

**Scudder Destinations<sup>SM</sup> Guaranteed  
Retirement Income Benefit  
Frequently Asked Questions.**

**Zurich American Life  
Insurance Company (ZALICO)**  
Administrative Offices:  
PO Box 19097  
Greenville, SC 29602-9097  
USA  
(800) 449-0523

Overnight deliveries can be sent to:  
2000 Wade Hampton Blvd.  
Greenville, SC 29615-1064  
USA

Congratulations on selecting the Guaranteed Retirement Income Benefit endorsement (GRIB).

By electing this optional benefit, you now have the ability to begin receiving a fixed, guaranteed income for your life or joint lives, regardless of market conditions.

If you would like to annuitize your GRIB, please complete the attached GRIB Annuity Income Option Form. We encourage you to consult with your Financial Advisor before making any financial decisions.

For prompt processing of your GRIB request, each question must be answered fully. If space is insufficient for a complete answer, please provide additional information on a separate sheet of paper with your signature and the date. Please type or print all information. If you have any questions, please contact our Annuity Contact Center toll-free at (800) 449-0523.

For your convenience in completing this form, we've provided answers to the most frequently asked questions about **GRIB** alternatives.

# Guaranteed Retirement Income Benefit (GRIB) Frequently Asked Questions

## Who receives the GRIB payment?

The GRIB provides a fixed annuity guaranteed lifetime income to the Annuitant(s) of your contract.

## Who should complete this form?

The Annuitant, as well as the contract owner(s), if different, must complete the GRIB Annuity Income Option Form.

## What is Annuitization?

Annuitization is the process of using a tax-deferred annuity to purchase a stream of income payments for some future time period.

## When can I annuitize the GRIB benefit?

Beginning with the seventh (7th) contract anniversary, the GRIB may be annuitized if the Annuitant has also attained age 60. Beginning with the fifteenth (15th) contract anniversary, the GRIB benefit may be annuitized without a minimum age requirement. In all cases, the GRIB cannot be annuitized after the Annuitant reaches age 91.

Once a contract is eligible for GRIB Annuitization, the GRIB can only be annuitized within 30 days of the contract anniversary. It cannot be exercised at any other time during the contract year.

Spousal continuation owners may have different age limitations depending upon which option they have chosen. Please contact our Annuity Contact Center for more information at (800) 449-0523.

## Must I annuitize my GRIB?

No, you are not required to annuitize the GRIB. However, in order to gain access to the GRIB value, the contract must be annuitized, on a fixed basis, prior to the Annuitant's age 91. If the benefit is not annuitized by age 91, the benefit will expire.

## What does Joint and Survivor Annuity mean?

A joint and survivor annuity is an annuity that pays out while either Annuitant is living. Upon either Annuitant's death, the income payable continues over the life of the surviving Annuitant at a percentage specified when the GRIB is annuitized. The percentages available are 50%, 66 <sup>2</sup>/<sub>3</sub>%, 75%, and 100%. If the Joint Annuitant is not the Annuitant's spouse, the available percentages may be limited. Please call our Annuity Contact Center for more information at (800) 449-0523.

## **What types of income options are available if I annuitize the GRIB?**

The GRIB is available in a variety of lifetime income options including a single life with payments guaranteed for 5, 10, 15 or 20 years, or joint life income with payments guaranteed for 5, 10, 15, 20 or 25 years. However, the period certain payout options available to you depend on the life expectancy at the time the GRIB is annuitized.

For the period certain you select, your payments are guaranteed for that period of time. Even if you don't outlive the period certain, the remaining payments for the period certain will be paid to your named beneficiary, or your estate.

For example, if you select an annual payment single life payout with 20 years guaranteed, you, the Annuitant would receive level annual income for as long as you live. If, however, you were to pass away before 20 years had elapsed since annuitizing the GRIB, your beneficiaries (Primary or Contingent) listed in the GRIB Annuity Income Option Form would receive the fixed guaranteed payments for the remainder of the 20 years.

Alternatively, if you select a joint life income with 25 years guaranteed, the income will continue as long as at least one of the two Annuitants (designated at issue) is alive, but for no less than 25 years. If both Annuitants were to pass away before the GRIB has been paid for 25 years, the remaining GRIB payments are paid to your beneficiaries (Primary or Contingent) as indicated on the GRIB Annuity Income Option Form.

Note that if your contract was issued prior to May 1, 1999 other income options are available. Please call our Annuity Contact Center for information at (800) 449-0523.

If you have a tax-qualified contract (such as IRA or Tax Sheltered Annuity), you will need to consult our Annuity Contact Center and your tax advisor regarding Internal Revenue Service (IRS) Required Minimum Distribution rules. Depending upon your age, and the joint annuitant's age (if applicable), some of the periods certain listed above might not meet the IRS Required Minimum Distribution rules. The periods certain payout options available to you depend on your life expectancy at the time you annuitize the GRIB.

## **How is my GRIB payment calculated?**

The GRIB payment is calculated based on the value of the GRIB at the time of Annuitization, the type of Income option you, the Annuitant, elect, and your age and gender. For purposes of this calculation, we use your age on your nearest birthday. For example, if you annuitize the GRIB on November 1, 2008, and your birthday is April 15th, we will use your age on April 15, 2009 since that is the birthday nearest to the date of Annuitization.

The company reserves the right to alter the payment schedule to ensure payments are at least equal to our minimum required payment of \$50.

## **Will my GRIB payment fluctuate?**

No, the GRIB payment amount is fixed. If you later choose to commute a portion of your certain payments under the Commutation Option, then the amount of the remaining certain payments will decrease. If you choose a joint and survivor annuity, your GRIB payment after the period certain will also change following the death of one of the Annuitants if you choose a percentage to the survivor other than 100%.

## **Does GRIB offer the best Annuitization option?**

Not always. Your contract offers three different Annuitization options:

1. The GRIB Annuitization option;
2. The regular fixed Annuitization option; and
3. The regular variable Annuitization option

The GRIB guaranteed annuity factors are based on conservative assumptions, so the level of income guaranteed by exercising the GRIB Annuitization option (option #1 above) may be less than the income that would be provided by annuitizing under the regular fixed annuity provisions of the contract (option #2 above). Under both of these options, the amount of the payment remains fixed during the term of the payout and will not fluctuate with the investment experience of a Subaccount. However, only the contract value can be used to annuitize under the regular variable annuity provisions of the contract — the GRIB amount, if any, is excluded. You can also annuitize the contract value under the regular variable annuity provisions of the contract (option #3 above). In this option, you receive the value of a fixed number of Annuity Units each month. An Annuity Unit's value reflects the investment performance of the underlying Subaccount(s) selected. The amount of each annuity payment will fluctuate based upon the investment experience of the Subaccount(s) in which you have selected. However, only the contract value can be used to annuitize under the regular variable annuity provisions of the contract — the GRIB amount, if any, is excluded.

Please contact our Annuity Contact Center to obtain further information at (800) 449-0523.

## **How often will I receive my GRIB payment?**

During the Annuitization period, benefits may be payable on a monthly, quarterly, semi-annual or annual basis. Indicate your payment frequency preference on the GRIB Annuity Income Option Form. Because the minimum payout amount is \$50.00, your payments may be made less frequently than monthly, but must be made at least annually.

## **Can I change my GRIB annuity option at any time?**

Until your first payment is issued, you can change your annuity option. You must annuitize the GRIB prior to age 91 to avoid losing any additional benefits your GRIB endorsement may provide.

## **What is the Commutable Annuitization Option?**

If your contract was issued on or after August 24, 1999 and your GRIB Annuitization has been paying out for at least one (1) year, you may elect to take advantage of the Commutable Annuitization option on your contract.

The GRIB Commutable Annuitization Option allows you (the Annuitant) to take a distribution from your annuitized contract before the end of the period certain selected when you annuitized.

## **Who may elect the Commutable Annuitization?**

If your contract was purchased on or after August 24, 1999, and the GRIB has been annuitized, the Annuitant may elect to have payments made under the Commutable Annuitization Option. You must select the “Accept” box for the GRIB Commutable Annuitization Option on the GRIB Annuity Income Option Form in order to be eligible for this benefit. Once the Commutable Annuitization Option has been elected, there is a 13 month waiting period before this option may be exercised.

## **How does the Commutable Annuitization Option work?**

As the Annuitant, you may take a partial lump sum distribution of up to 75% on Non-Qualified Plans and 100% on Qualified Plans of the present value of the remaining payments in the period certain. The remaining period certain installments after this withdrawal will be reduced in proportion to the lump sum distribution percentage. Once the period certain is over and if you are still living, you will then begin receiving your original Annuitization payments until your death.

## **How often can I exercise the Commutable Annuitization Option?**

Partial lump sum payments under the Commutable Annuitization Option can be taken once each calendar year. They may not be elected until one year after the GRIB Annuitization has started. The combined total of all lump sum payments cannot exceed the 75% limit on Non-Qualified Plan Contracts or 100% on Qualified Plan Contracts.

## **Who is the beneficiary and can it be changed?**

If you (the Annuitant) should die during the Annuitization period, the primary beneficiary is the individual who will receive the remaining guaranteed annuity payments, if any. If you name more than one beneficiary, the remaining guaranteed annuity payments will be divided equally among your primary beneficiaries unless the primary beneficiaries’ percentages are not equal. You may also name one or more contingent beneficiaries to receive the remaining guaranteed annuity payments if all of your primary beneficiaries predecease you. The beneficiary designation may be changed at any time during your lifetime.

If no beneficiary is named, then the remaining value of the guaranteed payments will go to your estate. If the benefit is paid to the estate, it is paid in the form of a lump sum. That means if you select a period certain of 20 years, for example, but you live for only 15 years, the value of the 5 years of remaining guaranteed proceeds will be paid as a lump sum to the estate.

## **Is each payment taxable?**

Because your deferred annuity grows tax-deferred, taxes on contract gains are not paid until the gains are received. When you elect to annuitize your contract, gains are spread over the life of the annuity payment schedule. Based on IRS-approved standard life expectancy tables, each of your period certain payments are divided into both a return of principal and contract gain. If you receive income beyond the period certain, each payment received may be comprised entirely of contract gain. Life expectancies are based on the Annuitant’s age at the time the contract is annuitized as well as the IRS-approved, standard life expectancy tables.

Note that any additional benefit due to the value of the GRIB is considered a gain in the contract and may also be subject to taxation as those gains are paid out. In addition, state premium taxes may be assessed on the total GRIB value when you exercise the GRIB.

You may change your tax withholding at any time by notifying our Annuity Contact Center at the address below.

Finally, distributions prior to age 59 1/2 may be subject to a 10 percent federal income tax penalty.

### **How do I report the tax information to the IRS?**

By January 31st, you will receive in the mail an IRS Form 1099R showing your contract's taxable income for the previous year. You may use this information to prepare your tax return and to keep a record of your payments for the year. If you requested ZALICO to withhold taxes from your payments, Form 1099R will report the amount of tax withheld to the IRS and to your primary State of residence. Your tax advisor can help you when preparing your tax return for the year.

### **When will I actually begin receiving payments?**

Provided all your documentation has been properly completed and submitted, your payments will begin in approximately two or three weeks. Just prior to the start of your payment schedule, you will receive a "Supplementary Agreement." This is the legal document describing the terms of your selected annuity option.

### **What other documents must be submitted?**

In addition to the GRIB Annuity Income Option (Form ZA-9000), please include a legible copy of a birth certificate for each payee. If you select direct deposit of your benefit check, remember to include a blank voided check.

### **Where do I send the GRIB Annuity Income Option Form and other documents?**

Send all information to:

Zurich American Life Insurance Company  
Attention: Administrative Offices  
PO Box 19097  
Greenville, SC 29602-9097

Overnight deliveries can be sent to

2000 Wade Hampton Blvd.,  
Greenville, SC, 29615-1064  
Annuity Contact Center: (800) 449-0523

# GRIB Annuity Income Option Form



Before completing this form, please read the attached frequently asked questions carefully. Please include a copy of the birth certificate for each payee when submitting this form. Also, if you select direct deposit of your benefit check, remember to include a blank voided check.

Administrative Offices:  
PO BOX 19097  
Greenville, SC 29602-9097  
Phone number (800) 449-0523

Overnight deliveries can be sent to  
2000 Wade Hampton Blvd.,  
Greenville, SC, 29615-1064

**(Please Print All Information)**

## **Section 1. Annuitant Information**

First Name  M  Last  Contract Number

Residence, Street  City  State  Zip

Is this a change of address? Yes  No  Home Phone Number  -  -

Social Security Number  Date of birth  -  -

Email Address

Work Phone Number  Cell Phone Number

Are you a U.S. Citizen?  Yes  No Country of residence: \_\_\_\_\_

(If the answer is "NO" you will need to fill out a W8-BEN form and send the form to Zurich, Administrative Offices, PO BOX 19097, Greenville, SC 29602-9097)

**Note: If you live outside of the United States of America, you must complete Section 8 of this form.**

**Please Provide a Birth Certificate for the above listed annuitant.**

## **Section 2. Payment of Funds**

Indicate desired frequency of payment. (Please choose only one installment option. The company reserves the right to alter the payment schedule to ensure payments are at least \$50.)

Monthly  Quarterly  Semi-annually  Annually

Please indicate below the day you would like your payment to begin.

1st of the month  15th of the month

Please select below one of the income options. For qualified plan contracts, the number of years guaranteed cannot be longer than the Annuitant's life expectancy, in order to satisfy Internal Revenue Service Required Minimum Distribution rules.

If you elect a guaranteed period certain greater than the maximum period certain available, we will default to the longest available guaranteed period certain option available.

### Income Option 1

Life Income Annuity with Installments Guaranteed:\*  5 yrs.  10 yrs.  15 yrs.  20 yrs.

### Income Option 2

Joint and Survivor Annuity with Installments Guaranteed :\*  5 yrs  10 yrs.  15 yrs.  20 yrs.  25 yrs.  
Select Survivor Percentage for a Joint and Survivor Annuity:\*  50%  66 2/3%  75%.  100%

**\*Please include a copy of the birth certificate for each payee (Annuitant or Joint Annuitant) if applicable when submitting this form.**

For an estimate of what your income amount would be under any of these alternatives, you may go to our webpage [www.zurichamericanlifeinsurance.com](http://www.zurichamericanlifeinsurance.com), and click on GRIB Illustration Tool.

If you elected Income option 2 above, a Joint and Survivor Annuity with Installments Guaranteed, please fill out the information requested in the section below for the Survivor Annuitant:

<input type="checkbox"/> Male	<input type="checkbox"/> Female		
Name	<input type="text"/>	Relation to Annuitant:	<input type="text"/>
Address	<input type="text"/>	Work Phone #:	<input type="text"/>
City, State, Zip	<input type="text"/>	Home Phone #:	<input type="text"/>
Social Security Number	<input type="text"/>	Cell Phone #:	<input type="text"/>
Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>	Email Address:	<input type="text"/>
Citizenship: Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If "No" What is your country of residence: <input type="text"/>			
*Please include a copy of the birth certificate for the above listed Joint Annuitant			
(If the answer is "NO" you will need to fill out a W-8BEN form and send the form to Zurich, PO BOX 19097 Greenville, SC 29602-9097)			

### **Section 3. GRIB Commutable Annuitization Option**

GRIB Commutable Annuitization Option: If your contract was issued on or after August 24, 1999, please select one of the following options:

GRIB Commutable Annuitization Option:  Accept  Decline

You must accept the commutable Annuitization option at this time in order to be eligible for this benefit in the future. Failure to check either box will be treated as a decline.



## **Section 4. Federal and State Income Tax Withholding**

### **Federal Income Tax Withholding Rules**

#### Annuity Payments

- Periodic Payments: Periodic annuity payments under a supplemental agreement are subject to federal income tax withholding on the taxable portion of the payments. If you receive periodic annuity payments (other than from a Roth IRA), ZALICO will withhold federal income tax from the taxable portion of the annuity payments. However, you can elect out of this federal income tax withholding.

Insufficient Withholding: Please note that if you elect not to have withholding apply, or if you do not have enough federal income tax withheld from your distribution or periodic payments, you are liable for payment of federal income tax on the taxable portion of the payment, and you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient.

### **Federal Elections**

#### Annuity Payments

- Periodic Payments: Since I will be receiving periodic payments under a supplementary agreement with respect to the ZALICO contract, I understand that ZALICO is required to withhold federal income taxes from the taxable portion of those payments, generally as if a married individual claiming three withholding allowances (ZALICO will use a 20% withholding rate as a proxy), unless I instruct ZALICO otherwise by checking one of the following boxes:

- Not to have any amounts withheld from my annuity payments; or
- To have an amount withheld equal to \_\_\_\_\_% of the taxable amount of my annuity payments.

NOTE: Your withholding election for annuity payments will remain in effect until you revoke it. You may make and revoke the withholding election any time by writing a letter of instruction to revoke and send the letter to Zurich Administrative Offices, PO BOX 19097, Greenville, and SC 29602-9097.

### **State Income Tax Withholding Rules**

State income tax withholding is based on your legal state of residence as shown in our records.

The amount of state income tax withheld (if any) for annuity payments will be based on your payment being a periodic distribution and is not affected by the classification of the tax status of your contract, e.g. IRA, 403(b)/TSA and Non- Qualified, except in Virginia.

Please refer to the attached document – State Income Tax Withholding Information Document for guidance in checking the box that applies to you.

### **State Income Tax Elections**

#### A. No State Income Tax Withholding

My legal state of residence is one of the states classified in the attached document as a No State Income Tax Withholding. I confirm

- There will be no amounts withheld for state income taxes.

B. Voluntary State Income Tax Withholding

My legal state of residence is one of the states classified in the attached document as a Voluntary State Income Tax Withholding. I elect

- Not to have any amounts withheld.
- To have an amount withheld of \_\_\_\_\_% of the taxable amount of my annuity payments paid.

C. Required State Income Tax Withholding – Elections Permitted in Certain Circumstances

My legal state of residence is one of the states classified in the attached document as a – Required State Income Tax Withholding – Elections Permitted in Certain Circumstances. I elect

Please note this section is not for residents of California and Vermont

- Not to have any amounts withheld – (my transaction allows me to elect out of withholding).
- To have an amount withheld equal to the default State income tax withholding percentage of my legal State of residence, multiplied by the taxable amount of my annuity payments paid.
- To have an amount withheld of \_\_\_\_\_% of the taxable amount of my annuity payments paid.

Please note this section is for residents of California and Vermont only

- Not to have any amounts withheld – (my transaction allows me to elect out of withholding).
- To have an amount withheld equal to the default State income tax withholding percentage (10% CA; 27% VT) of my legal State of residence, multiplied by the Federal Income Tax amount withheld pursuant to my annuity payment paid.
- To have an amount withheld of \_\_\_\_\_% of the taxable amount of my annuity payments paid.

D. Mandatory State Income Tax Withholding When Federal Income Tax is Withheld

My legal state of residence is one of the states classified in the attached document as a – Mandatory State Income Tax Withholding When Federal Income Tax is Withheld. I elect

- Not to have any amounts withheld – (applicable if federal income taxes have not been withheld except for Michigan).
- To have an amount withheld using the default State income tax withholding percentage of my legal State of residence, multiplied by the taxable amount of my annuity payments paid.
- To have an amount withheld of \_\_\_\_\_% of the taxable amount of my annuity payments paid.

E. Mandatory State Income Tax Withholding on all taxable distribution

My legal state of residence is one of the states classified in the attached document as a – Mandatory State Income Tax Withholding on all taxable distribution. I elect

- To have an amount withheld equal to the default state income tax withholding percentage of my legal state of residence, multiplied by the taxable amount of the RMD payments paid.

**Section 5. Beneficiary Information:**

**(You may designate additional Primary and Contingent beneficiaries on a signed and dated separate sheet of paper.)**

<b>Primary Beneficiaries</b>
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Full Name			
Full Address			
Home Phone			
Work Phone			
Cell Phone			
Email			
Relationship to Owner			
Social Security #			
Date of Birth	M_____ D_____ Y_____		
Allocation Percentage	What % do you want this Primary Beneficiary to have	%	
Full Name			
Full Address			
Home Phone			
Work Phone			
Cell Phone			
Email			
Relationship to Owner			
Social Security #			
Date of Birth	M_____ D_____ Y_____		
Allocation Percentage	What % do you want this Primary Beneficiary to have	%	

**PLEASE MAKE SURE THAT THE SUM OF THE %'s FOR THE PRIMARY BENEFICIARIES TOTALS 100%**

- The new designation cancels all previous designations, subject to the rights of any existing assignment.
- Unless otherwise indicated, the right to change the beneficiary is reserved by the owner(s).
- If a trust is being named, indicate the full name of the trust and the date it was established as well as the first and last page of the trust.
- Percentage: designations must equal 100%.
- Such change will take effect when we receive and record it at our home office. After we receive and record the change form, it will take effect on the date the change was signed. However, any action taken by us before such change is received and recorded will remain valid.
- If not enough space is allocated for your beneficiaries please use Section 5 with all the same information from this section.

**Contingent Beneficiaries**

**(Will only be considered if all Primary Beneficiaries Are No Longer Living)**

Full Name	
Full Address	
Home Phone	
Work Phone	
Cell Phone	
Email	
Relationship to Owner	
Social Security #	
Date of Birth	M _____ D _____ Y _____
Allocation Percentage	What % do you want this Contingent Beneficiary to have _____ %
Full Name	
Full Address	
Home Phone	
Work Phone	
Cell Phone	
Email	
Relationship to Owner	
Social Security #	
Date of Birth	M _____ D _____ Y _____
Allocation Percentage	What % do you want this Contingent Beneficiary to have _____ %

**PLEASE MAKE SURE THAT THE SUM OF THE %'s FOR THE CONTINGENT BENEFICIARIES TOTALS 100%**

- The new designation cancels all previous designations, subject to the rights of any existing assignment.
  - Unless otherwise indicated, the right to change the beneficiary is reserved by the owner(s).
  - If a trust is being named, indicate the full name of the trust and the date it was established as well as the first and last page of the trust.
  - Percentage: designations must equal 100%.
  - Such change will take effect when we receive and record it at our home office. After we receive and record the change form, it will take effect on the date the change was signed. However, any action taken by us before such change is received and recorded will remain valid.
  - If not enough space is allocated for your beneficiaries please use Section 5 with all the same information from this section.

**Section 6. Additional information or instructions**

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**Section 7. Direct Deposit Authorization (Must Include a Blank Voided Check)** (for payee who lives in the USA)

- By checking this box your annuity check will be deposited automatically into your checking bank account of your choice, provided your bank is a member of the Automated Clearing House. Please include a blank voided check otherwise we will not be able to process your request. Thank you.

**Section 8. Foreign Wire Instruction** (required for payees who live outside the USA)

- I (we) live outside of the United States of America. I have completed the form **ZA-2001 International Wire Transfer Authorization** and enclosed it with this form.

Note: Please go to the website <https://www.zurichamericanlifeinsurance.com/> and click on the menu link of Customer Service/ Download Forms to download ZA-2001 form. You can also use Customer Service Phone number 1-800-499-0523 or Fax number 1-866-605-3962 to request the form.

**Section 9. Signature of Owners and Annuitants**

I (we) understand that once a contract is eligible for GRIB Annuitization, the GRIB can only be annuitized within 30 days of the contract anniversary. I (we) have read the contract and agree to the terms and conditions of the selected payment plan. By signing below, I (Annuitant) choose to annuitize proceeds from the contract. I (we) understand that the type of payment plan may not be changed after the first payment is issued. I (we) further understand that by completing Section 7 of this form (Direct Deposit Authorization) for payee who lives in the USA, or completing Section 8 Foreign Instruction for payee who lives outside of the USA, I (we) authorize Zurich American Life Insurance Company (“the Company”) to deposit the regular benefit directly into the bank account provided. I (Annuitant) also understand that this deposit will be made as scheduled until I instruct the Company to discontinue the service, which may be done at any time. The Company cannot be responsible for any expenses incurred in connection with the completion of this GRIB Annuity Income Option Form. The Annuitant acknowledges that annuitizing the GRIB may be a taxable event and should consult with a tax advisor before making such a financial decision.

I understand that laws in my state may make it a crime to complete a claim form with information I know to be false, or to leave out material facts.

By signing below, the Owner(s) and annuitant(s), hereby certify that the information provided in this request is complete and accurate, and understand that this request will be processed according to the information provided.

If there is any inconsistency between the language in this form and the language in the contract, the language in the contract will take precedent.

Name of Contract Owner: \_\_\_\_\_

Contract Owner’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Joint Contract Owner: \_\_\_\_\_ (if any)

Joint Contract Owner’s Signature: \_\_\_\_\_ (if any) Date: \_\_\_\_\_

Name of Annuitant: \_\_\_\_\_

Annuitant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Only for Joint and Survivor Option)

Name of Joint Annuitant: \_\_\_\_\_

Joint Annuitant’s Signature: \_\_\_\_\_ (if any) Date: \_\_\_\_\_

(Only for Joint and Survivor Option)

Note: All Signatures above are to be guaranteed.

Signature Guarantee with Medallion Stamp:

(Bank Officer Medallion or Broker Dealer Medallion)



**Section 10. Spousal Consent Signatures**

Spousal Consent for Community Property States: If the plan participant is a resident of AZ, CA, ID, LA, NV, NM, TX, WA or WI, spousal consent is required unless the participant has no legal spouse.

Signature of Contract Owner's Spouse: \_\_\_\_\_ Date: \_\_\_\_\_

Check here if Contract Owner has no legal spouse

Contract Owner's Spousal Consent for ERISA plans: I hereby consent to the request as stated above. I understand that a spouse is guaranteed certain rights to assets in this retirement account by federal law and that these include the right to a pre-retirement survivor's annuity and a joint and survivor annuity and that these rights could be diminished by changes to the contract.

Signature of Contract Owner's Spouse: \_\_\_\_\_ Date: \_\_\_\_\_

Check here if Contract Owner has no legal spouse

Note: All Signatures above are to be guaranteed.

Signature Guarantee with Medallion Stamp:

(Bank Officer Medallion or Broker Dealer Medallion)





**Zurich American Life  
Insurance Company (ZALICO)**

Administrative Offices:  
PO BOX 19097  
Greenville, SC 29602-9097  
1.800.449.0523

## **ATTACHMENT B**

# **STATE INCOME TAX WITHHOLDING INFORMATION DOCUMENT**

This document is intended to provide you with information regarding state income tax withholding rules applicable to retirement-type distributions by an insurance company, such as ZALICO, in effect as of December, 2017. State laws are subject to change from time to time. The information below is based on ZALICO's understanding of the relevant laws; ZALICO does not warrant that the information is correct, nor does it undertake to update the information to reflect changes in state laws. This document is not intended or written as specific legal or tax advice and may not be relied on for purposes of avoiding any state tax penalties. Neither ZALICO nor any of its employees or representatives is authorized to give legal or tax advice.

### **State Income Tax Withholding—General Information**

State income tax withholding is based on your legal state of residence as shown in our records. Please notify us if you maintain a different legal residence.

The amount of tax withheld (if any) may be based on whether your payment is a periodic distribution or a non-periodic distribution. A series of payments made at regular intervals over a person's life or over a period of greater than one year is considered a series of periodic distributions, for example, annuities or installment payments. Any payment as a single-sum or at irregular intervals is a non-periodic distribution.

Please note that regardless of your election with respect to withholding, you may be liable for state income taxes with respect to the taxable portion of payments from ZALICO. In addition, you may be subject to interest or penalties on underpayments of tax. We suggest that you consult with a tax advisor in order to ensure that you make timely tax payments.

The information provided is intended to supplement the information ZALICO has provided to you with respect to federal income tax withholding requirements.

### **No State Income Tax Withholding**

ZALICO will not withhold for state income taxes in the following states. Please elect "no state withholding":

Alaska - AK	Nevada - NV	Tennessee - TN	Wyoming - WY
Florida - FL	New Hampshire - NH	Texas - TX	
Mississippi - MS	South Dakota - SD	Washington - WA	



### **Voluntary State Income Tax Withholding**

The following states do not require ZALICO to withhold state income taxes on periodic and non-periodic distributions, even though federal income taxes are being withheld. If you wish to have state income tax withheld, you must elect state income tax withholding and indicate on the election form the percentage of the distribution that you wish ZALICO to withhold.

Alabama - AL	Illinois - IL	New York - NY	Utah - UT
Arizona - AZ	Indiana - IN	Montana - MT	Pennsylvania - PA
Colorado - CO	Kentucky - KY	New Jersey - NJ	Rhode Island - RI
Idaho - ID	Louisiana - LA	New Mexico - NM	South Carolina - SC
Hawaii - HI	Minnesota - MN	North Dakota - ND	West Virginia - WV
	Missouri - MO	Ohio - OH	Wisconsin - WI

### **Required State Income Tax Withholding—Elections Permitted In Certain Circumstances:**

The following states generally require ZALICO to withhold state income tax on certain distributions, but permit certain state income tax withholding elections to be made in writing by you. Your distribution form allows you to make this election “in writing.” The requirements and available withholding elections are described below.

<b>State</b>	<b>State Tax W/H Calculation</b>	<b>Non-Periodic Distributions</b>	<b>Periodic Distributions</b>
Arkansas – AR	5% of Taxable Amount Distributed as an eligible rollover distribution.  3% of Other Non-Periodic Taxable Amount Distributed.  For Periodic Distributions, please provide ZALICO with a state income tax withholding percentage, otherwise ZALICO will use the [3%] non-periodic percentage, unless you elect out of withholding.	<u>IRA</u> : State income tax will be withheld, except you may elect out of withholding. <u>403(b)</u> : If an eligible rollover distribution, you may not elect out of withholding. If not an eligible rollover distribution, you may elect out of withholding. <u>Nonqualified</u> : State income tax will be withheld, except you may elect out of withholding.	<u>IRA/403(b)/Nonqualified</u> : State income tax will be withheld, except you may elect out of withholding.
California – CA	For Non-Periodic and Periodic Distributions, please provide ZALICO with a state income tax withholding percentage, otherwise ZALICO will withhold 10% of Federal Tax Withholding Applicable, unless you elect out of withholding.	<u>IRA/403(b)/Nonqualified</u> : State income tax will be withheld, except you may elect out of withholding.	<u>IRA/403(b)/Nonqualified</u> : State income tax will be withheld, except you may elect out of withholding.

State	State Tax W/H Calculation	Non-Periodic Distributions	Periodic Distributions
Delaware – DE	<p>5% of Taxable Amount Distributed.</p> <p>For Non-Periodic and Periodic Distributions, other than eligible rollover distributions, ZALICO will not withhold any amounts unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage of at least 5%.</p>	<p><u>IRA</u>: Voluntary withholding (minimum 5%).  <u>403(b)</u>: If an eligible rollover distribution, you may not elect out of withholding. If not an eligible rollover distribution, voluntary withholding (minimum 5%).  <u>Nonqualified</u>: Voluntary withholding (minimum 5%).</p>	<p><u>IRA/403(b)/Nonqualified</u>: Voluntary withholding (minimum 5%).</p>
District of Columbia – DC	<p>8.95% of Taxable Amount of a Lump Sum Distribution.</p> <p>For other Non-Periodic and Periodic Distributions, ZALICO will not withhold any amounts unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>	<p><u>IRA/403(b)</u>: State income tax withholding is required for a lump-sum distribution of the entire balance.</p> <p><u>IRA/403(b)/Nonqualified</u>: Voluntary withholding for non-periodic distributions not described immediately above.</p>	<p><u>IRA/403(b)/Nonqualified</u>: Voluntary withholding.</p>
Georgia – GA	<p>1% to 6% of Taxable Amount Distributed Applicable to Non-Periodic and Periodic Distributions.</p> <p>For Periodic Distributions, please provide ZALICO with a state income tax withholding percentage, otherwise ZALICO will withhold 6% of Taxable Amount Distributed, unless you elect out of withholding.</p>	<p><u>IRA/403(b)/Nonqualified</u>: Voluntary withholding,.</p>	<p><u>IRA/403(b)/Nonqualified</u>: State income tax will be withheld, except you may elect out of withholding.</p>

State	State Tax W/H Calculation	Non-Periodic Distributions	Periodic Distributions
Kansas – KS	<p>5% of Taxable Amount Distributed as an eligible rollover distribution.</p> <p>For Non-Periodic and Periodic Distributions, other than eligible rollover distributions, ZALICO will not withhold any amounts unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>	<p><u>IRA</u>: Voluntary withholding.  <u>403(b)</u>: If an eligible rollover distribution, you may not elect out of withholding. If not an eligible rollover distribution, voluntary withholding.  <u>Nonqualified</u>: Voluntary withholding.</p>	<p><u>IRA/403(b)/Nonqualified</u>: Voluntary withholding.</p>
Maryland – MD	<p>7.75% of Taxable Amount Distributed as an eligible rollover distribution.</p> <p>For Non-Periodic and Periodic Distributions, other than eligible rollover distributions, ZALICO will not withhold any amounts unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>	<p><u>IRA</u>: Voluntary withholding.  <u>403(b)</u>: If an eligible rollover distribution, you may not elect out of withholding. If not an eligible rollover distribution, voluntary withholding.  <u>Nonqualified</u>: Voluntary withholding.</p>	<p><u>IRA/403(b)/Nonqualified</u>: Voluntary withholding.</p>
North Carolina – NC	<p>4% of Taxable Amount Distributed as a Non-Periodic Distribution.</p> <p>For Periodic Distributions, please provide ZALICO with a state income tax withholding percentage, otherwise ZALICO will withhold 4% of Taxable Amount Distributed, unless you elect out of withholding.</p>	<p><u>IRA</u>: State income tax will be withheld, except you may elect out of withholding.  <u>403(b)</u>: If an eligible rollover distribution, you may not elect out of withholding. If not an eligible rollover distribution, you may elect out of withholding.  <u>Nonqualified</u>: State income tax will be withheld, except you may elect out of withholding.</p> <p>If you elect not to have federal income taxes withheld, state income tax will be withheld unless you elect out of state income tax withholding.</p>	<p><u>IRA/403(b)/Nonqualified</u>: State income tax will be withheld, except you may elect out of withholding.</p> <p>If you elect not to have federal income taxes withheld, state income tax will be withheld unless you elect out of state income tax withholding.</p>

State	State Tax W/H Calculation	Non-Periodic Distributions	Periodic Distributions
Oklahoma – OK	<p>5% of Taxable Amount Distributed as a Non-Periodic Distribution.</p> <p>For Periodic Distributions, please provide ZALICO with a state income tax withholding percentage, otherwise ZALICO will withhold 5% of Taxable Amount Distributed, unless you elect out of withholding.</p>	<p><u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld, except you may elect out of state income tax withholding.</p> <p>If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>	<p><u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld, except you may elect out of state income tax withholding.</p> <p>If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>
Oregon – OR	<p>9% of Taxable Amount Distributed as a Non-Periodic Distribution.</p> <p>For Periodic Distributions, please provide ZALICO with a state income tax withholding percentage, otherwise ZALICO will withhold 9% of Taxable Amount Distributed, unless you elect out of withholding.</p>	<p><u>IRA:</u> State income tax withholding is required whenever federal income tax is withheld, except you may elect out of state income tax withholding.</p> <p><u>403(b):</u> If an eligible rollover distribution, you may not elect out of withholding. If not an eligible rollover distribution, you may elect out of withholding.</p> <p><u>Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld, except you may elect out of state income tax withholding.</p> <p>If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>	<p><u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld, except you may elect out of state income tax withholding.</p> <p>If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>
Vermont – VT	<p>24% of Federal Tax Amount Withheld from a Non-Periodic Distribution.</p> <p>For Periodic Distributions, please provide ZALICO with a state income tax withholding percentage, otherwise ZALICO will withhold 24% of Federal Tax Amount Withheld, unless you elect out of withholding.</p>	<p><u>IRA:</u> State income tax will be withheld, except you may elect out of withholding.</p> <p><u>403(b):</u> If an eligible rollover distribution, you may not elect out of withholding. If not an eligible rollover distribution, you may elect out of withholding.</p> <p><u>Nonqualified:</u> State income tax will be withheld, except you may elect out of withholding.</p>	<p><u>IRA/403(b)/Nonqualified:</u> State income tax will be withheld, except you may elect out of withholding.</p>

**Mandatory State Income Tax Withholding When Federal Income Tax is Withheld**

The following states require ZALICO to withhold state income taxes from distributions when federal income tax is withheld from a distribution and permit you to elect to withhold state income taxes even if you elect to have federal income taxes not withheld. Included in the table are the amounts generally withheld for state income taxes.

State	State Tax W/H Calculation	Non-Periodic Distributions	Periodic Distributions
Iowa - IA	5% of Taxable Amount of Non-Periodic and Periodic Distributions.	<p><u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld.</p> <p>If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>	<p><u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld.</p> <p>If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>
Maine - ME	<p>5% of Taxable Amount Distributed as a Non-Periodic Distribution.</p> <p>For Periodic Distributions, please provide ZALICO with a state income tax withholding percentage, otherwise ZALICO will withhold 5% of Taxable Amount Distributed.</p>	<p><u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld.</p> <p>If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>	<p><u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld.</p> <p>If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>
Massachusetts - MA	5.10% of Taxable Amount of Non-Periodic and Periodic Distributions .	<p><u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld.</p> <p>If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>	<p><u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld.</p> <p>If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.</p>

<b>State</b>	<b>State Tax W/H Calculation</b>	<b>Non-Periodic Distributions</b>	<b>Periodic Distributions</b>
Nebraska - NE	5% of Taxable Amount Distributed as a Non-Periodic Distribution.  For Periodic Distributions, please provide ZALICO with a state income tax withholding percentage, otherwise ZALICO will withhold 5% of Taxable Amount Distributed.	<u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld.  If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.	<u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld.  If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.
Virginia - VA	4% of Taxable Amount Distributed as a Non-Periodic Distribution.  For Periodic Distributions, please provide ZALICO with a state income tax withholding percentage, otherwise ZALICO will withhold 4% of Taxable Amount Distributed.	<u>IRA:</u> ZALICO will not withhold state income taxes.  <u>403(b)/ Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld.  If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.	<u>IRA:</u> ZALICO will not withhold state income taxes.  <u>403(b)/ Nonqualified:</u> State income tax withholding is required whenever federal income tax is withheld.  If you elect not to have federal income taxes withheld, state income tax also will not be withheld unless you elect state income tax withholding, in which case please provide ZALICO with a state income tax withholding percentage.

**Mandatory State Income Tax Withholding on all taxable distribution**

The following states require ZALICO to withhold state income taxes on all taxable distributions with or without federal income tax withheld. Included in the table are the amounts generally withheld for state income taxes.

<b>State</b>	<b>State Tax W/H Calculation</b>	<b>Non-Periodic Distributions</b>	<b>Periodic Distributions</b>
Michigan - MI	4.25% of Taxable Amount Non-Periodic and Periodic Distributions.	<u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required on all taxable distributions.	<u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required on all taxable distributions.
Connecticut - CT	6.99% of Taxable Amount Non-Periodic and Periodic Distribution.	<u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required on all taxable distributions.	<u>IRA/403(b)/Nonqualified:</u> State income tax withholding is required on all taxable distributions.