareholder must begin required minimum distribution ("RMD") payments from their IRA (excluding Roth IRAs) upon reaching their required beginning date. Any RMD amount due to be distributed in the year of the original IRA owner's death must be distributed by the Custodian prior to proceeding with any elected option other than a lump sum distribution. Unless otherwise specified in Section 1, the RMD amount will be issued to the beneficiary under the beneficiary's Social Security or tax identification number to the address provided in Section 2 or the banking information provided in Section 6, when this form is received in good order.

1. Account Information		
Original IRA Owner's Name	U.S. Social Security Number	
Street Address	IRA Owner's Date of Birth	IRA Owner's Date of Death
City, State, ZIP Code	Fund and Account Number	
RBD Status - Please check the appropriate box based on the or ☐ The shareholder died <i>before</i> the required beginning date ☐ The shareholder died <i>after</i> the required beginning date for the shareholder died <i>after</i> the required beginning date for the shareholder died <i>after</i> the required beginning date for the shareholder died <i>after</i> the required beginning date for the shareholder died <i>after</i> the required beginning date for the shareholder died <i>after</i> the required beginning date.	for life expectancy distributions.	ıs at the time of death:
Original IRA Account Type  Roth IRA *Traditional, SEP or SIMPLE IRA		
*For Traditional, SEP and SIMPLE IRAs - If the IRA owner's de above) for Required Minimum Distributions (RMD) and they had custodian will distribute the RMD to the beneficiary(ies), under the address provided in Section 2 or the banking information proyou certify it was already satisfied from another IRA	not distributed their RMD amour the beneficiary's Social Security of	nt due for the year of death, the or Tax Identification number to
As the designated beneficiary, trustee, executor, or personal year of death, has been satisfied.	onal representative I certify that th	e IRA owner's RMD, due in the
2. Beneficiary Information		
This request is made in accordance to the IRA owner's benefici provisions (spouse, or if no surviving spouse then the estate of		s of the beneficiary default
IF YOU ARE A SPOUSE BENEFICIARY, PLEASE COMPLETE THE S	POUSAL IRA BENEFICIARY ELECT	ION FORM.
In my capacity, I am requesting the portion of the decedent's IR into an inherited IRA or liquidated as instructed.	A that the below listed beneficiary	is entitled to be transferred
Step 1 – Type of Beneficiary Individual Beneficiary ☐ Non-Spouse (Individual) Beneficiary ☐ Responsible Individual on behalf of a Minor Beneficiary		
Name of Beneficiary	Social Security Number	Date of Birth
Name of Responsible Individual, if applicable	Social Security Number	Date of Birth

2. Beneficiary information, co	ntinuea			
Entity Beneficiary* ☐ Executor, Personal Representat	tive or Administrator for the Est	ate		
☐ Trustee(s) of the named Trust B	Beneficiary			
*If the entity beneficiary is not an es	state or trust, please contact οι	ır office for the ne	ecessary requireme	nts.
Name of Trustee or Executor/Administrator		Social Security I	Number	Date of Birth
Name of Trustee or Executor/Administrator		Social Security I	Number	Date of Birth
Name of Trust or Estate		*U.S. Tax ID Nun		Trust Dated
Stan 2 Banafiaian, Mailing and Empl	anil Addresses	(*decedent's Soci	al Security number is no	t valid)
Step 2 – Beneficiary Mailing and Em	idii Addresses			
Email Address		Daytime Telephor	ne Number	
Mailing Address, City, State, ZIP Code  Step 3 – Deceased Beneficiary(ies)				
☐ Check this box if other beneficiaries	s have predeceased the owner	and you are prov	riding certification o	f their death.
Original beneficiary(ies) who has prede	eceased the IRA owner.			
Name of Deceased Beneficiary		Date of Birth	Date of Death	State of Residence
Name of Deceased Deficilities		Date of Billin	Date of Death	State of Residence
Name of Deceased Beneficiary		Date of Birth	Date of Death	State of Residence
3. Non-Spouse Beneficiary In	heritance Elections			
The beneficiary may elect to have the inherited proceeds a completed IRA Apfor life expectancy, systematic, partial application election. The elections for	oplication must accompany this al or future year distributions.	form, for the purp	ose of maintaining	the inherited proceeds
☐ <b>Option 1</b> - The beneficiary may elect will be reported on IRS Form 1099-R identification number. Please indicate	as a death distribution (Code 4),	under the benefic	iary's name and So	cial Security or tax
☐ Option 2 – The beneficiary may elect accompany this form, for the purpose distributions. The proceeds will be in	e of maintaining the inherited prod	ceeds for life expe		
Note: To establish required minimu Request Form.	m life expectancy distributions,	please also com	plete the Inherited	IRA Distribution
4. Substitute W-9 Form – Requ	uest for Taxpayer Identification	on Number and	Certification (TIN	I)
This section must be signed and co.	mpleted by the beneficiary.			
Under penalties of perjury, I certify that I am not subject to backup withholding IRS that I am subject to backup withho me that I am no longer subject to back FATCA code(s) entered on this form (if above if you have been notified by the report all interest and dividends on you	because: (a) I am exempt from olding as a result of a failure to up up withholding; and (3) I am a land f any) indicating that I am exem IRS that you are currently subj	n backup withholo report all interest U.S. person (inclu npt from FATCA r	ding, or (b) I have n or dividends, or (c) uding a U.S. reside eporting is correct.	ot been notified by the the IRS has notified nt alien); and (4) The Cross out item 2
NOTE: The IRS does not require your avoid backup withholding.	consent to any provision on th	nis application ot	her than the certific	cation required to
If I am a nonresident alien, I am require am not under penalties of perjury certif		Form W-8 to cert	tify my foreign statu	ıs. I understand that I
Print Name	Signature/Capacity			Date
Print Name 7194	Signature/Capacity Page 2 of 4			Date 5-2024

Federal Withholding Federal income tax will be withheld at the rate of 10% from any distribution, subject to the IRS withholding rules, unless you elect a withholding rate of 0% below or have previously elected out of withholding. Tax will be withheld on the gross amount of the payment 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. 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 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 understand that your below election will remain in effect until such time as you make a different election with the Custodian. ☐ I elect federal income tax withholding of 0%. Do not withhold federal income tax from my distributions.\* ☐ I elect federal income tax withholding of % must be a whole percent. You may elect any rate from 1% to 100%.\* See the attached Form W-4R Withholding Certificate for Nonperiodic Payments which has the Marginal Rate Tables and "Suggestion for determining withholding" instructions. You may use these tables and instructions to help you select the appropriate withholding rate. \*Generally, you can't elect less than 10% federal income tax withholding for payments to be delivered outside the United States and its possessions. State Withholding Your state of residence will determine your state income tax withholding requirements, if any. Those states with mandatory withholding may require state income tax to be withheld from payments if federal income taxes are withheld or may mandate a fixed amount regardless of your federal tax election. Voluntary states let individuals determine whether they want state taxes withheld. Some states have no income tax on retirement payments. Please consult with a tax advisor or your state's tax authority for additional information on your state requirements. If you are completing this form, your below election will remain in effect until such time as you make a different election in writing to the Custodian ☐ I elect **NOT TO** have state income tax withheld from my retirement account distribution (only for residents of states that do not require mandatory state tax 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 tax withholding). \$ 6. Payment Methods Please note: If a delivery method is not selected, or if bank documentation is required (original voided check/letter from bank) and it was not submitted, your payment will be issued as a check payable to the beneficiary and mailed to the address provided in Section 2. A. Distribution by Mail – Checks are generally mailed within two business days. □ Name and address on the account. B. Direct to Bank Distributions (Signature Guarantee required) → One-Time Distribution - May be sent to your bank electronically using 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. 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. → New Accounts – If banking information is provided below, it will automatically be added to the new account for future transactions. Please note, the registered shareholder(s) name(s) must appear on the bank account. If the registered shareholder(s) is not listed on the bank account, please contact our office for additional requirements. Please complete the following section and include banking documentation, as indicated below, to have your withdrawals electronically transmitted to your bank account. The beneficiary's name must appear on the bank account. If the beneficiary's name is not listed on the bank account, please contact our office for additional requirements. Type of Account: Checking Account - An original voided check is required. Starter checks and photocopies will not be accepted. Savings (or Checking) Account – A letter from your bank, on bank letterhead, signed by an officer of the bank,

Bank Routing Number Bank Account Number

Bank Telephone Number

confirming the banking information is required.

Bank Name

Bank Account Holder's Name(s)

# 7. 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 authorized to make these elections and that all information provided is true and accurate. The custodian is hereby authorized to act as instructed. The custodian may conclusively rely on this certification and authorization without further investigation or inquiry.

I, the undersigned, certify that I fully understand and acknowledge all tax consequences and penalties involved with the elections made on this form. I agree to hold Virtus Mutual Funds, its agents and the custodian and assigns harmless from acting upon the instructions set forth on this form.

Print Name	Signature	Date
8. Medallion Guarantee		
The signature and capacity in Section 7 m Guaranteed.	nust be Medallion	Place Stamp Here
A Medallion Guarantee Stamp may be obtained from Eligible guarantors include Commercial Banks, Trust Associations and Credit Unions, as defined by th Insurance Act and registered Broker/D	Companies, Savings e Federal Deposit	
An SVP (Signature Validation Program) Stamp ma eligible members of the Medallion Guarantee Progra Broker/Dealers, credit unions, national securities ex securities associations, clearing agencies and sav	am, including banks, changes, registered	
Notarization from a Notary Public is not a	acceptable.	
Please contact your financial institution in advance supporting documentation requiremen	I	

### Additional Documentation Requirements:

- Trust If a trust is listed as beneficiary, we require a copy of the title page, signature page and those portions of the trust document which pertain to trustee's powers and successor trustees. As an alternative, a properly executed Certificate of Trust may also be submitted.
- Estate If an estate is listed as beneficiary, we require a copy of the Letters Testamentary or Letters of Administration appointing the executor(s), personal representative(s) or administrator(s) of the estate.
- Affidavit of Domicile An Affidavit of Domicile, which can be downloaded from Virtus.com or by calling the number above, will be required in the following circumstances:
  - 1. When the address of record is an Inheritance Tax Waiver state but the executor, surviving joint tenant, beneficiary or other legally authorized party claims that the decedent was not domiciled in the address of record state at the time of
  - 2. When supporting documentation/legal paperwork (if any) submitted with the request suggests that the decedent was domiciled in an Inheritance Tax Waiver state at the time of death despite the address of record.
- Inheritance Tax Waiver An Inheritance Tax Waiver (ITW) may be required depending on the decedent's legal residence, date of death and relationship to the claimant. If the shareholder's legal residence was in one of the following states, an original ITW must accompany this form:

- *Indiana	- *Ohio	- **Pennsylvania	- Puerto Rico	- ***Tennessee
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An ITW may be required for additional states depending on certain factors. We suggest that you contact the tax agency of the decedent's state of residence to determine if the document is required prior to submitting this form.

- \* An ITW is required if the decedent passed prior to 2013.
- \*\*An ITW is not required if the assets are being transferred to the shareholder's estate. Certain other exceptions <u>may</u> apply.
- \*\*\*An ITW is required if the decedent passed prior to 2016.
- Small Estate If an estate is listed as beneficiary and the estate was not probated, we suggest that you contact your local probate court/office for the specific requirements regarding the administration of small estates for the state in which the shareholder resided at the time of his or her death.

If the state requirements allow for an affidavit, although a photocopy of the affidavit is acceptable, it must bear the affiant's original signature and original notarization and be dated within 12 months of our receipt for account balances \$50,000 and under and within 60 days for account balances over \$50,000. The affidavit must be accompanied by an original certified death certificate.

If the state requires documentation for the administration of small estates be issued by the court, although a photocopy is acceptable, it must bear the original court certification stamp or raised seal and be certified by the court or clerk of the court within 12 months of our receipt for account balances \$50,000 and under and within 60 days for account balances over \$50,000.

#### Substitute W-4R 2024 - Withholding Certificate for Nonperiodic Payments – For use with IRAs ONLY

Where instructed to provide your withholding election on "line 2" use the space provided on the attached form under "Federal Income Withholding Election."

#### 2024 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 below for more information on how to use this table.

### Single or Married filing Separately

## Married filing jointly or Qualifying surviving spouse

#### Head of household

Qualitying serving spease					
Total Income aver	Tax rate for every	Total Income over	Tax rate for every dollar more	Total Income over	Tax rate for every
Total Income over	dollar more	Total Income over	dollar more	Total Income over	dollar more
\$0	\$0	\$0	\$0	\$0	\$0
14,600	10%	29,200	10%	21,900	10%
26,200	12%	52,400	12%	38,450	12%
61,750	22%	123,500	22%	85,000	22%
115,125	24%	230,250	24%	122,400	24%
206,550	32%	413,100	32%	213,850	32%
258,325	35%	516,650	35%	265,600	35%
623,950*	37%	760,400	37%	631,250	37%

<sup>\*</sup>If married filing separately, use \$380,200 instead for this 37% rate.

General Instructions: Section references are to the Internal Revenue Code.

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 from an employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See below for the rules and options that are available for each type of payment.

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.

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 2024, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

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 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 above 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 over withholding), 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 \$62,000 without the payment. Step 1: Because your total income without the payment, \$62,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$82,000, is greater than \$61,750 but less than \$115,125, 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 \$43,700 without the payment. Step 1: Because your total income without the payment, \$43,700, is greater than \$26,200 but less than \$61,750, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$63,700 is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. The two rates differ. \$18,050 of the \$20,000 payment is in the lower bracket (\$61,750 less your total income of \$43,700 without the payment), and \$1,950 is in the higher bracket (\$20,000 less the \$18.050 that is in the lower bracket). Multiply \$18,050 by 12% to get \$2,166. Multiply \$1,950 by 22% to get \$429. The sum of these two amounts is \$2,595. This is the estimated tax on your payment. This amount corresponds to 13% of the \$20,000 payment (\$2,595 divided by \$20,000). Enter "13" on line 2.