

2022 REQUIRED MINIMUM DISTRIBUTION FORM

The Setting Every Community Up for Retirement Enhancement Act of 2019 (SECURE Act) became law on December 20, 2019. The Secure Act made major changes to the Required Minimum Distribution (RMD) rules. If you reached the age of $70\frac{1}{2}$ in 2019, the prior rule applies, and you must take your first RMD by April 1, 2020, and the second RMD by December 31, 2020 and every year thereafter. If you reach age $70\frac{1}{2}$ in 2020 or later, you must take your first RMD by April 1 of the year after you reach 72, and the second RMD by December 31^{st} and every year thereafter. If you are still employed and not a 5% owner, you may defer the start of your RMD distributions until the April 1^{st} after you retire.

Our office must receive this Form no later than December 1st, 2022, to ensure the distribution is completed by the end of the year. If you do not receive your RMD before the deadline, the IRS may penalize you. Please complete Section I, Section II OR Section III, and Section IV and sign the form. The form may be faxed, uploaded, mailed or e-mailed to support@planperf.com. You must complete this form each year unless you elect to receive your distribution automatically in Section III.

SECTION I

Plan Name:						
Participant Name:						
Address:						
		Zip:				
Social Security No.: XXX	<-XX	Date of Birth:				
Phone Number:		Fmail:				

SECTION II

□ **Election to Defer RMD Distribution** - IMPORTANT: You must be still employed by the Plan Sponsor and not a 5% owner of the Company. Complete this Section only if you elect to defer your RMD payment until April 1st following your retirement date.

Having reached the age of 72 (age 70% if born before July 1, 1949), I understand that I am entitled to receive distributions from the Plan in an amount necessary to satisfy Internal Revenue Code section 401(a)(9) as in effect before amendments were made by the Small Job Protection Act of 1996. I understand that because I have yet to separate from service with the Employer and am not a 5% owner of the Employer, I am no longer required by law to begin receiving distributions until such time as I do separate from service with the Employer.

In accordance with Internal Revenue Service Revenue Procedure 2003-10, I hereby elect to defer the distributions required under the terms of the Plan until such time as distributions from the Plan are required to be made under the law.



Partici	pant Signature		Date	
SECTI	ON III – Election to re	ceive RMD. Sel	ect Option 1 or 2	
Ор	otion 1			
	year and then automatic by Plan Perfect, Inc. on t processed each year pric my RMD check will be m If I do not receive my RM I understand the RMD is	ally each year withe RMD calculation to July 31st, unailed to me along MD by July 31st, I my responsibility	STRIBUTION : I elect to receive my RMD this ith my current election for withholding as calculation statement. I understand my RMD will be aless and until I cancel this request. I understand with the current year RMD calculation statemed will contact Plan Perfect, Inc. at 1-888-532-752 and hold Plan Perfect, Inc. harmless for any nc. with any address changes.	nd nt.
Op	otion 2			
			ID DISTRIBUTION : I elect to receive my RMD in the RMD calculation statement.	this
SECTI	ON IV – Withholding E	lection for Fede	eral And State Taxes	
		l plan or IRA. A	DING ELECTION . The RMD is not eligible to although the RMD is not subject to the mandath thholding:	
		ncome tax withhe	withheld from my benefit payment. Eld from my benefit payment. Please note we do ions less than \$200.00.	0
	Please withhold	% or \$	from my distribution.	
qualifi	ORTH CAROLINA AND	VIRGINIA. The h the RMD is no	NG ELECTION FOR PARTICIPANTS WHO Line RMD is not eligible to be rolled over to another subject to the mandatory withholding, you reline and Virginia:	ther
		ome tax withheld	vithheld from my benefit payment. From my benefit payment. Please note we do r less than \$200.00.	not
	Please withhold	% or \$	from my distribution	



Participant Signature	Date