



Required Minimum Distribution (RMD) Withdrawal

Fixed/Fixed-indexed annuities: PO Box 5420, Cincinnati OH 45201 / 800-854-3649 / 800-482-8126 Fax / Processing@mmascend.com  
Registered index-linked annuities: PO Box 5423, Cincinnati OH 45201 / 800-789-6771 / 800-807-9777 Fax / RILAProcessing@mmascend.com  
Variable annuities: PO Box 5423, Cincinnati OH 45201 / 800-789-6771 / 513-768-5115 Fax / VAPOSFaxes@mmascend.com  
Overnight Address: 191 Rosa Parks Street, Cincinnati, OH 45202  
Website: MassMutualAscend.com

To help ensure your request is processed timely and accurately, please print clearly and only in the spaces provided. Do not write outside of the boxes. If you need to provide additional information or special instructions, please attach a separate sheet of paper.

Contract Number

Contract Owner Information

First Name	Middle Initial	Last Name
Social Security Number <i>No dashes</i>	Date of Birth (MM/DD/YYYY)	

Email

If you provided an email above or we have an email address on record, you will receive status updates. Email notifications will be sent from no-reply@mmascend.com. Please remove this address from your list of blocked senders.

New Address/Phone (if applicable) *Only complete if new information. We will update our records to reflect what is entered.*

Address		
City	State	Zip
Home Phone Number <i>No dashes</i>	Cell Phone Number <i>No dashes</i>	

## RMD Election (select only one)

---

- A. Withdrawal for contract's current year RMD of \$  
(net of charges)
- B. Withdrawal for contract's current year RMD (net of charges), as calculated by the Company. *This option is only available if we have a prior year-end value for the contract.*
- C. Automated RMD withdrawals from the annuity contract under the standard method. *Not available for EquiLink or MultiLink products.*

**Payment frequency:**      Monthly      Quarterly      Semi-annually      Annually  
*Annual payments are required unless payment is made by direct deposit. Annual payments also required for the Legacy Income Option rider. If a payment frequency is not indicated, annual payments will be made.*

Date (MM/DD/YYYY)

### Start payments effective

*If no date is specified or the specified date does not allow time for processing, the start date will be the date we process your request.*

Automated RMD withdrawals will be reduced by any withdrawals taken from the annuity contract during the same calendar year. **Your automated RMD withdrawal will be insufficient if a rollover or direct transfer occurs before receiving your full RMD.** You will need to request an additional withdrawal to make up for any shortfall.

## Additional Election Considerations (only applies if you selected Option B or C above)

---

**For contracts issued in the current calendar year,** you must provide us with the prior 12/31 Fair Market Value. To locate this value, contact your previous provider. If the contract was funded through a partial exchange or partial transfer, provide only that part of the 12/31 Fair Market Value that was sent to us.

Prior 12/31 Fair Market Value: \$

**If your spouse is more than 10 years younger than you** and the sole beneficiary of the contract, and you would like to take a lesser withdrawal, please provide:

Spouse's First Name      Middle Initial      Spouse's Last Name

Spouse's Date of Birth (MM/DD/YYYY)      Spouse's Social Security Number **No dashes**

**If this is your first RMD and a prior year's RMD is needed,** please check the box below if you would like to receive a prior and current year RMD payment.

I want to include last year's RMD with my first RMD payment.

**For a contract issued in the current year:** If a prior year's RMD is needed, you must take a partial withdrawal for the RMD for both the prior and current year.

---

## Income Tax Withholding

---

Federal tax withholding is not mandatory. The **default withholding amount is 10%** of the taxable amount. Whether or not taxes are withheld, you will be liable for payment of all applicable federal and state income taxes on the taxable portion of the distribution. You may also be subject to penalties under the estimated tax rules if your withholding and estimated tax payments, if any, are not adequate.

**If you do not elect out of withholding or do not attach the IRS W-4R form or make a state election**, then we will withhold the default or mandatory amount, notwithstanding any prior election you may have made for a prior withdrawal.

Any withholding election will remain in effect until revoked. You may revoke any withholding election for payments not yet distributed by notifying the Company in writing at any time.

### Federal Income Tax Withholding (select only one):

Do not withhold federal tax, unless required

I am attaching IRS Form W-4R. **Withhold based on that election.**

I am not attaching IRS Form W-4R. **The default or mandatory amount, if any, will be withheld.**

### State Income Tax Withholding (select only one):

Do not withhold state tax, unless required

I request state withholding of: \_\_\_\_\_ %

I am not specifying a state withholding percentage. **The default or mandatory amount, if any, will be withheld.**

## Payment Information (complete section A or B)

---

### A). For payments to owner (select only one)

Payments by check

Direct deposit to a personal checking or savings account

Not available for one-time withdrawals greater than \$100,000. You authorize the Company and the financial institution indicated below to adjust any over-deposit made to your account. **If your account information cannot be verified, a check will be sent to your address of record in place of the direct deposit.**

Account type:          Checking          Savings

Financial Institution Name

Routing Number (9 digits required)

Account Number

List Names of ALL Owners on the Financial Institution Account

---

**B). For payments to a brokerage account (select only one)**

If you have named a brokerage firm as your payee, **you must submit documentation** verifying the owner and account number of the brokerage account, such as an account statement or a letter from your brokerage firm. If not received, payment will be sent by check to owner.

Although funds are being directed to the Brokerage Account for your benefit, **the distribution is a taxable and reportable event** to the contract owner.

Payments by check

Brokerage Firm Name

Brokerage Account Number

Brokerage Firm's Mailing Address

City

State

Zip

Direct deposit to brokerage account

Not available for one-time withdrawals greater than \$100,000. You also authorize the Company and the brokerage account indicated below to adjust any over-deposit made to your account.

Brokerage Firm Name

Routing Number (9 digits required)

Account Number

---

## Acknowledgment and Signature Authorization

---

I have read and agreed to the RMD Withdrawals Terms and Conditions. I understand I am personally responsible for any income tax implications of my request. I agree to hold the Company harmless against any and all claims made by reason of its compliance with this request.

Pursuant to the transaction requested, the Company may use a third party service provider to verify your identity or confirm your ownership of the account to which you are requesting funds to be transferred.

Signature of Owner

Date (MM/DD/YYYY)

Signature of Power of Attorney(s)/Authorized Representative(s)  
signing on behalf of Owner

Date (MM/DD/YYYY)

### For requests signed by a Power of Attorney (POA):

- We must receive a copy of the POA document.
- The POA Certification (form AAG2816) must also be completed or on file. If you need a copy, please log into **MassMutualAscend.com**

## Plan Administrator Certification and Authorization

---

This section only needs to be completed for 403(b) TSA, 401 Pension/Profit Sharing/401(k), or 457 tax qualified contracts.

The Plan Administrator should complete this section.

Name of Employer Plan

Name of Plan Administrator

Plan Administrator Phone

The Plan Administrator certifies that these payments are permitted under the employer's plan. The Plan Administrator authorizes the Company to process the request as indicated above.

Plan Administrator Signature

Date (MM/DD/YYYY)

---

Signature Notarization or Signature Guarantee (if applicable)

---

Your signature on this request must be notarized or signature guaranteed below if you purchased your contract electronically with an electronic signature and you have not previously submitted a notarized or guaranteed signature, or as requested by the Company.

**Option 1: Notarized Signature**

State of

County of

Date (MM/DD/YYYY)

This RMD Withdrawal Form was acknowledged before me on

Name of each person acknowledging his/her signature to the Notary

by

Signature of Notary Public

Seal

My Commission expires (MM/DD/YYYY)

Option 2: Signature Guarantee

---

SIGNATURE GUARANTEED BY: Stamp or Seal of Eligible Guarantor Institution with Authorized Signature

You may have signature guarantee provided by a bank, savings and loan association, trust company, credit union, broker/dealer or any other "eligible guarantor institution" as defined under the rules adopted by the Securities and Exchange Commission. These institutions often participate in signature guarantee medallion programs such as the Securities Transfer Agent Medallion Program (STAMP).

---



## Required Minimum Distributions (RMD) Withdrawal Terms and Conditions

### Qualification

RMD withdrawals are only available from tax-qualified annuity contracts. RMD withdrawals are only available in a year where you have an RMD due.

For automated withdrawals, the contract must meet the minimum value required for an annuity payout benefit of the account or annuity value. Automated withdrawals are not available for EquiLink or MultiLink products.

### Payment Amounts and Terms

**Duration of Automated Payments:** Unless changed or terminated, automated RMD withdrawals will continue for your life.

Automated RMD withdrawals will terminate if the Surrender Value of the contract is reduced below \$500 and we will send you a lump sum payment.

**Automated Program Changes and Termination:** The company reserves the right to change or terminate the automated RMD withdrawal program at any time.

**Other Contract Withdrawals:** A partial withdrawal will reduce the amount of the automated RMD withdrawals to be made later in that year.

**403(b) TSA Minimum:** For a 403(b) Tax Sheltered Annuity (TSA), if we have a 12/31/86 balance, we will calculate the RMD amount using special tax rules that may reduce your RMD obligation.

### Taxes

Whether or not taxes are withheld, you will be liable for payment of all applicable federal and state income taxes on the taxable portion of the distribution. You may also be subject to penalties under the estimated tax rules if your withholding and estimated tax payments, if any, are not adequate.

### Effect on Other Annuity Contract Provisions

**Charges and Adjustments:** Early withdrawal charges (which may also be referred to as surrender charges, premature use charges, and/or contingent deferred sales charges), base contract proportionality adjustments, if any, and market value adjustments, if any, will be waived on an amount equal to the automated RMD withdrawal. These charges and adjustments will not be waived on one-time withdrawals. Proportionality adjustments, if any, under a living benefit rider or death benefit rider will not be waived on automated RMD withdrawals or one-time withdrawals. If the contract is surrendered or an annuity payout benefit begins, any charges and adjustments that were waived for automated RMD withdrawals within the last 12 months will be retroactively applied. A partial withdrawal will reduce the amount of the automated RMD payments to be made later in that year.

**Loans:** If you choose automated RMD withdrawals and an outstanding loan prevents us from taking an automated RMD withdrawal, we will default and offset the entire loan balance. If you choose a one-time withdrawal and an outstanding loan prevents us from paying the full amount, we will offset the RMD shortfall against the loan. Any offset will be treated as taxable income to you.

**Effect on Bonuses:** RMD withdrawals may have a negative impact on contracts with a persistency or annuitization bonus. You may want to consider an annuity payout benefit instead.

**Effect on Fixed-Indexed Contracts:** Any RMD withdrawal from an indexed strategy before the end of the term will not be credited interest for that term.

**Contract Minimums:** We will waive the minimum withdrawal amount for RMD withdrawals. For automated RMD withdrawals, we will also waive the minimum Surrender Value requirement.





**Withholding Certificate for Nonperiodic Payments and  
Eligible Rollover Distributions****Give Form W-4R to the payer of your retirement payments.**

OMB No. 1545-0074

**2025**

<b>1a</b> First name and middle initial	Last name	<b>1b</b> Social security number
---	-----------	----------------------------------

Address

City or town, state, and ZIP code

Your withholding rate is determined by the type of payment you will receive.

- 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% on line 2. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its territories.
- For an eligible rollover distribution, the default withholding rate is 20%. You can choose a rate greater than 20% by entering the rate on line 2. You may not choose a rate less than 20%.

See page 2 for more information.

<b>2</b>	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) . . . . .	<b>2</b>	%
----------	--	----------	---

**Sign  
Here****Your signature** (This form is not valid unless you sign it.)**Date****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](http://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.**2025 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%
15,000	10%	30,000	10%	22,500	10%
26,925	12%	53,850	12%	39,500	12%
63,475	22%	126,950	22%	87,350	22%
118,350	24%	236,700	24%	125,850	24%
212,300	32%	424,600	32%	219,800	32%
265,525	35%	531,050	35%	273,000	35%
641,350*	37%	781,600	37%	648,850	37%

\* If married filing separately, use \$390,800 instead for this 37% rate.

## 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.