

Use this form to: change your tax election, start, stop, or change a contribution to your annuity.

# HRSA-ILA

## Container Royalty or Vacation & Holiday Tax and A&S Election

Name: \_\_\_\_\_

Port Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_

*This election will remain in effect until I change it.* I understand that if I have not previously made an investment election for contributions to the Annuity & Savings Plan, funds will be deposited into the RetireSMART™ Moderate Fund. Contributions I make to my Annuity & Savings Plan account are subject to limitations applicable to qualified retirement plans.

### Container Royalty Tax and A&S Election

Benefits paid following the Contract Year earned.

***This election applies to all Container Royalty Benefit payments, until changed in writing.***

Tax Election    25% Fed/5.75% State    \_\_\_\_\_    or W4 Method    \_\_\_\_\_

Annuity & Savings Plan Contribution

**December Payout:**

I request that \_\_\_\_\_% or \$ \_\_\_\_\_ be withheld from my Container Royalty benefit and deposited in the HRSA-ILA Annuity & Savings Plan on a pre-tax basis.

Please stop my Annuity & Savings Plan Contribution.

Tax Election    25% Fed/5.75% State    \_\_\_\_\_    or W4 Method    \_\_\_\_\_

Annuity & Savings Plan Contribution

**February Payout: *IF there is a supplemental payout in February, this election will apply.***

I request that \_\_\_\_\_% or \$ \_\_\_\_\_ be withheld from my Container Royalty benefit and deposited in the HRSA-ILA Annuity & Savings Plan on a pre-tax basis.

Please stop my Annuity & Savings Plan Contribution.

### Vacation & Holiday Tax and A&S Election

Benefits paid before March 15<sup>th</sup> following the Contract Year earned.

***This election applies to all Vacation & Holiday Benefit payments, until changed in writing.***

Tax Election    25% Fed/5.75% State    \_\_\_\_\_    or W4 Method    \_\_\_\_\_

Annuity & Savings Plan Contribution

I request that \_\_\_\_\_% or \$ \_\_\_\_\_ be withheld from my Vacation & Holiday benefit and deposited in the HRSA-ILA Annuity & Savings Plan on a pre-tax basis.

Please stop my Annuity & Savings Plan Contribution.

Participant's Signature \_\_\_\_\_

Date: \_\_\_\_\_