IRA One-Time Distribution Form



Use this form for a one-time full or partial distribution from a Traditional IRA, Roth IRA or SEP IRA. Please contact your tax advisor regarding your specific tax obligation or potential IRS penalties that may apply to your distribution. This form is not intended for required minimum distributions, trustee to trustee transfers, recharacterizations, or conversion requests. For trustee to trustee transfers, please complete the appropriate receiving custodian's trustee to trustee transfer form. This form is not intended to facilitate a beneficiary/inherited IRA transfer due to death. For revocations, refer to the Traditional and Roth Individual Retirement Account (IRA) Combined Disclosure Statement for instructions and information regarding your revocation rights. All required documentation must be received in good order before the distribution request can be honored. All legal documents must be certified and a Medallion Signature Guarantee may be required. Please see Step 8 for an explanation of the Medallion Signature Guarantee.

FOR TRADITIONAL IRA, ROTH IRA OR SEP IRA

To list more funds, please attach a separate page.

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)

STEP 1: ACCOUN	NT REGISTRATION INFORMATION					
Owner Name (First Name, MI, Last Name)		Mobile Nu	Mobile Number		Alternate Phone Number	
Date of Birth	Street Address	City		State	Zip Code	
ccount Number		Social Sec	Social Security Number			
complete the followi	ng if you are a beneficiary requesting a full lic	juidation of the inherited proceed	ls.			
Beneficiary Name (F	First Name, MI, Last Name)	Mobile Nu	Mobile Number		Alternate Phone Number	
Date of Birth	Street Address	City		State	Zip Code	
Social Security Num	ber					
STEP 2A: TYPE (DF ACCOUNT (Select One)					
☐ Traditional IRA / I	Rollover IRA 🔲 Roth IRA 🔲 SEP IRA					
STEP 2: DISTRIB	BUTION REQUEST (Choose either optic	on 1 or 2)				
1 🗖 Liquidate Enti	re Account					
•	e-time partial distribution:					
Partial distributions	will be taken proportionately across all fund	as unless specific funds and am	ounts are indica	ated below:		
Fund Name		Share Class	re Class Dollar Amount Percentage (wh			
4.						

1

STEP 3: DISTRIBUTION REASON (Choose only one distribution reason.)

A. FROM A TRADITIONAL, ROLLOVER OR SEP IRA
The distribution is being made for the following reason
\square 1. Normal distribution - You are age 59½ or older.
□ 2. Early (premature) distribution - You are under age 59½.
(including distributions due to medical expenses, health insurance premiums, higher education expenses, first time homebuyer expenses, Qualified Reservist Distribution, Qualified Hurricane Distribution, Qualified Birth or Adoption Distribution and other reasons.)
☐ 3. Death/Beneficiary liquidation – The Date of Death of the Owner of the account MM/DD/YYYY is required, contact Shareholder Services regarding additional document requirements.
4. Permanent disability - You certify that you are disabled within the meaning of section 72(m)(7) of the Internal Revenue Code. (For purposes of section 72(m)(7), an individual shall be considered to be disabled if he is unable to engage in any substantial gainful activity by reason any medically determinable physical or mental impairment which can be expected to result in death or to be of long-continued and indefinite duration.)
□ 5. Transfer incident to divorce or legal separation - Contact Shareholder Services regarding additional document requirements.
☐ 6. Removal of excess - You must complete 3D (Excess Contribution Election) in its entirety.
□ 7. Direct Rollover to a Qualified Plan, 401(k), TSP or 403(b) - You are certifying that the receiving custodian will accept the IRA assets issued.
🗖 8. Non-Reportable Transfer to another Traditional IRA custodian - A letter of acceptance from the Custodian accepting the transfer is required.
B. QUALIFIED DISTRIBUTION FROM A ROTH IRA - This Roth IRA distribution satisfies the 5-year holding period requirement:
☐ Yes (If "No", proceed to Section C)
The distribution is being made for the following reason (check one):
\square 1. You are age 591/2 or older.
☐ 2. Death/Beneficiary liquidation – The Date of Death of the Owner of the account MM/DD/YYYY is required, contact Shareholder Services regarding additional document requirements.
□ 3. Permanent disability - You certify that you are disabled within the meaning of section 72(m)(7) of the Internal Revenue Code. (For purposes of section 72(m)(7), an individual shall be considered to be disabled if he is unable to engage in any substantial gainful activity by reason any medically determinable physical or mental impairment which can be expected to result in death or to be of long-continued and indefinite duration.)
Note: Distributions not meeting the 5-year required period and for all other reasons not listed above are considered non-qualified.
C. NON-QUALIFIED DISTRIBUTION FROM A ROTH IRA – The distribution is being made for the following reason (check one):
□ 1. Normal distribution - You are age 59½ or older (prior to the 5-year holding requirement)
□ 2. Early (premature) distribution - You are under age 59½.
(including distributions due to medical expenses, health insurance premiums, higher education expenses, first time homebuyer expenses, Qualified Reservist Distribution, Qualified Hurricane Distribution, Qualified Birth or Adoption Distribution and other reasons.)
☐ 3. Death/Beneficiary liquidation – The Date of Death of the Owner of the account MM/DD/YYYY is required contact Shareholder Services regarding additional document requirements.
4. Permanent disability - You certify that you are disabled within the meaning of section 72(m)(7) of the Internal Revenue Code. (For purposes of section 72(m)(7), an individual shall be considered to be disabled if he is unable to engage in any substantial gainful activity by reason any medically determinable physical or mental impairment which can be expected to result in death or to be of long-continued and indefinite duration.)
□ 5. Transfer incident due to divorce or legal separation - Contact Shareholder Services regarding additional document requirements.
☐ 6. Removal of excess - You must complete 3D (Excess Contribution Election) in its entirety.
□ 7. Non-Reportable Transfer to another Roth IRA custodian - A letter of acceptance from the Custodian accepting the transfer is required.
D. EXCESS CONTRIBUTION ELECTION:
Amount of excess: \$ Tax year for which excess contribution was made: Date Deposited:
Earnings will be removed with the excess contribution if corrected before your federal income tax-return due date (including extensions), pursuant to Internal Revenue Code Section 408(d)(4) and Internal Revenue Service ("IRS") Publication 590-A Contributions to Individual Retirement Arrangements (IRAs) You may be subject to an IRS penalty of 6% for each year the excess remains in the account. You will receive IRS form 1099-R Distributions from

Earnings will be removed with the excess contribution if corrected before your federal income tax-return due date (including extensions), pursuant to Internal Revenue Code Section 408(d)(4) and Internal Revenue Service ("IRS") Publication 590-A Contributions to Individual Retirement Arrangements (IRAs). You may be subject to an IRS penalty of 6% for each year the excess remains in the account. You will receive IRS Form 1099-R Distributions from Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc., for the year in which the excess distribution takes place (not for the year in which the excess contribution was made). Consult IRS Publication 590-A Contributions to Individual Retirement Arrangements (IRAs) for more information pertaining to excess contributions. If you are subject to a federal penalty tax due to an excess contribution, you must file IRS Form 5329 Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts.

For the purpose of the excess contribution, we will calculate the net income attributable ("NIA") to the contribution using the method provided in the IRS Final Regulations for Earnings Calculation for Returned or Recharacterized Contributions. This method calculates the NIA based on the actual earnings and losses of the IRA during the time it held the excess contribution. Please note that a negative NIA is permitted and, if applicable, will be deducted from the amount of the excess contribution.

STEP 3: DISTRIBUTION REASON CONTINUED (Choose only one distribution reason.)

D. EXCESS CONTRIBUTION ELECTION CONTINUED: A. The excess is being corrected before your federal income tax-filing deadline (including extensions): ☐ Remove excess plus/minus net income attributable. Distribute according to my instructions in Step 6 (Distribution Services). ☐ Remove excess plus/minus net income attributable. Re-deposit as a current year contribution (not to exceed annual IRA contribution limit). B. The excess is being corrected after your federal income tax-filing deadline (including extensions). Earnings on the excess contribution will remain in the account. Remove excess and distribute according to my instructions in Step 6 (Distribution Services). Remove excess and re-deposit as a current year contribution (not to exceed annual IRA contribution limit). C. Redesignating an excess contribution to a later tax year. Please consult a tax advisor to review your specific situation and to determine your best course of action. If you should decide to carry over the excess contribution to a later year, DO NOT RETURN THIS FORM. STEP 4: FEDERAL INCOME TAX 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 withholding rate of 0% below or have previously elected out of withholding. Tax will be withheld on the gross amount of the payment even though you may be receiving amounts that are not subject to withholding because they are excluded from gross income. This withholding procedure may result in excess withholding on the payments. If you elect to have no federal taxes withheld from your distribution, or if you do not have enough federal income tax withheld from your distribution, 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. You understand that your below election will remain in effect until such time as you make a different election with the Custodian. Check only one box: (If you do not check one of the boxes listed below, federal law requires a 10% tax withholding.) Do not withhold federal taxes. ☐ I elect federal income tax withholding of % (must be a whole percent, you may elect any rate from 1% to 100%.*) See the attached Form W-4R Withholding Certificate for Nonperiodic Payments which has the Marginal Rate Tables and "Suggestion for determining withholding" instructions. You may use these tables and instructions to help you select the appropriate withholding rate. *Generally, you can't elect less than 10% federal income tax withholding for payments to be delivered outside the United States and its possessions. STEP 5: STATE INCOME TAX WITHHOLDING (optional) Your state of residence will determine your state income tax withholding requirements, if any. Those states with mandatory withholding may require state income tax to be withheld from payments if federal income taxes are withheld or may mandate a fixed amount regardless of your federal tax election. Voluntary states let individuals determine whether they want state taxes withheld. Some states have no income tax on retirement payments. Please consult with a tax advisor or your state's tax authority for additional information on your state requirements. If you are completing this form, your below election will remain in effect until such time as you make a different election in writing to the Custodian. ☐ I elect **NOT TO** have state income tax withheld from my retirement account distributions (only for residents of states that do not require mandatory state tax withholding). ☐ I elect **TO** have the following dollar amount or percentage withheld from my retirement account distribution for state income taxes (for residents of states that allow voluntary state tax withholding). \$ _ STEP 6: DISTRIBUTION SERVICES (Choose either A, B, C or D.) $lack lack \Box$ Forward a check to the address registered on this account Note: If you request a distribution to be made payable and disbursed to a bank account not currently on file or a bank account of record that was added or changed within 30 days for any purpose, including purchases, redemptions, ACH B. Forward distribution proceeds directly to my bank: transfers, or wire transfers, please provide a Medallion Signature Guarantee to ☐ **ACH:** funding in two or three business days (no fees charged) avoid the hold on redemptions. ☐ Wire: funding the next business day (bank fees may apply) Banking Instructions: Enter your bank information from your personal 1000 Your Full Name checking or savings account: Your Town, ST 12345 Bank account type: Checking Savings Nine-digit routing (ABA) number: _ Bank account number: Your Bank Bank account registration name (include all registration names): [Step 8 - Medallion Signature Guarantee required if the bank account does· [123456789] [1236456] not have one of the account owners in the account registration, unless you previously provided a Medallion Signature Guarantee for that bank account.) Routing (ABA) number Account number

C. Forward a check to the following named payee and the following named payee are also the following named payee and the following named payee and the following named payee are also the following named payee and the following named payee are also the following named payee and the following named payee are also the following named payee and the following named payee are also the following named payee and the following named payee are also the following named payee and the following named payee are also the following named payee are al		· Guarantee required)	
Payee Name (First Name, MI, Last Name)			
Street Address	City	State	Zip Code
D. ☐ Transfer to another IRA custodian (This requires trustee or custodian.)	that you provide a letter of acceptance	e, with mailing and payment instr	ructions, from the successor
Rollover to the trustee or custodian of a qualified administrator that they will accept these assets			
RESTRICTION ON INDIRECT (60-DAY) ROLLOVERS: An IRAs (Traditional, Rollover, Roth, SEP, SARSEP and SIM participant can make an unlimited number of trustee-t successor custodian or trustee. You must contact the republication 590-A, Contributions to Individual Retirement	IPLE) in aggregate that a taxpayer own o-trustee transfers where the proceed eceiving institution to initiate a trustee	is in any 12-month or 365-day pe ds are delivered directly to the re e-to-trustee transfer. For more in	riod. As an alternative, a ceiving financial institution, iformation, see IRS
Receiving Trustee or Custodian Information:			
Plan Name (IRA or employer-sponsored plan)		Account Number	
Trustee, Custodian, or Insurer Name (First Name, MI, L	_ast Name)		
Address to Send Proceeds	City	State	Zip Code
STEP 7: PARTICIPANT SIGNATURE			
I certify that I am the individual authorized to make these exceptions and agent of either of them has given no tax or local control of the c	egal advice to me, and that all decisions I unds from my account in the manner req expressly assume responsibility for any	regarding the elections made on the uested. The Custodian may conclu adverse consequences which may	is form are my own. The sively rely on this certification arise from the election(s) and
Substitute W-9 - Under penalties of perjury, I certify that:	:		
The number shown on this form is my correct taxpayer			
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 Internal Revenue Se	rvice (IRS) that I am subject to backup w	rithholding as a result of a failure	to report all interest 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		irs.gov).	
4. The FATCA code(s) entered on this form (if any) indicati			
Cross out item 2 above if the IRS has notified you that you dividends on your tax return.		_	eport all interest and
The Internal Revenue Service does not require your conse	ent to any provision of this document oth	er than the certifications required	to avoid backup withholding.
			/ /
Owner Signature*			Date

 ${\rm *Beneficiary's\,Signature\,for\,inheritance\,liquidations}.$

CONTINUED ON NEXT PAGE

STEP 8: MEDALLION SIGNATURE GUARANTEE IF REQUIRED

A Medallion Signature Guarantee is generally required if:

- You request a redemption check be mailed to an address not currently on file or you had an address change within the last 30 days;
- The redemption proceeds total more than \$100,000;
- You request that redemption proceeds be made payable and disbursed to a bank account that does not have one of the account owners in the account registration unless you previously provided a Medallion Signature Guarantee for that bank account;
- You request redemption proceeds to be payable to a bank account that is not currently on file or to a bank account of record that was added or changed within 30 days for any purpose, including purchases, redemptions, ACH transfers, or wire transfers;
- The request is signed by you in your legal capacity to sign on behalf of another person or entity (i.e., on behalf of an estate); or
- The Fund or its service providers identify patterns that raise concern about fraud or other activity that may be harmful to you.

Note: There may be other unique situations that require a Medallion Signature Guarantee. The Lord Abbett Funds and their transfer agent accept Medallion Signature Guarantees executed by an eligible issuer participating in the Securities Transfer Agents Medallion Program 2000 (STAMP2000). Eligible issuers include U.S. domestic banks, credit unions, savings associations (including savings and loan associations), trust companies, national securities exchanges, registered securities associations, and clearing agencies. Also acceptable are broker/dealers, municipal securities broker/dealers, and government securities broker/dealers whose net capital exceeds \$100,000. For your protection, a Medallion Signature Guarantee is required for certain requests. Notarized signatures or signature guarantees from financial institutions that are not participating in one of these programs will not be accepted.

Please place Medallion Signature Guarantee here.

Custodian: BNY Mellon Investment Servicing Trust Company, P.O. Box 534489, Pittsburgh, PA 15253-44896.

Substitute W-4R 2025 - 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."

2025 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		Married filing jointly or Qualifying surviving spouse		Head of household			
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%		
15,000	10%	30,000	10%	22,500	10%		
26,925	12%	53,850	12%	39,500	12%		
63,475	22%	126,950	22%	87,350	22%		
118,350	24%	236,700	24%	125,850	24%		
212,300	32%	424,600	32%	219,800	32%		
265,525	35%	531,050	35%	273,000	35%		
641,350*	37%	781,600	37%	648,850	37%		
If married filing separately, use \$390,800 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 2025, 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 \$65,000 without the payment. Step 1: Because your total income without the payment, \$65,000, is greater than \$63,475 but less than \$118,350, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$85,000, is greater than \$63,475 but less than \$118,350, 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 \$61,000 without the payment. Step 1: Because your total income without the payment, \$61,000, is greater than \$26,925 but less than \$63,475, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$81,000 is greater than \$63,475 but less than \$118,350, the corresponding rate is 22%. The two rates differ. \$2,475 of the \$20,000 payment is in the lower bracket (\$63,475 less your total income of \$61,000 without the payment), and \$17,525 is in the higher bracket (\$20,000 less the \$2,475 that is in the lower bracket). Multiply \$2,475 by 12% to get \$297. Multiply \$17,525 by 22% to get \$3,856. The sum of these two amounts is \$4,153. This is the estimated tax on your payment. This amount corresponds to 21% of the \$20,000 payment (\$4,153 divided by \$20,000). Enter "21" on line 2.