

Section B: Required Minimum Distribution (RMD) (check only one option) (continued)

You will need the company to provide the appropriate values for the calculation in order to properly calculate your RMD if you choose Option 2 or Option 3.

 Option 2 – You will calculate your RMD

Please distribute my RMD from the contract listed above for this distribution year only. I certify that I have calculated the amount of my RMD using the appropriate values provided by the company. I understand that I am responsible for any penalties or liability which may result in my failure to instruct the Company to distribute my RMD for succeeding distribution years.

RMD Amount: \$ _____

 Option 3 - You would like to take multiple RMD distributions from this contract

I have calculated my RMD for this distribution year separately for each IRA I own. I certify that I have used the appropriate values provided by the company in my calculation.

I wish to withdraw \$ _____ for this current distribution year from the contract listed above.

Please Note: To withdraw funds from one contract to satisfy required minimum distribution requirements for another contract, the contract must be the same contract type.

Section C: Tax Withholding

Please Note: This section is not applicable for custodial owned contracts.

C1: Federal Income Tax Withholding

Regardless of whether federal income tax is withheld, you are liable for taxes on the taxable portion of the payment. If you do not have enough withheld, you may be subject to tax penalties under the Estimated Tax Payment rules. **The company will withhold using the default rate of 10% unless you opt out of withholding below or make an alternate election on IRS Form W-4R.** This withholding election form and instructions can be obtained at www.irs.gov or by calling us at the number shown on page 1. Once a payment has been issued, withholding cannot be changed.

Withholding Election:

- DO NOT WITHHOLD** federal income tax from my payment
- WITHHOLD** the default rate of 10% from my payment for federal income tax
- WITHHOLD** federal income tax based on the included IRS Form W-4R*
- *If the IRS Form W-4R is not included with this form, then the default rate will be applied**

C2: State Income Tax Withholding

State withholding requirements vary widely and can be dependent upon factors such as the type of contract or distribution, whether federal withholding is being applied and the age of the payee. You are encouraged to consult a tax advisor or review your State Tax Department's website for requirements applicable to your situation before making your state withholding election. If you do not make an election or if your election does not meet the requirements mandated by your state of residence, including making the election on the state specific withholding election form if applicable, we will apply the state default or mandatory withholding rate.

- DO NOT WITHHOLD** state income tax from my payment (*Must meet state requirements*)
- WITHHOLD** the default rate from my payment for state income tax
- WITHHOLD** the following amount or percentage from my payment for state income tax: _____
 (*Must meet state requirements*)

Section D: Distribution Instructions
D1: U.S. Mail / Express Mail
Please choose one:

- Please mail check(s) to the Owner's address of record.
- Please mail check(s) to the address listed below.
- Please send check(s) by express mail. A delivery fee of \$20 will be charged.
(For street addresses only. Express mail is not deliverable to a P.O. Box.)

Mailing Address <i>(if different from Owner's Address)</i>	City/Town	State	Zip Code
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D2: Electronic Funds Transfer
Important Notes

- Following our receipt of this form, your first distribution may be in the form of a physical check sent directly to the current address of record.
- Electronic settlement of funds into your account may take up to three (3) business days after the effective date of your withdrawal.
- A voided check or a letter confirming routing and account information from your bank, on bank letterhead, is **REQUIRED**. No temporary checks will be accepted.

Please choose one:

- Please direct deposit my distribution to my **checking** account listed below.
*(A voided check is **REQUIRED** in Section D4.)*
- Please direct deposit my distribution to my **savings** account listed below.
*(A letter confirming your bank account information is **REQUIRED** for savings accounts.)*

Bank Account Number	Full Name of Bank	Branch Location
9 Digit Routing Number	Contact Person <i>(if any)</i>	Branch Telephone Number

D3. Brokerage Account – CUSTODIAL OWNED ACCOUNTS ONLY
Important Notes

- For Custodial owned contracts, distribution will be sent directly to the Brokerage Account on record.
- Acceptance of electronic payments may vary by firm.

D4: Voided Check

Attach voided check here. Please use tape instead of staples.

John Q. Public 0000
 123 Main Street
 Anywhere, ST 00000-0000

Pay to the order of _____ \$ _____ Dollars

Any Bank
 Anytown, ST 00000

MEMO _____

[:000000000:] 0000000000 XXXX

↓
Bank Routing Number

↓
Account Number

Section E: Certification and Signature(s)

By signing below, I acknowledge and understand the following:

- If I make an unscheduled withdrawal while the RMD Option is in effect, any amount distributed will be credited toward the annual amount required to be made under the RMD option, to the extent that the total required minimum distribution for that year has not been satisfied. Required minimum distributions for the remainder of that year will be prorated.
- That I can terminate this Agreement at any time by notifying the Company in writing.
- The elections made under this Agreement may restrict the available payment options under this contract and may also limit the options available to me under another RMD Agreement.
- The Company is furnishing this form and participating in this transaction at my specific request and has made no representation that the above distribution schedule will fulfill my specific tax obligations. I have been advised by the Company that I should discuss the tax consequences of this transaction with my own tax or legal advisor. Neither the Company, nor any of its officers, employees, or agents, may provide tax or legal advice, and I have not relied on any of these parties for such advice.
- The Company will calculate distributions from this contract in a fashion that satisfied IRS Guidelines and seeks to avoid any federal excise, or penalty taxes, provided that (a) all information that I provide is accurate and complete, and (b) I immediately notify the Company of any changes which will affect my calculation.
- If the owner lives in a community property state, the owner's spouse must also sign.

I certify that I have read and understand all of this form and that I have completed all applicable sections to the best of my knowledge.

Voluntary Use of Client Initiated Electronic Signature: *If you, the Owner (or POA or Custodian, if applicable) have voluntarily chosen to utilize an electronic signature to effectuate the transaction(s) set forth in this form by using an electronic process, technology or solution not offered or provided to you by the Company, then by applying your electronic signature to this form you agree to the following: (1) you agree the signature used on this form will be the electronic representation of your signature for all purposes; (2) you have reviewed and agree to be bound by all terms and conditions of this form you have signed electronically; (3) you understand that this form will be deemed to be signed in the United States; and (4) you will provide the Company with the required certificate of completion and audit trail that was generated by the electronic signature process you used to sign this form.*

Section E: Certification and Signature(s) (continued)
US TAXPAYER CERTIFICATION:

By submitting this form, I am certifying under penalties of perjury, that:

1. The Taxpayer Identification Number that appears on this form is correct,
2. I have not been notified by the IRS that I am subject to backup withholding or I am no longer subject to backup withholding¹, and
3. I am a U.S. Citizen or other U.S. Person (including a person qualifying as a U.S. Resident Alien)

¹If you are subject to back-up withholding, you must strike through statement number 2.

NON-RESIDENT ALIEN STATUS:

If you are a Non-Resident Alien, the US Taxpayer certification language above does not apply to you. Please check the box and provide your country of residence below.

 Under penalties of perjury, I certify that I am a Non-Resident Alien, and my country of residence is: _____

Taxable amounts paid to you will be subject to 30% withholding, unless you submit an IRS Form W-8, and are entitled to claim a reduced rate of withholding under the applicable US tax treaty.

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

Owner Signature	Owner Printed Name	Date (mm/dd/yyyy)
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If you live in a Community Property State (AZ, CA, ID, LA, NM, NV, TX, WA, and WI), we are required to have Spousal Consent to surrender your policy(s). This form will be returned if this section is not complete.

 If you do not have a spouse, or if your spouse is deceased, check this box.

Spouse's Signature	Date (mm/dd/yyyy)
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Notary/Signature Guarantee (if applicable)	Date (mm/dd/yyyy)
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This form can be submitted as follows:

U.S. Mail or Private Express Carrier: Forethought Life Insurance Company 123 Town Square Place PMB 711 Jersey City, NJ 07310	Submit Via Fax: Please fax to (855) 299-0104 Submit Via E-mail: GAOperations@email.gafg.com	Questions? Please contact us at: (833) ASK-GA4U (833) 275-4248 Our Website is: www.globalatlantic.com
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This information is intended to provide educational information about the features and mechanics of the product. It should not be considered, and does not constitute, personalized investment advice. The issuing insurance company is not an investment adviser. It's not acting in any fiduciary capacity with respect to any contract and/or investment.