Manning & Napier Fund, Inc.
Required Minimum Distribution (RMD) Election Form

Note: Failure to withdraw your Required Minimum Distribution (RMD) amount by the applicable deadline could result in a 25% penalty tax. The penalty tax would be assessed on the difference between the amount that you were required to take and the amount that was distributed, if any. Additionally, the 25% penalty tax may be reduced to 10% if the past due amount is distributed within a 2-year correction window beginning on the date the distribution was originally due. Before making any decision regarding your RMD, we urge you to consult you tax advisor or tax attorney.

I. PARTICIPANT INFORMATION – Please Print

Name _____ ( ) Daytime Telephone _____

Social Security Number _____ Date of Birth _____

II. DISTRIBUTION ELECTION – (RMD amounts are calculated on the entire account balance including all underlying investments in your IRA)

Type of Account: ☐ Traditional/Rollover IRA ☐ SEP IRA ☐ SIMPLE IRA

Account Number: _____ ☐ New RMD election (If new account, prior year end balance: $_____)

☐ Change an existing RMD election

Distribute my RMD from: ☐ Across all funds proportionately (rounding may occur), **(or)**

☐ Distribute from fund(s): _____

III. CALCULATION METHOD

Your RMD amount is calculated in accordance with Internal Revenue Service ("IRS") regulations. The regulations are explained in IRS Publication 590-B, Distributions from Individual Retirement Arrangements (IRAs), which includes the life expectancy tables used to calculate RMD amounts.

Note: Your RMD will be calculated based on the Uniform Lifetime Table, unless the following exception applies to you and you have indicated so by checking the box below.

☐ My sole primary beneficiary is my spouse who is more than 10 years younger than I am. I elect to calculate my RMD based on the Joint and Last Survivor Expectancy Table. Spouse's Date of Birth: _____/ _____/ _____
MM DD YYYY

IV. TYPE OF DISTRIBUTION

A. Single Sum / One-Time Distribution (options)

☐ **Calculate RMD Amount:** Calculate and distribute immediately upon receipt of this form my **current year RMD**. I understand that I am responsible for ensuring any future year RMD amounts are satisfied by contacting the Custodian to request subsequent distributions.

☐ **Calculate and distribute <u>my prior year deferred RMD Amount</u>** (Only applicable if your first RMD year was the previous year and you are electing to distribute last year's RMD, this request will be processed immediately upon receipt and must be received between January 1st and April 1st)

☐ **Distribute a fixed amount of $_____** immediately upon receipt of this form. I understand that I am responsible for ensuring my RMD amounts are satisfied each year and for contacting the Custodian to request any subsequent distributions.

☐ **Qualified Charitable Distribution ("QCD")** - mark this box if the amount indicated above is intended to be a QCD distribution (not applicable to SEP or SIMPLE IRAs). You must attach a letter of instruction providing the name of the charity(ies), specific allocation(s) and provide mailing instructions. Note a QCD is not subject to tax withholding up to the current annual maximum, QCDs are indexed to inflation and the maximum may increase each year. Please speak with a qualified tax professional to confirm the amount you are requesting is not over the amount eligible for a QCD. Any portion you elect to distribute that exceeds the maximum QCD limit for the current year will be processed separately and not be treated as QCD by the custodian. Please review the sections titled Payment Method and Tax Withholding Election which may apply to any amount not treated as a QCD.

B. Systematic Distributions (options):

☐ **Calculate and distribute my current year RMD amount for this year and all subsequent years**.
I understand that the Custodian will continue to calculate and distribute my RMD amount for all subsequent years until I notify them to discontinue the payments.

☐ **Distribute a fixed amount of $**_____ for this year and all subsequent years until I notify you to discontinue payments. I understand that I am responsible for ensuring my RMD amounts are satisfied each year. I also understand that I am responsible for contacting the Custodian to request any adjustments to the fixed dollar amount or frequency.

Systematic Distribution Cycle: ***(Required when selecting a Systematic Distribution option in section IV-B.)***

Note: If this form is received after the date selected or a begin date is not selected, your RMD will be distributed immediately upon receipt of this form. Future RMD's will be established with date listed. If a frequency is not selected, your RMD will be distributed annually.

Begin Systematic Distributions (choose one):

☐ Immediately upon receipt of this form, **(or)**

☐ On: _____ / _____ / _____ Frequency (choose one): ☐ Monthly ☐ Quarterly
MM DD YYYY

☐ Semi-Annually ☐ Annually

Note: Please allow up to 5 business days from receipt of this form to process your first automatic distribution. If adding new banking, please allow up to 15 business days for your banking information to be verified. The first withdrawal may be delayed to the next month if your selected start date coincides with standard processing times or the verification of your banking information.

V. PAYMENT INSTRUCTIONS

If a payment method is not selected, your RMD will be issued as a check payable to you and mailed to your address of record. Your payout method will remain in effect until we receive notice from you requesting a change.

☐ **Mail Check to Address of Record -** if requested amount is greater than $100,000, or the address has changed within the past 30 days, this form must be **Medallion Guaranteed in Section VIII** in order to mail check.

☐ **Purchase into my Non-Retirement Account:**

☐ Application attached with investment instructions **(or)**

☐ Existing Account Number: _____ Fund Name(s): _____

☐ **Send an Electronic Transfer to my Bank Account**
If your bank's ACH information is already on record, check here: ☐
(Please allow 2-3 business days for the assets to be received by your bank).

Your Bank's ACH Information – Please attach a voided check. Medallion Signature Guarantee is required if your banking information is not on file with us.

Bank Name | Bank ACH Routing/ABA Number

Your Account Number at Bank | Bank Telephone Number

Name of Your Account at Bank

☐ **Mail Check to the Following Third Party - Medallion Signature Guarantee is Required.**

Name

Address

Reference Information

VI. FEDERAL TAX WITHHOLDING ELECTION (REQUIRED)

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.

Please select one of the following:

☐ I elect federal income tax withholding of 0%, do not withhold federal income tax from my distributions.*

☐ 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.

VII. STATE INCOME TAX WITHHOLDING ELECTION

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 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. You may wish to 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.

Please select one:

☐ 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).

$ _____ or _____%

VIII. PARTICIPANT AUTHORIZATION (REQUIRED)

I certify that I am the Participant authorized to make these elections and that all information provided is true and accurate. I further certify that the Custodian, the Sponsor, or the agent of either of them has given no tax or legal advice to me and shall be indemnified and held harmless, for any tax, legal or other consequences resulting from my election(s). I expressly assume responsibility for any adverse consequences which may arise from the election(s). The Custodian is hereby authorized and directed to distribute funds from my account in the manner requested. I have read and understand and agree to be legally bound by the terms of this form.

X _____

Participant Signature (required) **Date**

Please review the Manning & Napier Fund, Inc. prospectus for Medallion Signature Guarantee stamp requirements.

Medallion Signature Guarantee: An eligible guarantor is a domestic bank or trust company, securities broker/dealer, clearing agency or savings association that participates in a medallion program recognized by the Securities Transfer Agents Association. The three recognized medallion programs are the Securities Transfer Agents Medallion Program (known as STAMP), Stock Exchanges Medallion Program (SEMP), and the Medallion Signature Program (MSP). A notarization from a notary public is NOT an acceptable substitute for a signature guarantee.

Place Medallion Guarantee stamp and signature in box (if applicable):

Mail to:

First Class Mail:
Manning & Napier Fund, Inc.
P.O. Box 534449
Pittsburgh, PA 15253-4449

Overnight Mail:
Manning & Napier Fund, Inc.
Attention: 534449
1350 Penn Avenue – Suite 102
Pittsburgh, PA 15222

Substitute W-4R 2026 - 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."

2026 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%
16,100	10%	32,200	10%	24,150	10%
28,500	12%	57,000	12%	41,850	12%
66,500	22%	133,000	22%	91,600	22%
121,800	24%	243,600	24%	129,850	24%
217,875	32%	435,750	32%	225,900	32%
272,325	35%	544,650	35%	280,350	35%
656,700*	37%	800,900	37%	664,750	37%
*If married filing separately, use $400,450 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 2026, 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 $70,000 without the payment. Step 1: Because your total income without the payment, $70,000, is greater than $66,500 but less than $121,800, the corresponding rate is 22%. Step 2: Because your total income with the payment, $90,000, is greater than $66,500 but less than $121,800, 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 $60,000 without the payment. Step 1: Because your total income without the payment, $60,000, is greater than $28,500 but less than $66,500, the corresponding rate is 12%. Step 2: Because your total income with the payment, $80,000, is greater than $66,500 but less than $121,800, the corresponding rate is 22%. The two rates differ. $6,500 of the $20,000 payment is in the lower bracket ($66,500 less your total income of $60,000 without the payment), and $13,500 is in the higher bracket ($20,000 less the $6,500 that is in the lower bracket). Multiply $6,500 by 12% to get $780. Multiply $13,500 by 22% to get $2,970. The sum of these two amounts is $3,750. This is the estimated tax on your payment. This amount corresponds to 19% of the $20,000 payment ($3,750 divided by $20,000). Enter "19" on line 2.