Non-Spouse, Trust, Estate or Entity Beneficiary IRA Inheritance Request Form



Mail completed form to: Lord Abbett Funds Service Center, P.O. Box 534489, Pittsburgh, PA 15253-4489

Overnight mail: Lord Abbett Funds Service Center, Attention: 534489, 500 Ross Street, 154-0520, Pittsburgh, PA 15262

Fax: 844-761-0139 (Advisors are permitted to fax in paperwork provided the Medallion Signature Guarantee is legible. Shareholders are permitted to fax in paperwork provided a Medallion Signature Guarantee is not required.)

Call Lord Abbett for assistance: 888-522-2388 (Monday – Friday between 8:00 a.m. and 5:30 p.m. ET)

The following IRA owner has passed. I am requesting that you transfer ownership of the inherited proceeds to me as the non-spouse, trust, estate or entity beneficiary.

STEP 1: ORIGINAL IRA OWNER'S INFORMATION					
Original IRA Owner's Name (First Name, MI, Last Name)	Original IRA Owner's Account I	Original IRA Owner's Account Number			
☐ Roth IRA ☐ Traditional IRA / SEP IRA					
*For Traditional, SEP and SIMPLE IRAs - If the IRA owner's death occurred on or a distributed their RMD amount due for the year of death, the Custodian will distributed satisfied from another IRA					
☐ As the designated beneficiary, trustee, executor, or personal representative, I ¹Required Beginning Date is April 1 of the year after the year the owner turned agreaches age 73 for owners born on or after July 1, 1949.					
Original IRA Owner's Birth Date of Birth	Original IRA Owner's Date of D	Original IRA Owner's Date of Death			
Check All that Apply:					
\square Death Certificate: \square Is attached or \square Was provided under sepa	arate cover				
☐ If applicable, a notorized affidavit of domicile ("AOD"): ☐ Is atta	ached or Was provided under separate cover				
☐ If applicable, an inheritance tax waiver: ☐ Is attached or ☐ Wa	·				
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STEP 2: BENEFICIARY INFORMATION – Complete A or B					
This request is made in accordance with the IRA owner's beneficiar	y designation or under the terms of the benefici	ary default pro	visions.		
IF YOU ARE A SPOUSE BENEFICIARY, PLEASE COMPLETE THE SPO					
In my capacity, I am requesting the portion of the decedent's IRA that liquidated as instructed.	at the below listed beneficiary is entitled to be tr	ansferred into	an inherited IRA or		
A. Non-Spouse Beneficiary - Living Person					
Beneficiary's Name (First Name, MI, Last Name)	Beneficiary's Social Security Number	Beneficiary's Date of Birth ²			
Beneficiary's Street Address	City	State	Zip Code		
RESPONSIBLE INDIVIDUAL ² (First Name, MI, Last Name)	Responsible Individual's Social Security Number	Responsible Individual's Date of Birth²			

 $^{^2}$ This form must be signed by the parent or legal guardian of the beneficiary as responsible individual if the beneficiary is a minor under state law.

STEP 2: BENEFICIARY INFORMATION - Complete A or B (Continu	ed)			
B. Non-Spouse Beneficiary – Entity: Please Select 1, 2 or 3 1. Estate 2. Trust 3. Other Entity Entity's Tax ID:	Do not list the decedent's Social Security Number. Please refer to IRS Form SS-4, Application for Employer Identification Number.			
Name of Entity Beneficiary (Estate of deceased owner / name and date of trust	t / other example: charitable orga	nization or foundation)		
Street Address of the Beneficiary	City	State Zip Code		
PLEASE COMPLETE BELOW FOR THE INDIVIDUAL SIGNING THIS FORM ON BEHAL If more than individual is required to sign, please attach a separate sheet and		orized individual.		
Authorized Individual (First Name, MI, Last Name)				
Authorized Individual Title	Authorized Individual Date of Birth	vidual Authorized Individual Social Security Number		
STEP 3: INHERITANCE ELECTION - Please read all options careful	lly. (Select either A or B)			
 A. □ Establish an Inherited IRA Account with the attached application for the systematic, partial, or future year inheritance distributions (reported on Intition). Please complete and attach a LORD ABBETT NON-SPOUSE, TRUST, ESTA AGREEMENT. The inherited proceeds will be transferred into the same invicomplete.) 	ernal Revenue Service (IRS) Form TE OR ENTITIY INHERITED IRA AG	n 1099-R, under Code 4 - death distribu	N	
Note : To establish required minimum life expectancy distributions, also col)RM.	
B. Liquidate in full (entire balance) as a reportable distribution. I understa distribution (Code 4), under the name and Tax ID of the non-spouse benefic	iary, estate, trust, or other entity.			
Note : You must also complete the Tax Withholding Election section. I authorinstructions to mail a check to an alternate address or transfer funds elect				
☐ Mail Check to Alternate Address¹				
Street Address or PO Box	City	State Zip Code		
¹ Please provide an alternate address for delivery of the check if you do not war payable directly to the beneficiary, the Custodian will not issue a check payable underlying beneficiary(ies) of a trust or estate.	nt a check mailed to the beneficia e to a third party, including, but no	ry street address. The check will be m ot limited to, a check payable to the	nade	
☐ Transfer Funds Electronically via ACH* (voided check or savings deposit slip	required)	ngs		
Bank Name				
Bank Routing Number	Bank Account Number			
Bank Account Registration* *The Bank Account Registration must include the Non-Spouse, Trust, Estate or Entity B	eneficiary			
Bank Account Address ² (PO Box or Street)	City	State Zip Code		
² The address the bank has on record for the owner of the bank account.				

STEP 4: TAX WITHHOLDING

Continued on next page

be receiving amounts that are not subject to withholdin withholding on the payments. If you elect to have no fed	d out of withholding. Tax will be withheld on the gross amount o ig because they are excluded from gross income. This withholdi deral taxes withheld from your distribution, or if you do not have e for the payment of estimated tax. You may incur penalties und ent.	ing procedure may result in excess e enough federal income tax
lacksquare Do not withhold federal income tax from my dis	tributions.*	
\square I elect federal income tax withholding of	%. (Must be a whole percent, you may elect any rate from 19	% to 100%.]*
<u> </u>	ate for Nonperiodic Payments which has the Marginal Rate Tab se these tables and instructions to help you select the appropri	
*Generally, you can't elect less than 10% federal in	ncome tax withholding for payments to be delivered outside the	United States and its possessions.
ng may require state income tax to be withheld from pa federal tax election. Voluntary states let individuals dete	ine your state income tax withholding requirements, if any. Thos ayments if federal income taxes are withheld or may mandate a ermine whether they want state taxes withheld. Some states ha te's tax authority for additional information on your state requir	a fixed amount regardless of your ave no income tax on retirement
\square I elect NOT TO have state income tax withheld fr state tax withholding).	rom my retirement account distributions (only for residents of s	states that do not require mandatory
\square I elect T0 have the following dollar amount or p of states that allow voluntary state tax withholding	percentage withheld from my retirement account distribution for %	r state income taxes (for residents
STEP 5: AUTHORIZED SIGNATURE		
agent of each has given no tax or legal advice to me, and th authorized to act as instructed. The Custodian may conclus assume responsibility for any adverse consequences, whic	hat all information provided is true and accurate. I further certify the nat all decisions regarding the elections made on this form are my obsively rely on this certification and authorization without further involved may arise from the election(s) and agree that the Custodian, Loromless, for any tax, legal or other consequences of the election(s) In	own. The Custodian is hereby restigation or inquiry. I expressly d Abbett, and their agents shall in no
1. The number shown on this form is my correct taxpayer	identification number, 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 IRS that I am subject	to backup withholding as a result of a failure to report all interes	st 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 (as defined in th	ne Form W-9 instructions found at www.irs.gov).	
4. The FATCA code(s) entered on this form (if any) indicati	ing that I am exempt from FATCA reporting is correct.	
Cross out item 2 above if the IRS has notified you that you dividends on your tax return.	are currently subject to backup withholding because you have fai	iled to report all interest and
The IRS does not require your consent to any provision of	this document other than the certifications required to avoid back	up withholding.
Signature (Beneficairy, Responsible Individual, or Authori	zed Individual for Entity, Executor, Trustee, Officer, etc.)	Date
Custodian: BNY Mellon Investment Servicing Trust Compar	ny, P.O. Box 534489, Pittsburgh, PA 15253-44896.	

Federal Withholding: Federal income tax will be withheld at the rate of 10% from any distribution, subject to the IRS withholding rules, unless you elect a

STEP 6: MEDALLION SIGNATURE*

*Medallion Stamp is Required to Transfer Ownership

A Medallion Signature Guarantee Stamp and Signature (If required):

An eligible guarantor is a domestic bank or trust company, securities broker/dealer, clearing agency or savings association that participates in a medallion program recognized by the Securities Transfer Agents Association. The three recognized medallion programs are the Securities Transfer Agents Medallion Program (known as STAMP), Stock Exchanges Medallion Program (SEMP), and the Medallion Signature Program (MSP). A notarization from a notary public is NOT an acceptable substitute for a signature guarantee.

Beneficiary capacity is maintained by the Custodian as part of the original IRA owner's account records and the guarantor is not certifying the beneficiary status.

Please place Medallion Signature Guarantee here.

Substitute W-4R 2024 - Withholding Certificate for Nonperiodic Payments - For use with IRAs ONLY

Where instructed to provide your withholding election on "line 2" use the space provided on the attached form under "Federal Income Withholding Election."

2024 Marginal Rate Tables

You may use these tables to help you select the appropriate withholding rate for this payment or distribution. Add your income from all sources and use the column that matches your filing status to find the corresponding rate of withholding. See below for more information on how to use this table.

Single or Married filing Separately Ma			Married filing jointly		Head of household	
		or Qualifying surv				
Total income over—	Tax rate for every dollar more	Total income over—	Tax rate for every dollar more	Total income over—	Tax rate for every dollar more	
\$0	0%	\$0	0%	\$0	0%	
14,600	10%	29,200	10%	21,900	10%	
26,200	12%	52,400	12%	38,450	12%	
61,750	22%	123,500	22%	85,000	22%	
115,125	24%	230,250	24%	122,400	24%	
206,550	32%	413,100	32%	213,850	32%	
258,325	35%	516,650	35%	265,600	35%	
623,950*	37%	760,400	37%	631,250	37%	
*If married filing separately, use \$380,200 instead for this 37% rate.						

General Instructions: Section references are to the Internal Revenue Code.

Future developments. For the latest information about any future developments related to Form W-4R, such as legislation enacted after it was published, go to www.irs.gov/FormW4R.

Purpose of form. Complete Form W-4R to have payers withhold the correct amount of federal income tax from your nonperiodic payment from an employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See below for the rules and options that are available for each type of payment.

Caution: If you have too little tax withheld, you will generally owe tax when you file your tax return and may owe a penalty unless you make timely payments of estimated tax. If too much tax is withheld, you will generally be due a refund when you file your tax return. Your withholding choice (or an election not to have withholding on a nonperiodic payment) will generally apply to any future payment from the same plan or IRA. Submit a new Form W-4R if you want to change your election.

Nonperiodic payments—10% withholding. Your payer must withhold at a default 10% rate from the taxable amount of nonperiodic payments unless you enter a different rate on line 2. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. Note that the default rate of withholding may not be appropriate for your tax situation. You may choose to have no federal income tax withheld by entering "-0-" on line 2. See the specific instructions below for more information. Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including "-0-") on any payments to be delivered outside the United States and its territories .

Note: If you don't give Form W-4R to your payer, you don't provide an SSN, or the IRS notifies the payer that you gave an incorrect SSN, then the payer must withhold 10% of the payment for federal income tax and can't honor requests to have a lower (or no) amount withheld. Generally, for payments that began before 2024, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

Payments to nonresident aliens and foreign estates. Do not use Form W-4R. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for more information.

Tax relief for victims of terrorist attacks. If your disability payments for injuries incurred as a direct result of a terrorist attack are not taxable, enter "-0-" on line 2. See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

Specific Instructions

Line 2 - More withholding. If you want more than the default rate withheld from your payment, you may enter a higher rate on line 2.

Less withholding (nonperiodic payments only). If permitted, you may enter a lower rate on line 2 (including "-0-") if you want less than the 10% default rate withheld from your payment. If you have already paid, or plan to pay, your tax on this payment through other withholding or estimated tax payments, you may want to enter "-0-".

Suggestion for determining withholding. Consider using the Marginal Rate Tables above to help you select the appropriate withholding rate for this payment or distribution. The tables are most accurate if the appropriate amount of tax on all other sources of income, deductions, and credits has been paid through other withholding or estimated tax payments. If the appropriate amount of tax on those sources of income has not been paid through other

withholding or estimated tax payments, you can pay that tax through withholding on this payment by entering a rate that is greater than the rate in the Marginal Rate Tables

The marginal tax rate is the rate of tax on each additional dollar of income you receive above a particular amount of income. You can use the table for your filing status as a guide to find a rate of withholding for amounts above the total income level in the table.

To determine the appropriate rate of withholding from the table, do the following. Step 1: Find the rate that corresponds with your total income not including the payment. Step 2: Add your total income and the taxable amount of the payment and find the corresponding rate.

If these two rates are the same, enter that rate on line 2. (See Example 1 below.)

If the two rates differ, multiply (a) the amount in the lower rate bracket by the rate for that bracket, and (b) the amount in the higher rate bracket by the rate for that bracket. Add these two numbers; this is the expected tax for this payment. To get the rate to have withheld, divide this amount by the taxable amount of the payment. Round up to the next whole number and enter that rate on line 2. (See Example 2 below.)

If you prefer a simpler approach (but one that may lead to overwithholding), find the rate that corresponds to your total income including the payment and enter that rate on line 2.

Examples. Assume the following facts for Examples 1 and 2. Your filing status is single. You expect the taxable amount of your payment to be \$20,000. Appropriate amounts have been withheld for all other sources of income and any deductions or credits.

Example 1. You expect your total income to be \$62,000 without the payment. Step 1: Because your total income without the payment, \$62,000, is greater than \$61,750 but less than \$115.125, the corresponding rate is 22%. Step 2: Because your total income with the payment. \$82,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Because these two rates are the same, enter "22" on line 2.

Example 2. You expect your total income to be \$43,700 without the payment. Step 1: Because your total income without the payment, \$43,700, is greater than \$26,200 but less than \$61,750, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$63,700 is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. The two rates differ. \$18,050 of the \$20,000 payment is in the lower bracket (\$61,750 less your total income of \$43,700 without the payment), and \$1,950 is in the higher bracket (\$20,000 less the \$18.050 that is in the lower bracket). Multiply \$18.050 by 12% to get \$2.166. Multiply \$1,950 by 22% to get \$429. The sum of these two amounts is \$2,595. This is the estimated tax on your payment. This amount corresponds to 13% of the \$20,000 payment (\$2,595 divided by \$20,000). Enter "13" on line 2.