

Death Claim

401(a)/403(b) ERISA
401/403(b) Non-ERISA

Aetna Life Insurance and Annuity Company
151 Farmington Avenue
Hartford, CT 06156-1277
Telephone: 1-800-262-3862

Please refer to attached instructions

Aetna Life Insurance and Annuity Company will be defined as "ALIAC", "we", "us", or "our" in this document.

All death claims must be accompanied by an original or certified copy of the Death Certificate unless the Trustee or Named Fiduciary for a 401 Corporate Market Plan certifies the Participant's death.

Participant Information <i>Please print. If any pre-filled information is incorrect, please make the appropriate changes, and initial and date each change.</i>	Account Number(s) (15-digit Account Number as shown on Access Report)		Date of Birth (mm/dd/yyyy)		
	Plan Name		Billing Group No.		
	Name of Deceased (Last, First, Middle Initial)				
	Date of Death (mm/dd/yyyy)		Deceased Social Security No.		
Beneficiary Information <i>Please print.</i> <i>Must complete</i>	Beneficiary Name (Last, First, Middle Initial)		Beneficiary Social Security No.		
	Beneficiary Address (No. & Street)		Beneficiary Relationship		
	City/Town		State	Zip Code	
	Percent of Benefit Payment you are entitled to: _____ %				
Type of Withdrawal	If Spouse, <input type="checkbox"/> Spousal Continuation if permitted by your Plan _____ (% or \$) <input type="checkbox"/> Direct Rollover to an ALIAC IRA _____ (% or \$) <input type="checkbox"/> Direct Rollover to an IRA (Letter of Acceptance required) _____ (% or \$) <input type="checkbox"/> Payable to Beneficiary _____ (% or \$)				
	If Minor, only this option is available <input type="checkbox"/> Payable to Beneficiary (<i>Guardianship papers are required</i>) _____ (% or \$)				
	If Non-Spousal (including Trust Beneficiaries), only this option is available <input type="checkbox"/> Payable to Beneficiary _____ (% or \$)				
	If Estate, only this option is available <input type="checkbox"/> Payable to Estate _____ (% or \$)				
	Payment and Mailing Information <i>Check one only. If not indicated check will be made payable to and mailed to the Beneficiary.</i> <i>Default – Check mailed to Beneficiary Resident Address noted above.</i> <i>Not applicable if Spousal Continuation elected.</i>				
	<input type="checkbox"/> Mail to Beneficiary (as indicated in Beneficiary Information section) <input type="checkbox"/> Mail to Trustee <input type="checkbox"/> Mail to Other Carrier		New Account No.		
	Make Check Payable to:		Send Check to:		
Address (No. & Street / PO Box)					
City/Town		State	Zip Code		

Electronic Deposit to U. S. Bank Accounts Only

(Optional)

If you would like us to electronically deposit your withdrawal amount to your bank, please provide your bank's name, complete address, ABA routing number, and your bank account number. *(Please verify the correct ABA routing number with your bank.)* We will not deposit to a third party account. If the electronic deposit cannot be completed using the information provided, we will issue and mail a check to the Beneficiary. This is not a wire transaction.

Please indicate whether this is a Checking or Savings Account

Account Holder(s) *(as it is registered at your bank)*

Please print.

Bank Name

Bank Telephone No.

Bank Address *(No. & Street)*

City/Town

State

Zip Code

ABA Routing No. *(9 digits)*

Bank Account No.

Special Mail Handling

(Optional)

If you would like your check delivered by express mail carrier, please complete the following credit card information. You will be charged for this service and the charge will be deducted from your credit card. The credit cards we can accept are Visa, MasterCard, Diner's Club, and American Express only. Note: If the credit card number information is invalid or improperly completed, the check will be delivered by regular U.S. Mail.

REQUIRED - Must be completed if requesting delivery by express mail carrier.

Visa

Diner's Club

Credit Card No.

Credit Card Expiration Date

MasterCard

American Express

Date

Tax Withholding (Substitute W-4P)

Complete only if U. S. Resident Address and the check is payable to Beneficiary.

Surviving Spouse or Former Spouse who is an Alternate Payee - If the withdrawal is to be made to you *(and not rolled over to an IRA)*, we are required by law to withhold 20% Federal Income Tax Withholding from that amount and send it to the Internal Revenue Service (IRS). You will report the tax withheld on your IRS Form 1040, and it will be credited against any Federal Income Tax you owe for the year. The withdrawal is taxed in the year you receive it unless, within 60 days, you roll it over to an IRA.

If you are a Beneficiary other than the Surviving Spouse, or an Estate - If payment is made payable to an individual, 10% Federal Income Tax Withholding will automatically apply unless you elect to have no Federal Income Tax withheld. If payment is made to a non-individual, such as a Trust or Estate, 10% Federal Income Tax Withholding is mandatory.

If you are a Surviving Spouse, an Alternate Payee, or another Beneficiary, your withdrawal is not subject to the additional 10% premature Federal Income Tax described above, and you may be eligible to use the special tax treatment for lump-sum distributions.

Federal Withholding

If any part of this withdrawal is exempt from the 20% mandatory Federal Income Tax Withholding:

I want _____ % or \$ _____ withheld from this withdrawal.

I do not want Federal Income Tax withheld from this payment *(available only for payments to an individual)*.

DEFAULT: If no election is made, 10% Federal Income Tax Withholding will occur.

State Withholding

My residence state for tax purposes is: _____ *(please refer to State Income Tax Withholding Notification and complete that form if applicable)*

If any part of this withdrawal is exempt from mandatory State Income Tax Withholding:

I want _____ % or \$ _____ withheld from this withdrawal.

I do not want State Income Tax withheld from this withdrawal.

DEFAULT: If no election is made, State Income Tax Withholding will occur, if applicable.

<p>Non-Resident Tax Information <i>- This information must be completed if resident address is outside the United States. - If this information is not received at the time of the withdrawal, the withdrawal will be processed with 30% U. S. Federal Income Tax Withholding.</i></p>	<p>CHECK ONE BOX ONLY and complete information, if applicable.</p> <p><input type="checkbox"/> I am a citizen of the United States living in a Foreign Country If you are a U. S. Citizen, your withdrawal is subject to withholding rules for U. S. Citizens (<i>see the Non-Resident Tax Information section in the instructions for this form</i>) with this exception: You are not able to elect 'out' of withholding.</p> <p><input type="checkbox"/> I am not a United States Citizen. My country of legal residence is _____. If you are not a U. S. Citizen, your withdrawal is subject to withholding provisions for Non-Resident Aliens. You must complete, sign, date, and return to us the IRS Substitute Form W-8BEN, "<i>Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding.</i>" If you do not have a U. S. Social Security Number, you must apply (<i>IRS Form W-7</i>) for and receive an Individual Taxpayer Identification Number (ITIN) from the IRS.</p>
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<p>Anti-Fraud Statement</p>	<p>Certain states require the following statement: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance may be guilty of a crime and may be subject to fines and confinement in prison.</p>
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<p>Authorized Signatures and Certification</p>	<p>I certify that:</p> <ul style="list-style-type: none"> a) the information stated on this form is correct and complete; b) the social security number shown on this form is my correct taxpayer identification number and the correct taxpayer identification number for the deceased and that I am not subject to back-up withholding; and c) if the Beneficiary's signature has been obtained in a separate document, the Beneficiary has received from the Trustee or Named Fiduciary the Special Tax Notice regarding application of Federal Income Tax Withholding to certain Plan payments; the Beneficiary's withholding elections for State and Federal Income Tax purposes, where applicable, have been obtained in a separate document along with the IRS Form Substitute W-9. <p>I further understand that ALIAC may rely conclusively on these certifications in processing the requested benefits above and that, in the case of any conflicting information, ALIAC is entitled to rely exclusively on the information contained in this withdrawal request.</p> <p>I certify that I have received and read the Special Tax Notice section and waive the 30-day notice requirement by making the election indicated in the Type of Withdrawal section of the form. I also certify that if the Employer's signature does not appear on this ALIAC Withdrawal Form, such signature has been obtained in a separate document to the extent required under applicable law in any governing plan document.</p> <p>I understand that Aetna Life Insurance and Annuity Company, Aetna Life Insurance Company, Aetna Insurance Company of America, or ING National Trust, as applicable, reserves the right to directly or through a third party recover any payments made in excess of amounts to which I am entitled under the terms of the Contract, regardless of the method of payment.</p>
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Beneficiary's Signature	Date (mm/dd/yyyy)
Employer's Signature (if applicable)	Date (mm/dd/yyyy)

State Income Tax Withholding Notification

401 and 403(b) Plan Distribution

Aetna Life Insurance and Annuity Company
 151 Farmington Avenue
 Hartford, CT 06156-1277

Telephone: 1-800-262-3862

Notification

If you are a resident of California, Iowa, Kansas, Maine, Massachusetts, North Carolina, Oklahoma, Oregon, Vermont, or Virginia, your state requires State Income Tax Withholding on the taxable portion of your distribution from your 401 or 403(b) Retirement Plan. This State Income Tax Withholding is in addition to the mandatory 20% (or, in some cases, elected 10%) Federal Income Tax Withholding. Please note, when a state cost basis differs from Federal, the Federal cost basis will be used in determining taxability for State Income Tax Withholding purposes.

- If you are a resident of **California** or **Oregon**, State Income Tax Withholding will be calculated according to the **State Withholding Table** (below) for your state **unless** you complete the bottom portion of this form indicating your election "out" of State Income Tax Withholding, and return it to us with, and to the same Home Office location as, your Withdrawal Request.
- If you are a resident of **Iowa, Kansas, Maine, Massachusetts, Oklahoma, or Vermont**, State Income Tax Withholding will be automatically calculated according to the **State Withholding Table** (below) for your state. These states do not allow an election "out" of State Income Tax Withholding when Federal Income Tax Withholding applies.
- If you are a resident of **North Carolina** or **Virginia**, State Income Tax Withholding will be calculated automatically **unless** you meet certain income criteria and claim an exemption from withholding. To claim an exemption, complete Form VA-4P, obtained at Virginia Department of Taxation, and return it to us with, and to the same Home Office location as, your Withdrawal Request.

Please refer to the following table for State Income Tax Withholding rules on distributions from 401 and 403(b) Plans.

State Withholding Table

California -	10% of amount of Federal Income Tax withheld
Kansas -	5% of taxable portion of distribution
Iowa -	5% of taxable portion of distribution
Maine -	5% of taxable portion of distribution
Massachusetts -	5.6% of taxable portion of distribution
North Carolina -	4% of taxable portion of distribution
Oklahoma -	5% of taxable portion of distribution
Oregon -	8% of taxable portion of distribution
Vermont -	6.72% of taxable portion of distribution
Virginia -	4% of taxable portion of distribution

This reflects applicable states and their stated withholding rates effective 1/1/2001. Rates may be modified by the states at any time and additional states may add a requirement to withhold on these types of distributions at any time. Our withholding will reflect the current rate for the applicable state at the time of each individual payment.

Payee/Account Information

I am a resident of (check one)

California Oregon

and I wish to elect "out" of State Income Tax Withholding.

Payee's Signature

Date (mm/dd/yyyy)

Death Claim Instructions

401(a)/403(b) ERISA
401/403(b) Non-ERISA

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Good Order	<p>Good Order is receipt at our Home Office of this form and any other required information or forms (<i>e.g., original or certified copy of the Death Certificate</i>) that has been accurately and entirely completed, and includes the signature of you, the Beneficiary, and where appropriate, the Employer's signature. Forms and any other requested information not received in Good Order, as we determine, may be returned to you for correction and processed upon re-submission in Good Order at our Home Office. Only pages 1 through 3 must be completed and returned to us to initiate processing. Although page 4 may be applicable to your Plan, it does not have to be included in the submission.</p> <p>For those customers where the terms of the Contract allow us to accept a Plan Sponsor's or Plan Trustee's certification of the Participant's death in lieu of the Death Certificate, when a death benefit payment request is made, we will not require an original or certified copy of the Death Certificate. If a Death Certificate is received it will become part of our file and will not be returned.</p>
Terms and Conditions	<p>The withdrawal effective date will be the date our Home Office has received the Withdrawal Request Form and any other required forms in Good Order.</p> <p>For purposes of calculating the amount, the value of the vested individual account will be determined after the final close of business of the New York Stock Exchange on the valuation date we have received the Withdrawal Request Form and any other required forms in Good Order at our Home Office. A valuation date is any normal business day, Monday through Friday, that the New York Stock Exchange is open.</p> <p>There may be legal or tax considerations in connection with this withdrawal. Therefore, you may wish to consult your legal or tax advisor before submitting this Withdrawal Request.</p> <p>The furnishing of this form by us does not constitute an admission that there is a Contract in force. The undersigned warrants that no insolvency or bankruptcy proceedings are pending against the Contracts or against any interest of the undersigned therein.</p> <p>Withdrawals may be subject to market value adjustments. For partial withdrawals where a specific dollar amount of withdrawal has been requested, the check will be for the amount requested, less any applicable withholding for income taxes. For any other full or partial withdrawal, all adjustments will be deducted from the withdrawal amount requested on this form.</p> <p>Funds withdrawn from a Guaranteed Term in the Guaranteed Accumulation Account (GAA) prior to maturity are subject to a Market Value Adjustment (MVA). The MVA may increase in the current value. Please refer to the GAA prospectus for more information.</p> <p>The Code requires that distribution of death proceeds begin within a certain period of time. Generally, either payments must begin by December 31 of the year following the year of the Participant's death, or the entire value of the your benefits must be distributed by December 31 of the fifth year following the year of the Participant's death, unless the Beneficiary is the Spouse. If the Beneficiary is the Spouse, distribution of the Participant's benefits may be deferred until the end of the year in which the Participant would have attained age 70½.</p>
Beneficiary Information	<p>For those plans that have us as the Beneficiary Recordkeeper, this section must agree with the previous Beneficiary Designation recorded.</p> <p>For all other plans, we are entitled to rely exclusively on the Beneficiary information contained in this Withdrawal Request Form that has been provided and signed by the Beneficiary or Employer (if applicable).</p> <p>If multiple Beneficiaries, each Beneficiary must complete a Death Claim Form.</p>
Type of Withdrawal	<p>Please complete this information in its entirety. If Minor, Non-Spouse (<i>including Trust Beneficiaries</i>), or Estate, you may defer distribution until the end of the fifth year following the Participant's death. Please contact your Representative if you are interested in this option.</p>
Payment and Mailing Information	<p>Please complete this information in its entirety.</p>
Electronic Deposit to U. S. Bank Accounts Only (Optional)	<p>Take advantage of a convenient (<i>avoid trips to your bank or mail delays</i>) method of having your withdrawal electronically deposited to your bank account.</p> <p>To ensure your payment is accurately deposited into your bank account please verify with your bank or financial institution the proper instructions for Electronic Deposits.</p>

Special Mail Handling <i>(Optional)</i>	If you would like your check delivered by express mail carrier, please complete this section of the form. You will be charged for this service.
Income Tax Withholding Notice and Election	If any portion of the taxable withdrawal is not subject to mandatory 20% Federal Income Tax Withholding, complete this section and select the desired withholding option. This would generally include death benefits payable to a Non-Spousal Beneficiary.
Tax Reporting Information	On withdrawals made payable to a Beneficiary or direct rollovers, we will report distribution on IRS Form 1099-R. All parties should consult their tax advisor, Plan Administrator, or IRS Publication 515 for more details.
Non-Resident Tax Information <i>If this information is not received at the time of the withdrawal, the withdrawal will be processed with 30% Federal Income Tax Withholding.</i>	<p>This information is required only if your residency is outside the United States.</p> <p>If you are a United States Citizen and the withdrawal is delivered to a Non-U. S. Resident address, your payment is subject to U. S. Federal Income Tax Withholding rules for United States citizens (see <i>Tax Withholding section of this form</i>) with this exception: You are not able to elect "out" of U. S. Federal Income Tax Withholding.</p> <p>If you are not a United States Citizen and the withdrawal is delivered to a Non-U. S. Resident address, your payment is subject to U. S. Federal Income Tax Withholding provisions for Non-Resident Aliens. The taxable portion of your payment that is considered United States-source income is subject to 30% Non-Resident Alien U. S. Federal Income Tax Withholding. To calculate U. S. Federal Income Tax Withholding, we assume (<i>as allowed by law</i>) that your entire payment is from United States sources. If you believe any portion is not from a United States source, or the rate of the U. S. Federal Income Tax is less, you can claim a U. S. Federal Income Tax refund when filing your United States Federal Income Tax (<i>Form U.S. Federal Non-Resident Income Tax Return 1040NR</i>) return.</p>
Overpayment Recovery	I understand that Aetna Life Insurance and Annuity Company, Aetna Life Insurance Company, Aetna Insurance Company of America, or ING National Trust, as applicable, reserves the right to directly or through a third party recover any payments made in excess of amounts to which you are entitled under the terms of the Contract, regardless of the method of payment.
Authorized Signatures and Certification	This section must be signed by the Beneficiary. In addition to verifying that the information regarding this withdrawal request is correct and complete, the Beneficiary must certify that she/he has received and read the Special Tax Notice section and waives the 30-day notice requirement by requesting a withdrawal.

Special Tax Notice

Death Claim

Aetna Life Insurance and Annuity Company
151 Farmington Avenue
Hartford, CT 06156-1277

Telephone: 1-800-262-3862

Regarding Payments from your TDA or 401(a) Qualified Plan	This notice contains important information you will need before you decide how to receive benefits from the 401(a) or 403(b) account. We are required to provide this notice to you at least 30 days, but no more than 90 days, before the date of distribution. You have the right to consider whether to elect a direct rollover for at least 30 days after the notice is provided. The employer's plan may provide that by completing and returning the distribution request form in less than 30 days, you elect to waive the 30-day requirement. This would mean that you do not wish to wait 30 days before receiving your requested distribution. We will process your distribution request as of the date we receive it in good order at the above address.
Rollover Options	<p>The following payments cannot be rolled over and must be paid to you:</p> <p>Non-taxable Payments - In general, only the "taxable portion" of your payment is an eligible rollover distribution. Any "after-tax" employee contributions made to the 401(a) plan or 403(b) account cannot be rolled over.</p> <p>Surviving Spouses, Alternate Payees and Other Beneficiaries With some exceptions, the rules summarized above also generally apply to payments to Surviving Spouses of Employees and to Spouses or Former Spouses who are "Alternate Payees". (<i>You are an Alternate Payee if your interest in a TDA or 401(a) qualified plan results from a "Qualified Domestic Relations Order" issued in connection with a divorce or legal separation.</i>) Some of these rules also apply to a deceased Employee's Beneficiary who is not a Spouse.</p> <ul style="list-style-type: none">• If you are a Surviving Spouse, you may choose to have an eligible rollover distribution paid in a direct rollover to an IRA or paid to you. If you have the payment paid to you, you may keep it or roll it over yourself to an IRA. If you do not request a direct rollover and you have the payment paid to you, we are required by federal law to withhold 20% of the amount and send it to the IRS as income tax withholding.• If you are a Former Spouse who is an Alternate Payee, you have the same choices as the Employee: you may have the payment paid in a direct rollover to an IRA. If you do not request a direct rollover and you have the payment paid to you, we are required by law to withhold 20% of the amount and send it to the IRS as income tax withholding. If payment is made to you, the same 60-Day Rollover option described above applies to you.• If you are a Beneficiary other than the Surviving Spouse, you may not choose a direct rollover and you may not roll over the payment yourself. 10% Federal Withholding will automatically apply unless you elect to have no income tax withheld. <p>If you are a Surviving Spouse, an Alternate Payee, or another Beneficiary, your payment is not subject to the additional 10% premature distribution tax described above, and you may be eligible to use the special tax treatment for lump-sum distributions.</p>
Direct Rollover	<p>You may choose a direct rollover of all or any portion of your payment that is an "eligible rollover distribution". In a TDA or 401(a) qualified plan direct rollover, payment is made from the TDA or 401(a) qualified plan to an IRA. If you choose a direct rollover, you are not taxed on a payment until it is distributed from the IRA.</p> <p>Direct Rollover To IRA - If you choose to have your payment made directly to an IRA, contact the IRA sponsor (<i>usually a financial institution</i>) to find out how to have your payment made in a direct rollover to an IRA at that institution. See IRS Publication 590, "<i>Individual Retirement Arrangements</i>", for more information on IRAs.</p> <p>Direct Rollover of a Series of Payments – If as a Spouse you receive eligible rollover distributions that are paid in a series for less than ten years, your choice of whether or not to roll over a payment will apply to all later payments in the series until you change your election. You are free to change your election for any later payment in the series.</p>
Payment Paid To You	<p>Mandatory Withholding - If any portion of an eligible rollover distribution is paid to you, we are required by federal law to withhold 20% of that amount and send it to the Internal Revenue Service as income tax withholding. For example, if your rollover distribution is \$10,000, only \$8,000 will be paid to you because the plan must withhold \$2,000 as income tax. You will need to report the tax withheld on your IRS Form 1040, and it will be credited against any income tax you owe for the year. The payment is taxed in the year you receive it unless, within 60 days of receipt, you roll it over to an IRA.</p>

<p>Payment Paid To You - Continued</p>	<p>State Withholding - If State Income Tax Withholding is required on the withdrawal, or if you elect to have it withheld, we will withhold such tax and send it to the state.</p> <p>Voluntary Withholding - If any portion of your withdrawal is not an eligible rollover distribution but is taxable, the mandatory withholding rules do not apply. 10% federal withholding will automatically apply unless you elect to have no income tax withheld.</p> <p>Sixty-Day Rollover Option - If you have an eligible rollover distribution paid to you, you may still decide to roll over all or part of it to an IRA. If you decide to roll over, you must make the rollover within 60 days after you receive the payment. The portion of your payment that is rolled over will not be taxed until you take it out of the IRA. You may roll over up to 100% of the amount that was an eligible rollover distribution, including an amount equal to the 20% that was withheld. If, within the 60-day period, you choose to roll over 100%, you must contribute other money to the IRA to replace the 20% that was withheld. If you roll over only the 80% that you received, the 20% that was withheld will be included in your taxable income for the year.</p> <p>For example, if your eligible rollover distribution was \$10,000 and you chose to have it paid to you, you will receive \$8,000 and \$2,000 will be sent to the IRS as Federal Income Tax Withholding. Within 60 days after receiving the \$8,000 you may roll over up to \$10,000 to an IRA. In this case, the entire \$10,000 is not taxed until you take it out of the IRA and you may be eligible to receive a refund of the \$2,000 withheld when you file your income tax return.</p>
<p>Special Tax Treatment for Lump-Sum Distributions from a 401(a) Qualified Plan</p>	<p>If your eligible rollover distribution from your 401(a) account is not rolled over, it will be taxed in the year of the distribution. However, if it qualifies as a "lump-sum distribution", it may be eligible for special tax treatment. A lump-sum distribution is defined as a payment, within one year, of your entire balance under the 401(a) qualified plan (<i>and certain other similar plans of the Employer</i>), that is payable to you because you have reached age 59½ or have separated from service with your Employer. For a payment to qualify as a lump-sum distribution, you must have been a Participant in the plan for at least 5 years. The special tax treatment for lump-sum distributions is described below.</p> <ul style="list-style-type: none"> • Five-Year Averaging - If you receive a lump-sum distribution on or after the date you attain age 59½, but in any event no later than December 31, 1999, you may be able to make a one-time election to figure the tax on the payment by using "5-year averaging". This may reduce the tax you owe by treating the payment as if it were paid over 5 years. • Ten-Year Averaging if you were Born Before January 1, 1936 - If you receive a lump-sum distribution and you were born before January 1, 1936, you may make a one-time election to figure the tax on the payment by using "10-year averaging" (<i>using 1986 tax rates</i>) instead of 5-year averaging (<i>using current tax rates</i>). • Capital Gain Treatment if you were Born Before January 1, 1936 - In addition, if you receive a lump-sum distribution and you were born before January 1, 1936, you may elect to have the part of your payment that is attributable to your pre-1974 participation in the plan (<i>if any</i>) taxed as long-term capital gain at a rate of 20%. <p>There are other limits on the special tax treatment for lump-sum distributions. For example, you may generally elect this special tax treatment only once in your lifetime, and the election applies to all lump-sum distributions that you receive in that same year. If you have previously rolled over a payment from the plan (<i>or certain other similar plans of the employer</i>), you may not use this special tax treatment for later payments from the plan. If you roll over your payment to an IRA, you will not be able to use this special tax treatment for later payments from the IRA. Also, if you roll over only a portion of your payment to an IRA, this special tax treatment is not available for the rest of the payment. See IRS Form 4972, "<i>Tax on Lump-Sum Distributions</i>", for more information.</p>
<p>How to Obtain Additional Information</p>	<p>This notice summarizes only the Federal - not State or Local - tax rules that might apply to your payment. Since the rules are complex and contain many conditions and exceptions not included above, you may wish to consult a professional tax advisor before taking a payment of your benefits. Also, you can find more specific information on the tax treatment of payments from TDAs in IRS Publication 571, "<i>Tax Sheltered Annuity Programs for Employees of Public Schools and Certain Tax-Exempt Organizations</i>", 401(a) qualified plans in IRS Publication 575, "<i>Pension and Annuity Income</i>", and IRS Publication 590, "<i>Individual Retirement Arrangements</i>". These publications are available from your local IRS office or by calling 1-800-TAX-FORM (829-3676).</p>