2025 REQUIRED MINIMUM DISTRIBUTION FORM

For the 2025 calendar year and all subsequent years, you may be required to have certain amounts distributed from your Individual Retirement Account (IRA). If you fail to withdraw the Required Minimum Distribution (RMD), you may be penalized by the IRS up to 25% of the RMD that remains undistributed. It is the sole responsibility of the IRA holder to make sure that your RMD is satisfied every year.

ACCOUNT INFORMATION

Account Holder Name _____

AITC Account Number _____

Date of Birth _____

Social Security Number – Last 4 Digits _____

Phone Number _____

Email Address, if applicable _____

BENEFICIARY & CONTACT INFORMATION UPDATES

If you need to change the beneficiary designation, update the address or other contact information on your AITC account, please contact an AITC Client Advocate at 800-241-5568 or you may go to our website at https://aitc.argentfinancial.com to access our Change of Beneficiary and/or Contact Information Update Forms. The completed form(s) may be faxed to 678-274-1805.

RMD ELECTION / AMOUNT

Please select only one option below.

☐ Distribution amount equal to AITC calculated RMD amount for 2025 only.

☐ Distribution amount equal to AITC calculated RMD amount for 2025 and adjusted for all future years to meet annual RMD.
****Note: Recurring distributions for RMD cannot occur in January.**

☐ **OTHER**: Specify Total Amount to be Distributed: $_____

☐ **Distribution Waiver:** I hereby notify AITC that I will satisfy my RMD from an IRA in my name at another institution. I understand that by making this election, AITC will not distribute my RMD for this and any future years until I notify AITC in writing I wish to change this option.

RMD DISTRIBUTION – Payment Method

Please elect how you would like to receive your RMD from AITC. Please note, if you choose the check or ACH distribution option below, we will distribute per your instructions based on available cash at the time of the elected distribution date. It is the account holder's responsibility to request additional funds and / or in-kind distributions (if needed) to satisfy your RMD due to insufficient cash.

Payment Frequency: ☐ Single ☐ Semi-Annual ☐ Quarterly ☐ Monthly

Payments are to begin: ☐ Immediately or on ☐ Date _____

RMD DISTRIBUTION – Payment Method Continued

☐ **Via Check to my address of record**

☐ **Via ACH to my bank account**

Bank Name (Required): _____

Bank City, State (Required): _____

Bank Routing Number (Required): _____

Account Name at Bank (Required):_____

Bank Account Number (Required): _____

Checking or Savings (Required – check one): Checking ☐ Savings ☐

☐ **Via Re-Registration / In-Kind Distribution (Non-Cash Payment). Taxes cannot be withheld from In-Kind Distributions.**

Name of Asset to be re-registered: _____

Number of units/shares:_____

NOTE: For a Charitable Distribution, please contact an AITC Client Advocate at 800-241-5568 or you may go to our Website at https://aitc.argentfinancial.com/forms to access our Charitable Distribution Request Form.

TAX WITHHOLDING ELECTION - REQUIRED

FEDERAL INCOME TAX WITHHOLDING (Form W-4P/OMB No. 1545-0074):

Generally, federal income tax withholding applies to the taxable part of payments made from individual retirement accounts (IRAs). The method and rate of withholding depend on (a) the kind of payment you receive; (b) whether the payments are to be delivered outside the United States or its possessions; and (c) whether the recipient is a nonresident alien individual, a nonresident alien beneficiary, or a foreign estate. For payments delivered outside of the U.S., please contact an AITC Client Advocate team member for assistance.

Unless you elect otherwise below, 10% federal income tax will be withheld from payments from your AITC IRA. This election will be in effect until you change it. You may change or revoke this election at any time and as often as you wish. You may elect out of this withholding by checking the appropriate box below. **If no election is made, AITC is required to withhold 10% Federal Income Tax.** Please note that there may be penalties for not paying enough tax during the year, through either withholding or estimated tax payments (see IRS Publication 505 for details). Also, it is important to note that each state has different withholding requirements (both voluntary and mandatory), please refer to your individual state requirements before making your state withholding elections below and note these can be changed or revoked for future requests at any time.

☐ Federal Withholding _____ % (not less than 10%)

☐ Do not withhold Federal Tax

☐ State Withholding _____ % For State _____

☐ Do not withhold State Tax

CLIENT SIGNATURE - REQUIRED

_____ _____

Account Holder Signature Date