

RMD Withdrawal Service Form  
For Fixed Annuity Contracts

Protective Life Insurance Company<sup>1</sup>  
West Coast Life Insurance Company<sup>1</sup>  
Protective Life and Annuity Insurance Company  
Post Office Box 1928 / Birmingham, AL 35201-1928  
Toll Free: 800-456-6330 / Fax: 205-268-6479

Owner's Name: \_\_\_\_\_ Contract Number: \_\_\_\_\_

**PART 1 – Withdrawal Request (Choose one)**

- Please send to me now only the amount to satisfy my Required Minimum Distribution (RMD).  
*Complete the Federal Tax Withholding form to give us your withholding instructions.*
- I wish to take an amount in addition to my RMD amount.  
The total amount I wish to take now is \$\_\_\_\_\_ (RMD amount plus additional amount.)  
***Any amount taken in addition to the RMD amount may be subject to a surrender charge.***  
*Complete the Federal Tax Withholding form to give us your withholding instructions.*
- I do not wish to have the RMD amount withdrawn from this contract.

***If we do not hear back from you we assume that you are satisfying RMD requirements elsewhere.***

**PART 2 – Request to set up Automatic RMD Withdrawals**

Use this section to request RMDs to be calculated and distributed automatically each year.  
Check the box and enter the month and day you want RMD to be distributed each year.  
Be sure to read the instructions in a – c.

***Auto RMDs will not be allowed on contracts where automatic interest withdrawals (AIWs) are being paid.***

***If we receive instructions to set up Automatic RMD Withdrawals, we will discontinue AIWs.***

- Please automatically send my distribution each year on \_\_\_\_\_(month)\_\_\_\_\_(day-choose 4th-28th).  
*Complete the Federal Tax Withholding form to give us your withholding instructions.*
- a. ***If, when we receive this form, the month and day chosen have already passed for this tax year, you will need to give us instructions for the RMD for this tax year in PART 1 above. Otherwise we will assume you have already fulfilled the current tax year's RMD for this contract and the auto RMD will begin next tax year.***
- b. ***If, when we receive this form, the month and day chosen have not passed for this tax year, we will set the auto RMDs to begin with the current tax year unless you instruct us differently below.***
- Begin auto RMDs next year. I have already satisfied the RMD for this tax year.
- Begin auto RMDs next year. Send amount to satisfy the RMD for this tax year immediately.
- c. ***If the current tax year is the first year you are required to take an RMD and you plan to delay taking the first required distribution until AFTER December 31<sup>st</sup>, you will need to make arrangements for a one time RMD withdrawal between January 1<sup>st</sup> and April 1<sup>st</sup> to satisfy the first year RMD. Auto RMDs only satisfy the current tax year's required distribution.***

Continue to Page 2 to complete and sign for this request.

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**PART 3 – Mailing or Electronic Funds Instructions**

- I wish to have a check mailed to the address of record.
- I wish to have my funds sent electronically to my bank (EFT):

**PLEASE ATTACH A VOIDED CHECK**

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

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***Important notes for participants electing the Automated Required Distribution program:***

- o** Auto RMDs will not be allowed on contracts where automatic interest withdrawals (AIWs) are being paid. If we receive instructions to set up Automatic RMD Withdrawals, we will discontinue AIWs.
  - o** RMD amount is subject to any applicable market value adjustment.
  - o** Remember, auto RMDs only satisfy the current tax year's required distribution. See *c.* above if you are delaying the first required distribution.
  - o** RMDs must be sent to your address of record or by electronic funds to your primary checking account.
  - o** Any distribution made in a year that a Required Minimum Distribution (RMD) applies is deemed an RMD until the full amount of the RMD is satisfied. On the day the RMD is scheduled to be withdrawn, only the amount needed to fulfill the RMD requirement will be withdrawn and sent.
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**Spousal Beneficiary (optional):**

If your spouse is your SOLE beneficiary AND is MORE than 10 years YOUNGER than you, you may (but are not required to) have your RMD calculated using the Joint Life Expectancy table instead of using the Uniform Lifetime table. This may result in a lower payment and will be different than the amount stated in your letter. We encourage you to consult your tax advisor for information and guidance.

- I elect the Joint Life Expectancy table

\_\_\_\_\_   
Spouse Beneficiary's Date of Birth

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**PART 4 – Notary:**

For your protection, Protective Life requires a Notary Signature for ALL first time electronic fund transfers (EFTs), new bank accounts, changes to your bank account on file, payments to a different address than on file or third party payees. If your request does not include a notarization, we will process your request as a check to the address of record.

**NOTARY PUBLIC SEAL STAMP HERE:**

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

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**PART 5 – Signature:**

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

***Express Mail Request***

- I wish to have my RMD sent express mail and understand the express charge will be taken from the net check amount.

