

## Substitute IRS Forms W-4P and W-9

Standard Insurance Company 1100 SW Sixth Avenue Portland OR 97204-1093 www.standard.com

Individual Annuities 800.247.6888 Tel 800.378.4570 Fax

1. Identification	
Taxpayer Name	
Primary State of Residence for Tax Reporting	Contract Number(s)
Taxpayer Identification Number (Social Security number)	or EIN)
Withholding Certificate for Pension or Annuity Payments — Substitute IRS Form W-4P  3. Federal and State Income Tax Withholding (If nothing below is checked we will withhold at Federal and State minimums.)	
B	tion of my annuity payment.
Withhold:(% or <b>Dollar</b> amount) <b>Federal</b> (10% minimum)	
☐ I do not want State withholding Unless required.	
· ·	state if required or applicable. The claiming for above withholding requests section B. The cold at higher "Single" rate. Number of Allowances
Request for Taxpayer Identification Number and C	Certification — Substitute IRS Form W-9
Internal Revenue Service guidelines. You (as payee) are required correct taxpayer identification number (generally your Social Secur	nce Company will be required to withhold income taxes according to by law to provide Standard Insurance Company (as payor) with your ity number). Failure to do so may result in a \$50 penalty imposed by the we are required to withhold from your taxable distribution according to
4. Certification	
issued to me), and	ayer identification number (or I am waiting for a number to be
notified by the Internal Revenue Service (IRS) tha	<b>a)</b> I am exempt from backup withholding, ( <b>b)</b> I have not been at I am subject to backup withholding as a result of a failure to tified me that I am no longer subject to backup withholding, <b>and</b> ).
Important Note: You must STRIKE OUT the language in currently subject to backup withholding because you have fa	section (2) above if you have been notified by the IRS that you are ided to report all interest and dividends on your tax return.
5. Authorization	
	present that all information is true and accurate. <b>The Internal</b> ision of this document other than the certifications required to
Taxpayer Signature	Date