

**PARTIAL DISTRIBUTION  
PRIOR TO ISSUE REQUEST**

**EquiTrust Life Insurance Company®**

7100 Westown Parkway, Suite 200  
West Des Moines, Iowa 50266-2521  
(866) 598-3692 Fax: (515) 226-5103

[www.EquiTrust.com](http://www.EquiTrust.com)

Mailing Address: PO Box 14500  
Des Moines, Iowa 50306-3500

Distribution prior to issue is subject to the following guidelines:

- EquiTrust is unable to process a distribution prior to issue if the check received by EquiTrust is a third-party check made payable to the Contract Owner.
- Money being transferred to EquiTrust must either be Qualified Funds (and funding an EquiTrust IRA Contract) or Non-Qualified Funds (and not from another Annuity Contract or Life Policy) in order to request a distribution prior to issue.
- At least 50% of the Funds must stay with the EquiTrust Contract at issue.
- Distributions will be made payable by check to the Contract Owner or to a financial institution for the benefit of the Contract Owner.
- A distribution prior to issue may be classified as "taxable income" and, when appropriate, a Form 1099-R will be sent to the Contract Owner.
- A 10% penalty tax from the IRS may apply if the Contract Owner is under 59 ½ years of age.

**1. TRANSFER/EXCHANGE REQUEST**

This form is required when requesting a distribution prior to the EquiTrust Annuity Contract being issued.

Pending EquiTrust Contract Number	
Owner Full Name	Owner SSN or TIN
Joint Owner Full Name (if applicable)	Joint Owner SSN or TIN

**2. TAX QUALIFICATION AND REQUEST**

Tax Qualification of EquiTrust Contract (select one): <input type="checkbox"/> Non-Qualified <input type="checkbox"/> IRA <b><i>EquiTrust is unable to process a distribution prior to issue if the funds are coming via a 1035 Exchange.</i></b>	
Name of Distributing Plan/Company:	Contract Number Being Exchanged/Transferred:
Anticipated Premium for pending Contract:	Distribution Amount Requested:
Where Distribution is being sent (select one): <input type="checkbox"/> Contract Owner (a check will be mailed to the address on the Annuity Contract application) <input type="checkbox"/> Other Financial Institution _____ <b><i>(Letter of Acceptance, Corporate Resolution and transfer paperwork are required)</i></b>	

### 3. TAX WITHHOLDING ELECTION (REQUIRED)

#### Federal Income Tax Withholding Information:

Federal withholding applies to the taxable portion of any payment made from your annuity contract or life insurance policy. Your withholding rate is determined by the type of payment you receive.

**NOTE: If you do not make a proper withholding election with your request, we will withhold federal income tax according to the mandatory rate required under law. You may be able to claim a credit for any amounts withheld when you file your tax return with the IRS.**

#### Nonperiodic Payments:

- For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate apply by submitting **IRS Form W-4R** (Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions) and entering a rate between 1% and 100%. You may also choose to not have federal withholding apply.
- For an eligible rollover distribution, the default withholding rate is 20%. You can choose a rate greater than 20% by submitting **IRS Form W-4R**, but you may not choose a rate less than 20%.
- Generally, you can't choose federal withholding less than 10% for payments to be delivered outside the United States and its territories.

#### (select one option only)

- ☐ Do not withhold federal income tax for my payment.
- ☐ Withholding federal income tax at the applicable default rate of 10% or 20% as defined above.
- ☐ Withhold federal income tax based upon the submitted **IRS Form W-4R**.
- ☐ Withhold federal income tax at the rate of \_\_\_\_\_% or withhold the flat amount of \$\_\_\_\_\_.
- You can access **IRS Form W-4R** (Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions) [here](#) and on the IRS website at IRS.gov

#### State Income Tax Withholding Information:

If you reside in the US, your state of residence may require or permit us to withhold state income tax. Some states may require you to use specific state forms. If you do not use the proper form or otherwise fail to properly communicate your withholding choice to us, we may withhold in accordance with state default withholding rules. It is your responsibility to determine any applicable state forms that may be required and to provide them to us.

- If your state allows voluntary withholding, you may be able to choose a state withholding rate that differs from the default rate or you may choose not to have state withholding apply.
- No state tax withholding will be taken for states where withholding is not available.
- If your state requires withholding at an amount greater than that indicated below, we will withhold the amount required by your state.
- State specific tax withholding requirements are subject to change at any time. Please consult a tax preparer or your state Department of Revenue for more information.

#### (select one option only)

- ☐ Do not withhold state income tax for my payment (if allowed).
- ☐ Withhold state income tax at the default rate applicable for my state.
- ☐ Withhold state income tax at the rate of \_\_\_\_\_% or withhold the flat amount of \$\_\_\_\_\_ (if allowed).

#### Additional Withholding Information:

If you elect not to have withholding apply to your distribution, or if you do not have enough tax withheld, you may be responsible for payment of estimated tax. You may also be subject to tax penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient. Subject to specific exceptions under the Internal Revenue Code, any taxable distribution from an annuity contract prior to age 59½ may be subject to a 10% excise tax.

#### 4. SIGNATURES

***This information contained in this form should not be construed as tax advice. You may wish to consult with a tax advisor regarding the Federal, state and local tax consequences of a distribution prior to issue transaction***

Owner Signature	Date
Joint Owner Signature (if applicable)	Date
Spouse Signature (if required)	Date

**Note:** If the Owner is a corporation, an officer must sign (including title).  
If the Owner is a trust, a trustee must sign as "trustee".

**Spouse signature is required where community property laws are applicable. State jurisdictions with community property laws are Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, and Wisconsin.**

**Unless EquiTrust has been notified of a community or marital property interest in this Contract, EquiTrust will rely on its good faith belief that no such interest exists and will assume no responsibility for inquiry.**