

Genworth Life and Annuity Genworth Life Genworth Life of New York P.O. Box 10716 Lynchburg, VA 24506 genworth.com

Required Minimum Distribution Authorization for Fixed Annuities

from Genworth Life and Annuity Insurance Company, Genworth Life Insurance Company and Genworth Life Insurance Company of New York[†]

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- Please read and complete all sections that apply to your request and sign on page 4
- Please print clearly using blue or black ink, and initial and date any corrections or we may not be able to accept your request
- If you are taking a withdrawal to satisfy the RMD for a non-Genworth annuity, please use the withdrawal request form.

Contract information

The Genworth insurance companies listed above are referred to as "we" and "us" in this request.

Contract number(s)

Owner name
Date of birth
Social Security number
Phone number

Important information

The contract owner is referred to as "you" and "your" in this form.

- Refer to your contract for the maximum withdrawal amount and number of withdrawals allowed without surrender charge (surrender charges will apply to any withdrawal beyond these limits)
- Making unscheduled withdrawals may cause systematic withdrawals to terminate or may reduce the amount of future systematic withdrawals, and could have adverse tax consequences

Required Minimum Distribution For qualified annuities

We will process this request on the date when all requirements are met. To ensure processing by year-end, please submit request by November 1st.

The Internal Revenue Service (IRS) may impose a 50% excise tax on Minimum Distribution amounts that are not taken by the appropriate deadline. IRS Publications 590-B (IRA Distributions) and Publication 571 (TSA) offer additional information regarding the rules as they apply to your annuity contract. Consult your personal tax advisor regarding the tax status of distributions from your annuity.

The request to surrender or withdraw any contract value may affect the guaranteed elements, non-guaranteed elements, face amount or surrender value of the contract from which the values are released.

Is this a	Tax sheltered/403(b) annuity?	If yes,	enter the December 31, 1986	account balance
O Yes	\bigcirc No	\$		

If the pre-1987 and the post-1986 account balances have not been maintained separately, then the full balance of your account will be considered to be post-1986 for purposes of calculating your Minimum Distribution. Distribution of your pre-1987 account balance is not required to begin until the latter of the year in which you (i) attain age 75 or (ii) retire from the TSA plan sponsor.

Please provide December 31st contract value of previous year Only applicable to contracts that were not with Genworth at end of previous year

Date of distribution Current date if blank (If Automatic Annual distribution is chosen, must be a date no later than December 28th of each year)

Distribution type Select one

- Single distribution
- Automatic annual distribution (if available) Calculated distribution options only—select calculation method*

If Single distribution Select one

- Calculated amount Select calculation method*
- O Specify amount \$ and select type below. *Gross, if left blank*
 - Gross (payment is reduced by any taxes or fees withheld)
 - Net (payment equals specified amount, any taxes or fees are taken from remaining cash value)

* Calculation method

If your spouse is the sole beneficiary, spouse's date of birth

Withdrawals in excess of the guaranteed withdrawal amount, called "excess withdrawals", will result in a permanent reduction in future guaranteed withdrawal amounts. If you would like to make an excess withdrawal and are uncertain how an excess withdrawal will reduce your future guaranteed withdrawal amounts, then you may contact us prior to requesting the withdrawal to obtain a personalized transaction specific calculation showing the effect of the excess withdrawal.

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Payment method Complete appropriate section—payment will be mailed to the owner's address of record, if left blank

Check A check will be mailed to the	Address				
address of record, unless a new address is provided.	City		State	Zip code	
A check will be sent if Electronic funds transfer is not an option for your contract.	Is this a permanent mailing address? If yes, all future correspondence will be mailed to this address. If no, we will continue to use the address on file.				
Electronic Funds Transfer (EFT) You authorize us to transfer	Account owner name		Institution name fo	or deposit	
payments into your account, and make any necessary adjustments to your account, with the	Routing number		Type of account S Savings	Select one ○ Checking	
understanding that you or your agent will be notified.	Account number for deposit				
For automatic annual distribution, this authorization will remain in effect until we receive written notification from you to do otherwise.	A pre-printed, voided check or other bank documentation showing the account information MUST be included with your request in order for it to be processed.	Your Name 194 Agreem, USA Anytown, USA PAY TO THE ORDER OF ACH R/T 133456789 FOR 11 234,55 78 91 0001 234	Local Bank	1001 19-3/1250 001LARS	
Income tax withholding	ABA Check Routing Number Account		Number Check Number ACH Rou 4.55.789 1001 1234	ting/Transit Number 156789	
For state withholding disclosures, clease refer to the Deferred Annuity and Life Withdrawal State Withholding Information form 4309704. Withholding notice Withholding notice Withholding only applies to the axable portion of the payment of the payment of ederal income tax and, if applicable, state income tax on the taxable portion of the payment of estimated tax and withholding are insufficient (IRS Publication 505 explains federal estimated tax and withholding are insufficient (IRS Publication 505 explains federal estimated tax requirements and describes penalties in detail). You may be able to avoid quarterly tax payments by having enough tax withheld from your withdrawals. Consult your personal tax advisor regarding the tax status of distributions. Scapired minimum distribution requirements. Required minimum distribution RMID) amounts are not eligible for ollover. Substitute Form W-4R for Income Tax Withholding on Lump Sum & Other Nonperiodic Payments Withholding is generally at a 10% rate, but you may generally elect not to withhold any taxes. We will assume that the entire withdrawal from an IRA is taxable, except for non-taxable qualified distributions in IRA. If you elect not to have federal and state income tax withheld, you are still liable for payment of federal income tax and, if applicable, state income tax on the taxable portion of the distribution. You may also be subject to tax penalties under the Estimated Tax Payment Rules if any payments of estimated tax and withholding are insufficient (IRS Publication 505 explains federal estimated tax requirements and describes penalties in detail). You may be able to avoid quarterly tax payments by having enough tax withheld from your withdrawals. Consult your personal tax advisor regarding the tax status of distributions. State tax will be withholding certificate may state special rules and conditions for withholding state income tax from your withdrawals. If applicable, the state withholding certificate may state special rules and conditions fo					
Your withholding selections will apply to all scheduled payments made under this request.	 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 possessions. 				
We will withhold 10% federal and any applicable state taxes if you do not complete this section.	Complete this line if you would like different from the default withhold and Marginal Rate Table reference Enter the rate as a whole number (e a rate of withholding ling rate. See addition ad below.	g that is al instructions	2 %	
	For further information or to see the Marginal Rate Tables, please refer to the actual Form W-4R and instructions found on the IRS Website at https://www.irs.gov/pub/irs-pdf/fw4r.pdf.				
If no state tax amount or percent is specified, no state income tax will be withheld, unles required by the state.	Withhold state taxes Select one ○ Yes ○ No	If yes, specify ○ <u>\$</u>	amount Select on	<i>e</i> %	
	Please indicate your Residence State for applicable tax withholding and reporting. If left blank, we will withhold and report based on the previously provided tax state, or your current address of record.				
	43952RMDFA 09/29/22				

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Substitute Form W-9 (an official IRS Form W-9 with instructions is available by download at IRS.gov)

If you are not a U.S. citizen or		
other U.S. taxpayer, do not complete		
this section. You must provide an		
IRS Form W-8BEN (individual),		
W-8BEN-E (non-individual), or		
another applicable IRS form to		
document your foreign status in		
order to prevent 30% mandatory		
withholding. If you do provide the		
appropriate signed W-8Ben form to		
us, tax withholding may be as low		
as 0% and will range up to 30%,		
depending on any applicable treaty or		
other agreement		

You must cross out item 2, if you have been notified by the IRS that you are currently subject to backup withholding because of a failure to report all interest and dividends on your tax return.

The Foreign Account Tax Compliance Act (FATCA) is a Federal tax regulation that extends existing reporting requirements to require Foreign Financial Institutions to comply with IRS request of withholding and reporting on U.S. and unidentified account holders.

IRS regulations require certification of FATCA exemption. FATCA codes apply to certain entities, not individuals.

Check appropriate box for federal	tax classification:			
○ Individual/Sole Proprietor	○ C Corporation	○ S Corporation		
Partnership	○ Trust/Estate			
 Limited liability company 				
Enter the tax classification (C-	=C corporation, S=S corporation	on, P=partnership)		
Other (see W-9 instructions)				
Exemption Code(s) (see form W-9)	instructions; generally not applic	cable to individuals)		

Under penalties of perjury, *I certify that:*

- 1. The number shown on this form (on page 1) is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- 2. I am not subject to backup withholding because:
 - (a) I am exempt from backup withholding, or
 - (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or
 - (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. citizen or other U.S. person (defined in the form W-9 instructions).
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Non-periodic payment additional disclosure: If you have not previously completed the W-9 and if the Substitute W-9 section is left blank, we will be required to withhold 10% Federal Taxes from the taxable portion of the distribution. Withholding will not be refunded after a transaction has been completed.

Declaration and signature(s)

If you are signing as a fiduciary or representative, you must indicate capacity or title and provide documentation of authority (see signing instructions below).

Other signatures that may be required include: **spouse** (if community property state), **irrevocable beneficiary** (must sign with title), and **collateral assignee** (if contract is collaterally assigned).

- Your signature indicates that you have read and understand all sections of this form
- You certify under penalty of perjury that the statements and answers given on this form are true, complete and correct to the best of your knowledge and belief. The penalty of perjury does not apply to income tax withholding.
- You declare that no bankruptcy proceedings are now pending against you and you are not subject to back-up withholding

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

SIGN HERE	X		
	Owner Signatu	re	Date Signed
	TrusteeGuardian	○ Attorney-in-fact <i>POA</i>○ Title/office:	
SIGN HERE	X		
	Joint Owner Si	gnature	Date Signed
	TrusteeGuardian	Attorney-in-fact <i>POA</i> Title/office:	
SIGN HERE	Х		
	Other required	Signature	Date Signed
	TrusteeGuardian	Attorney-in-fact <i>POA</i> Title/office:	

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Signing instructions

Attorney-in-Fact

The attorney-in-fact must indicate capacity as "attorney-in-fact;" provide a copy of the entire power of attorney document, if not previously submitted; and complete a Genworth Declaration of attorney-in-fact form, if the power of attorney was not signed in the past 12 months (e.g. John Doe, Attorney-in-Fact).

Corporation or Limited Liability Corporation (LLC)

One officer of the company or managing member of the LLC must sign and indicate title and provide either a corporate or board of director's resolution, a copy of the Articles of Incorporation or operating agreement (for LLC's). If the signing officer or managing member is also the annuitant, a second officer or member must also sign (e.g. Jane Doe, President).

Guardian

The guardian must indicate capacity and provide a copy of the current guardianship documents (e.g. John Doe, guardian).

Partnership

All partners must sign and indicate title, or the general or managing partner must sign and indicate title. If the general or managing partner is also the annuitant, another partner must also sign, (e.g. John Doe, Senior Partner).

Spouse

A spouse in a community property state (AZ, CA, ID, LA, NV, NM, TX, WA, WI) must sign. Failure to include a spouse's signature may delay processing at claims time.

Trust

The trustee(s) must sign and indicate the title "Trustee", according to the terms of the Trust Agreement, and submit a completed Genworth Certification of trustee powers form (e.g. Jane Doe, Trustee).

Form submission

Send completed form to:

Regular First Class Mail:

Genworth P.O. Box 10716 Lynchburg, VA 24506

For Inquiries and questions Phone: 800 221.9501 Fax: 434 522.2904

Email: FA-FIAfrontend@genworth.com

Overnight Delivery:

Genworth 3100 Albert Lankford Drive Lynchburg, VA 24501