

New York Life Insurance and Annuity Corporation AARP Operations Claims Service P.O. Box 30713 Tampa, FL 33630-3713

Dear Beneficiary:

Please accept our condolences on your recent loss. We understand this is a difficult time, and we hope that we can alleviate any concerns you may have about your claim.

This special form is designated to help you complete your claim quickly and easily. Please return your signed Claim Form with a certified copy of the death certificate so we can complete the processing of your claim.

If you are also the beneficiary of any other insurance policy or annuity with New York Life Insurance Company or its affiliates that insure the deceased, you should contact those offices directly to file a claim.

New York Life Insurance and Annuity Corporation, issuer of the annuity product for the AARP Fixed Annuity Program, takes pride in the speed with which we pay claims. Most payments on claims are sent to the beneficiaries within five business days from the date the Company receives the completed Claim Form and death certificate in its Claims office.

Please be assured the AARP Fixed Annuity Program is committed to completing the processing of your claim quickly once we receive all the necessary information and documentation.

If you have any questions or need assistance, please feel free to contact our Claims Department at **1-800-590-1504**, between the hours of 8am to 5pm Eastern Standard Time Monday through Friday.

Sincerely,

PH-0

Matt Pittarelli Corporate Vice President, New York Life For the AARP Fixed Annuity Program

HOW TO COMPLETE YOUR CLAIM FORM

Please read this page before you start to complete your Claim Form

To complete the processing of your claim, we must have a fully completed Claim Form from each beneficiary, one certified death certificate and other documents as appropriate for the claim.

SECTION 1

Please be sure to enter all annuity contract numbers on the Claim Form. Information about the deceased is necessary for purposes of identification. Please do not send the original contracts.

SECTION 2

Information about the Beneficiary is necessary for claims processing.

Taxpayer Identification Number: The Federal government requires us, and all other financial institutions, to report the interest we pay you. Therefore, we are required to obtain your Social Security or other Taxpayer Identification Number, which you must certify under penalty of perjury. If you are applying for a tax number, please write "applied for" in the appropriate space. If you fail to supply us with an identification number, the Federal government requires us to withhold a specified percentage from the interest payments. You can claim the amount withheld as a credit on your tax return.

Some persons may have been notified by the Internal Revenue Service that they are subject to "back-up withholding" because in the past they did not report all their interest or dividends. If you have been so notified, and a back-up withholding order has not been rescinded, you must check the Back-up Withholding section right below your Social Security or Taxpayer Identification Number. We may contact you for more information if there are any questions about your Taxpayer Identification Number or back-up withholding status, or if you are a non-resident alien or foreign entity.

Claims by an Estate: If the claim is being filed by an Executor or Administrator, he or she must sign the Claim Form and submit a copy of the appointment papers. Be sure to use the Estate's tax number.

Assignments: If you have assigned all or any portion of the benefit to a funeral home for final expenses, please include that assignment. If the deceased assigned the contract to a bank or other financial institution, an authorized representative of that institution must sign the Claim Form.

If the Beneficiary is a Minor: If there is a legal guardian for a minor, the guardian should sign the Claim Form and submit a copy of the guardianship papers. If no legal guardian has been appointed, contact us for further information.

SECTION 3

Special Spousal Election: Surviving spouses may have unique privileges if they are the beneficiaries of annuities. A spouse is defined as a member of the opposite sex under federal law Defense of Marriage Act, or, DOMA.

Federal tax laws currently allow earnings on most annuities to accumulate on a tax-deferred basis. But upon the death of the original owner or annuitant, beneficiaries may face paying income taxes on all or part of the amount distributed, depending on whether the annuity was purchased with pretax or after-tax dollars. You may wish to ask your tax advisor for details.

In most cases, present laws permit surviving spouses to continue an individual tax-deferred annuity and keep its taxdeferred status intact. In effect, this lets a surviving spouse maintain the contract and avoid paying taxes until he or she decides to make a withdrawal or surrender the contract.

If you are the surviving spouse and you would like to take advantage of this option, you must indicate that you wish to continue the annuity by checking the appropriate box in Section 3. When you do this, we will register the annuity in your name and it will continue under the same terms and conditions as the original contract.

SECTION 4

Please sign the Claim Form in the same manner as you would normally sign your checks. Your signature will be used to verify instructions you give us in the future.

Illinois Interest Statement:

If the contract was issued in Illinois, you will be paid 10% interest, from the date of death, if your claim is not paid within 31 days of receiving the necessary proof needed to settle the claim.

Please complete the attached W-4P – Withholding Certificate for Pension or Annuity payments.

Please return the W-4P with your completed claim form. We will be required to withhold 10% of the taxable part of the payment if we have not received your election not to have income tax withheld by the time payment is made to you.

Fraud Statements

Arizona Fraud Warning

For your protection Arizona law requires the following to appear on this form. Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.

California Fraud Warning

For your protection California Law requires the following to appear on this form: any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Colorado Fraud Warning

It is unlawful to knowingly provide false, incomplete or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

District of Columbia Fraud Warning

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Florida Fraud Warning

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Maryland Fraud Warning

Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and may be subject to fines and confinement in prison.

New Jersey Fraud Warning

Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties.

Oregon Fraud Warning

Willfully falsifying material facts on an application or claim may subject you to criminal penalties.

Pennsylvania Fraud Warning

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Puerto Rico Fraud Warning

Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation with the penalty of a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. If aggravating circumstances are present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

Virginia Fraud Warning

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Fraud Warning For All Other States

Any person who knowingly and with the intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties. Penalties may include imprisonment, fines, or a denial of insurance benefits if a person provides false information.





<u>Mail to:</u> PO Box 30713 Tampa FL 33630-3713

Month

Day

Year

1. Please tell	us about the	Deceased					
Name:							
First			Middle Initial	last			
Date of Death:		(Contract Numbe	r:			
Ma	onth Day	Year					
Cause of Death:	□ Natural	□ Accident*	□ Homicide*	□ Suicide*	🗆 Unknown	□ Othe	r
	* Please atta	ch copies of poli	ice and corone	r's report and	any relevant r	news arti	cles.
2. Please tell	us about the	^		ł			
Name:				Sex:	□ Male		Female
Mailing				Home	Phone No:	()	
Address: Street			Apartment No.				
				Busin	ess Phone No:	()	
City		State	Zip				
Beneficiary Social	Security or						
Taxpayer Identific	ation Number:			Date	of Birth:	/	

Check only if statement below applies:

□ I have been notified by the Internal Revenue Service that I am subject to back-up withholding as a result of failure to report all interest or dividends.

In what capacity are you making this claim?	□ Beneficiary	Executor	Trustee	□ Assignee	Other
Relationship to the Deceased:	□ Spouse	□ Child	□ Grandchild	□ Parent	□ Other

3. Settlement Option

If you are a surviving spouse and a sole primary beneficiary of an individual tax-deferred annuity, please check one:

- I want to continue the annuity contract(s) and defer taxes. Please continue the contract(s) in my name.
- □ I do not wish to take advantage of the special spousal tax deferral option. I recognize that income taxes may be payable, and taxes may be withheld on some or all of the funds I receive.

4. Beneficiary's Signature

I have read and understand the Fraud Statement that is applicable to the state in which I reside. **New York Residents**: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

- I certify, under penalty of perjury, that the Social Security or Taxpayer Identification Number and Back-up Withholding status information in Section 2 are correct. I also certify that I am a U.S. person, including a U.S. resident alien (a non-US person must complete form W8-BEN).
- The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid back-up withholding.

Signature

^{*}This Claim Form may have been sent before New York Life Insurance and Annuity Corporation (NYLIAC) has determined whether any annuity contract was in force at the time of death, and to whom the proceeds may be payable. NYLIAC retains the right to make such determination.



Purpose. Form W-4P is for U.S. citizens, resident aliens, or their estates who are recipients of pensions, annuities (including commercial annuities), and certain other deferred compensation. Use Form W-4P to tell payers the correct amount of federal income tax to withhold from your payment(s). You also may use Form W-4P to choose (a) not to have any federal income tax withheld from the payment (except for eligible rollover distributions, or payments to U.S. citizens delivered outside the United States or its possessions) or (b) to have an additional amount of tax withheld.

Your options depend on whether the payment is periodic, nonperiodic, or an eligible rollover distribution, as explained on

pages 3 and 4. Your previously filed Form W-4P will remain in effect if you do not file a Form W-4P for 2011.

What do I need to do? Complete lines A through G of the Personal Allowances Worksheet. Use the additional worksheets on page 2 to further adjust your withholding allowances for itemized deductions, adjustments to income, any additional standard deduction, certain credits, or multiple pensions/more-than-one-income situations. If you do not want any federal income tax withheld (see *Purpose* above), you can skip the worksheets and go directly to the Form W-4P below. Sign this form. Form W-4P is not valid unless you sign it.

noi	nperiodic, or an eligible rollover distribution, as	•			
_		I Allowances Worksheet (Keep for your records.)			•
Α	Enter "1" for yourself if no one else can (• You are single and have	claim you as a dependent	• •		Α
	You are married, have or				
в	Enter "1" if: spouse has no income sub				в
5		ond pension or a job or your spouse's	• •		-
		otal of all) is \$1,500 or less.			
С		v choose to enter "-0-" if you are married and have either a	a spous	e who has	
	income subject to withholding or more t	han one source of income subject to withholding. (Enterin	י. יg ^י י-0-	' may help	
	you avoid having too little tax withheld.)				С
D	Enter number of dependents (other than	your spouse or yourself) you will claim on your tax return			D
Е	Enter "1" if you will file as head of house	hold on your tax return			E
F	Child Tax Credit (including additional ch	ild tax credit). See Pub. 972, Child Tax Credit, for more inf	ormatic	on.	
	•	61,000 (\$90,000 if married), enter "2" for each eligible chil	d; then	less "1" if	
	you have three or more eligible children.				
		61,000 and \$84,000 (\$90,000 and \$119,000 if married), e			_
•		ave six or more eligible children			F
G		ere. (Note. This may be different from the number of exer	nptions	you claim	G
		or claim adjustments to income and want to reduce y	· ·		u
		nd Adjustments Worksheet on page 2.	our wit	innoiding,	
		n one source of income subject to withholding or a	enous	o with	
		ithholding and your combined income from all sources			
		arried), see the Multiple Pensions/More-Than-One-Inc		0	
		to avoid having too little tax withheld.			
		e situations applies, stop here and enter the number from	m line (G on line 2	
	of Form W-4P below.				
	Cut here and give Form W-4	P to the payer of your pension or annuity. Keep the top part fo	or your i	records.	
	₩-4 Ρ		ſ	OMB No. 15	45-0074
For		Withholding Certificate for			
		Pension or Annuity Payments		201	
	Partment of the Treasury rnal Revenue Service ► For Pr	ivacy Act and Paperwork Reduction Act Notice, see page 4.			
Ту	be or print your first name and middle initial.	Last name	Your	social security	number
	me address (number and street or rural route)		Claim	or identification	number
по	The address (number and street of rural route)		(if any) of your pension or		
	y or town, state, and ZIP code		annuity contract		
OIL	y of town, state, and zir code				
Co	mplete the following applicable lines.				
1	Check here if you do not want any federal ir	ncome tax withheld from your pension or annuity. (Do not comp	lete line	es 2 or 3.) ►	
2	Total number of allowances and marita	I status you are claiming for withholding from each pe	riodic	pension or	
	annuity payment. (You may also designat	te an additional dollar amount on line 3.)			
		d 🗌 Married, but withhold at higher "Single" rate		ò	nter number fallowances.)
3		held from each pension or annuity payment. (Note. For p		payments,	anowanoc3.)
	you cannot enter an amount here without	t entering the number (including zero) of allowances on line	≥2.) .	► \$	
Yo	ur signature 🕨	Date 🕨			

Form W-4P (2011)

	Deductions and Adjustments Worksheet							
No	Note. Use this worksheet only if you plan to itemize deductions or claim certain credits or adjustments to income.							
1	1 Enter an estimate of your 2011 itemized deductions. These include qualifying home mortgage interest,							
	charitable contributions, state and local taxes, medical expenses in excess of 7.5% of your income, and miscellaneous deductions	1	\$					
	<pre>\$11,600 if married filing jointly or qualifying widow(er)</pre>							
2	Enter: \$ 8,500 if head of household	2	\$					
	\$ 5,800 if single or married filing separately							
3	Subtract line 2 from line 1. If zero or less, enter "-0-"	3	\$					
4	Enter an estimate of your 2011 adjustments to income and any additional standard deduction (see							
	Pub. 919)	4	\$					
5	Add lines 3 and 4 and enter the total. (Include any credit amounts from the Converting Credits to							
	Withholding Allowances for 2011 Form W-4 Worksheet in Pub. 919.)	5	\$					
6		6	\$					
7	Subtract line 6 from line 5. If zero or less, enter "-0-"	7	\$					
8	Divide the amount on line 7 by \$3,700 and enter the result here. Drop any fraction	8						
9	Enter the number from the Personal Allowances Worksheet, line G, page 1	9						
10	Add lines 8 and 9 and enter the total here. If you use the Multiple Pensions/More-Than-One-Income							
	Worksheet, also enter this total on line 1 below. Otherwise, stop here and enter this total on Form							
	W-4P, line 2, page 1	10						
	Multiple Pensions/More-Than-One-Income Worksheet							
	Note. Complete only if the instructions under line G, page 1, direct you here. This applies if you (and your spouse if married filing a joint return) have more							
tha	n one source of income subject to withholding (such as more than one pension, or a pension and a job, or you have a pension	and yo	our spouse works).					

1	Enter the number from line G, page 1 (or from line 10 above if you used the Deductions and		
	Adjustments Worksheet)	1	
2	Find the number in Table 1 below that applies to the LOWEST paying pension or job and enter it here. However , if you are married filing jointly and the amount from the highest paying pension or job is \$65,000 or less, do not enter more than "3."	2	
3	If line 1 is more than or equal to line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4P, line 2, page 1. Do not use the rest of this worksheet	3	
No	te. If line 1 is less than line 2, enter "-0-" on Form W-4P, line 2, page 1. Complete lines 4 through 9 below t	to figure the	
ado	ditional withholding amount necessary to avoid a year-end tax bill.		
4	Enter the number from line 2 of this worksheet		
5	Enter the number from line 1 of this worksheet		
6	Subtract line 5 from line 4	6	
7	Find the amount in Table 2 below that applies to the HIGHEST paying pension or job and enter it here	7 \$	
8	Multiply line 7 by line 6 and enter the result here. This is the additional annual withholding needed	8 \$	
9	Divide line 8 by the number of pay periods remaining in 2011. For example, divide by 12 if you are paid		
	every month and you complete this form in December 2010. Enter the result here and on Form W-4P		

every month and you complete this form in December 2010. Enter the result here and on Form W-4P, line 3, page 1. This is the additional amount to be withheld from each payment

Table 1				Table 2			
Married Filing Jointly		All Others		Married Filing Jointly		All Others	
If wages from LOWEST paying job are –	Enter on line 2 above	If wages from LOWEST paying job are—	Enter on line 2 above	If wages from HIGHEST paying job are—	Enter on line 7 above	If wages from HIGHEST paying job are—	Enter on line 7 above
\$0 - \$5,000	0	\$0 - \$8,000	0	\$0 - \$65,000	\$560	\$0 - \$35,000	\$560
5,001 - 12,000	1	8,001 - 15,000	1	65,001 - 125,000	930	35,001 - 90,000	930
12,001 - 22,000	2	15,001 - 25,000	2	125,001 - 185,000	1,040	90,001 - 165,000	1,040
22,001 - 25,000	3	25,001 - 30,000	3	185,001 - 335,000	1,220	165,001 - 370,000	1,220
25,001 - 30,000	4	30,001 - 40,000	4	335,001 and over	1,300	370,001 and over	1,300
30,001 - 40,000	5	40,001 - 50,000	5				
40,001 - 48,000	6	50,001 - 65,000	6				
48,001 - 55,000	7	65,001 - 80,000	7				
55,001 - 65,000	8	80,001 - 95,000	8				
65,001 - 72,000	9	95,001 - 120,000	9				
72,001 - 85,000	10	120,001 and over	10				
85,001 - 97,000	11						
97,001 - 110,000	12						
110,001 - 120,000	13						
120,001 - 135,000	14						
135,001 and over	15						

Page **2**

9\$

Additional Instructions

Section references are to the Internal Revenue Code.

When should I complete the form? Complete Form W-4P and give it to the payer as soon as possible. Get Pub. 919, How Do I Adjust My Tax Withholding, to see how the dollar amount you are having withheld compares to your projected total federal income tax for 2011. You also may use the IRS Withholding Calculator on the IRS website at *www.irs.gov/individuals* for help in determining how many withholding allowances to claim on your Form W-4P.

Multiple pensions/more than one income. To figure the number of allowances that you may claim, combine allowances and income subject to withholding from all sources on one worksheet. You may file a Form W-4P with each pension payer, but do not claim the same allowances more than once. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4P for the highest source of income subject to withholding and zero allowances are claimed on the others.

Other income. If you have a large amount of income from other sources not subject to withholding (such as interest, dividends, or capital gains), consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Call 1-800-TAX-FORM (1-800-829-3676) to get Form 1040-ES and Pub. 505, Tax Withholding and Estimated Tax. You also can get forms and publications at IRS.gov.

If you have income from wages, see Pub. 919 to find out if you should adjust your withholding on Form W-4 or Form W-4P.

Note. Social security and railroad retirement payments may be includible in income. See Form W-4V, Voluntary Withholding Request, for information on voluntary withholding from these payments.

Withholding From Pensions and Annuities

Generally, federal income tax withholding applies to the taxable part of payments made from pension, profit-sharing, stock bonus, annuity, and certain deferred compensation plans; from individual retirement arrangements (IRAs); and from commercial annuities. The method and rate of withholding depend on (a) the kind of payment you receive, (b) whether the payments are delivered outside the United States or its commonwealths and possessions, and (c) whether the recipient is a nonresident alien individual, a nonresident alien beneficiary, or a foreign estate. Qualified distributions from a Roth IRA are nontaxable and, therefore, not subject to withholding. See page 4 for special withholding rules that apply to payments outside the United States and payments to foreign persons.

Because your tax situation may change from year to year, you may want to refigure your withholding each year. You can change the amount to be withheld by using lines 2 and 3 of Form W-4P.

Choosing not to have income tax withheld. You (or in the event of death, your beneficiary or estate) can choose not to have federal income tax withheld from your payments by using line 1 of Form W-4P. For an estate, the election to have no income tax withheld may be made by the executor or personal representative of the decedent. Enter the estate's employer identification number (EIN) in the area reserved for "Your social security number" on Form W-4P.

You may not make this choice for eligible rollover distributions. See *Eligible rollover distribution*-20% *withholding* on page 4.

Caution. There are penalties for not paying enough federal income tax during the year, either through withholding or estimated tax payments. New retirees, especially, should see Pub. 505. It explains your estimated tax requirements and describes penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your pension or annuity using Form W-4P.

Periodic payments. Withholding from periodic payments of a pension or annuity is figured in the same manner as withholding from wages. Periodic payments are made in installments at regular intervals over a period of more than 1 year. They may be paid annually, quarterly, monthly, etc.

If you want federal income tax to be withheld, you must designate the number of withholding allowances on line 2 of Form W-4P and indicate your marital status by checking the appropriate box. Under current law, you cannot designate a specific dollar amount to be withheld. However, you can designate an additional amount to be withheld on line 3.

If you do not want any federal income tax withheld from your periodic payments, check the box on line 1 of Form W-4P and submit the form to your payer. However, see *Payments to Foreign Persons and Payments Outside the United States* on page 4.

Caution. If you do not submit Form W-4P to your payer, the payer must withhold on periodic payments as if you are married claiming three withholding allowances. Generally, this means that tax will be withheld if your pension or annuity is at least \$1,600 a month.

If you submit a Form W-4P that does not contain your correct taxpayer identification number (TIN), the payer must withhold as if you are single claiming zero withholding allowances even if you checked the box on line 1 to have no federal income tax withheld.

There are some kinds of periodic payments for which you cannot use Form W-4P because they are already defined as wages subject to federal income tax withholding. These payments include retirement pay for service in the U.S. Armed Forces and payments from certain nonqualified deferred compensation plans and deferred compensation plans described in section 457 of tax-exempt organizations. Your payer should be able to tell you whether Form W-4P applies.

For periodic payments, your Form W-4P stays in effect until you change or revoke it. Your payer must notify you each year of your right to choose not to have federal income tax withheld (if permitted) or to change your choice.

Nonperiodic payments—10% withholding. Your payer must withhold at a flat 10% rate from nonperiodic payments (but see *Eligible rollover distribution—20% withholding* on page 4) unless you choose not to have federal income tax withheld. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. You can choose not to have federal income tax withheld from a nonperiodic payment (if permitted) by submitting Form W-4P (containing your correct TIN) to your payer and checking the box on line 1. Generally, your choice not to have federal income tax withheld will apply to any later payment from the same plan. You cannot use line 2 for nonperiodic payments. But you may use line 3 to specify an additional amount that you want withheld.

Caution. If you submit a Form W-4P that does not contain your correct TIN, the payer cannot honor your request not to have income tax withheld and must withhold 10% of the payment for federal income tax.

Eligible rollover distribution – 20% withholding. Distributions you receive from qualified pension or annuity plans (for example, 401(k) pension plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over tax free to an IRA or qualified plan are subject to a flat 20% federal withholding rate. The 20% withholding rate is required, and you cannot choose not to have income tax withheld from eligible rollover distributions. Do not give Form W-4P to your payer unless you want an additional amount withheld. Then, complete line 3 of Form W-4P and submit the form to your payer.

Note. The payer will not withhold federal income tax if the entire distribution is transferred by the plan administrator in a direct rollover to a traditional IRA, or another eligible retirement plan (if allowed by the plan) such as a qualified pension plan, governmental section 457(b) plan, section 403(b) contract, or tax-sheltered annuity.

Distributions that are (a) required by law, (b) one of a specified series of equal payments, or (c) qualifying "hardship" distributions are **not** "eligible rollover distributions" and are not subject to the mandatory 20% federal income tax withholding. See Pub. 505 for details. See also *Nonperiodic payments* – 10% withholding on page 3.

Changing Your "No Withholding" Choice

Periodic payments. If you previously chose not to have federal income tax withheld and you now want withholding, complete another Form W-4P and submit it to your payer. If you want federal income tax withheld at the rate set by law (married with three allowances), write "Revoked" next to the checkbox on line 1 of the form. If you want tax withheld at any different rate, complete line 2 on the form.

Nonperiodic payments. If you previously chose not to have federal income tax withheld and you now want withholding, write "Revoked" next to the checkbox on line 1 and submit Form W-4P to your payer.

Payments to Foreign Persons and Payments Outside the United States

Unless you are a nonresident alien, withholding (in the manner described above) is required on any periodic or nonperiodic payments that are delivered to you outside the United States or its possessions. You cannot choose not to have federal income tax withheld on line 1 of Form W-4P. See Pub. 505 for details.

In the absence of a tax treaty exemption, nonresident aliens, nonresident alien beneficiaries, and foreign estates generally are subject to a 30% federal withholding tax under section 1441 on the taxable portion of a periodic or nonperiodic pension or annuity payment that is from U.S. sources. However, most tax treaties provide that private pensions and annuities are exempt from withholding and tax. Also, payments from certain pension plans are exempt from withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for details. A foreign person should submit Form W-8BEN, Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding, to the payer before receiving any payments. The Form W-8BEN must contain the foreign person's TIN.

Statement of Federal Income Tax Withheld From Your Pension or Annuity

By January 31 of next year, your payer will furnish a statement to you on Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc., showing the total amount of your pension or annuity payments and the total federal income tax withheld during the year. If you are a foreign person who has provided your payer with Form W-8BEN, your payer instead will furnish a statement to you on Form 1042-S, Foreign Person's U.S. Source Income Subject to Withholding, by March 15 of next year.

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 federal income tax withholding from periodic pension or annuity payments based on your withholding allowances and marital status, (b) request additional federal income tax withholding from your pension or annuity, (c) choose not to have federal income tax withheld, when permitted, or (d) change or revoke a previous Form W-4P. 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). Providing false or 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 possessions 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.