



Surrender/Withdrawal Request

RiverSource Contract Number

If you own a RAVA series variable annuity and currently work with an Ameriprise advisor, please contact your advisor. If you own a RAVA 5® variable annuity and no longer work with an Ameriprise advisor, please use this form.

- If the bank account being selected in the Payment Arrangements section is not already available for use, complete the Standing Instruction: Bank form (1150936) to authorize the bank account, which can be accessed on riversource.com.
- If your contract is a 403(b)/Tax Sheltered Annuity (TSA) do not use this form. Complete the Request for 403(b) - Tax Sheltered Annuity (TSA) Withdrawal/Surrender form.

Contract Information

Name of Contract Owner

Fixed Annuity Surrender Options

Please verify the withdrawal provisions and conditions of your contract prior to making selection.

Please check one:

- A. Make a partial withdrawal for \$ _____.
- B. Make a partial withdrawal for interest earnings.
- C. Make a partial withdrawal for my annual free amount without incurring withdrawal/surrender charges.

Variable Annuity Contracts with Guaranteed Withdrawal Benefit Options

Please verify the withdrawal provisions and riders of your contract prior to making a selection. Make sure you understand the impact taking withdrawals will have on your values and riders.

Consult with your financial professional to determine a withdrawal strategy that is right for you.

- A. **Lifetime Income Guarantee - Total benefit amount available for withdrawal in the current contract year.**
If this amount exceeds your Principal Back Guarantee, it will reset your principal back benefit. Refer to your product prospectus for age eligibility and specific payout percentages. This option is not available for the Guarantor Withdrawal Benefit rider.
- B. **Principal Back Guarantee - Total benefit amount available for withdrawal in the current contract year.**
If this amount exceeds your Lifetime Income Guarantee and your lifetime income benefit will be reset, the "Benefit Impact Acknowledgement Form" is required before your request can be processed. If required, this form will be mailed to you or you may contact our office for assistance. Refer to your product prospectus for specific payout percentages. This option is not available for the SecureSource Stages®, SecureSource Stages 2®, SecureSource 3®, SecureSource 4SM or the SecureSource 4 PlusSM benefit.
- C. **Fixed Dollar Amount - Up to the total benefit amount available without exceeding withdrawal benefit guarantees.**
The dollar amount you have specified will be lowered to the lesser of the Lifetime Income Guarantee or Principal Back Guarantee if the amount you have requested exceeds either guarantee.
Fixed amount of \$ _____.
- D. **Fixed Dollar Amount - Process as directed.**
The dollar amount you have specified will NOT be lowered to the maximum amount currently available under your benefit(s). If taking this withdrawal will decrease your Principal Back Guarantee and/or Lifetime Income Guarantee, the Benefit Impact Acknowledgement Form will be required before processing can occur. If required, this form will be mailed to you or you may contact our office for assistance.
Fixed amount of \$ _____. If this amount exceeds your free withdrawal privilege, a withdrawal/surrender charge will apply.

Variable Annuity Contracts without a Guaranteed Withdrawal Benefit

Please check one:

- Fixed amount of \$ _____. If this amount exceeds your free withdrawal privilege, a withdrawal/surrender charge will apply.



Full Withdrawal

- I request a full withdrawal of the contract for the net accumulation value in accordance with the provisions and conditions of the contract. This original request form must be sent to the address listed at the top of this form. **We require an original signature; no copies or faxes will be processed.**

Systematic Withdrawals (SWD) - A Selection is Required

If you have an SWD, a selection is required before your Partial Withdrawal request will be processed.

If you purchased a guaranteed withdrawal benefit with your variable annuity existing Systematic Withdrawal arrangements may need to be decreased to prevent withdrawal amounts from exceeding total benefit amounts available, or may be discontinued if benefit amounts available have been exceeded.

If you are currently receiving SWDs based upon the accumulated value or benefit value of your account, a withdrawal may decrease future SWD amounts. If you have an active SWD plan, do you wish to keep it intact?

- Yes (withdrawal charges may apply to future SWDs)
- No (SWDs will be discontinued with this transaction)

Partial Withdrawal Allocation (for variable annuities only)

Please select one:

- Withdraw according to current fund allocation (If I am enrolled in the Portfolio Navigator Program, I must select this withdrawal allocation option.)
- Withdraw from specific funds (Specify funds and percentages.)

	%
	%
	%
	%
Must Equal	
100 %	

Delivery Instructions

If you are withdrawing funds from a custodial IRA, please leave this section blank as delivery of funds will be based on our agreement with the custodian.

For an **ACH** - if the Bank Account being selected is not already available for use, complete the Standing Instruction: Bank form (1150936) to authorize the bank account for use, which can be accessed on riversource.com.

- Failure to separately authorize the bank account will create processing delays.
- Only domestic (US) bank accounts may be authorized for ACH or for future use.

Please select one:

- Mail check to my address of record.
- ACH transfer to my external bank account (Complete the Standing Instruction: Bank form (1150936) to authorize the bank account for use, which can be accessed on riversource.com.)

Name of Bank:

Bank Routing Number/RTN: Must be 9 digits and begin with a 0, 1, 2, or 3

Bank Account Number:



Withholding Instructions

Note: If this is a Custodial IRA, please leave this section blank as the Custodian is responsible for the tax withholding.

- **Federal Withholding:** You are liable for federal income tax on the taxable portion of your distribution. If total withholding is not adequate, you may be subject to estimated tax payments and/or penalties.
- **State Withholding:** Withholding rules vary by state. Clients may have the option to: (1) opt-out of withholding, (2) elect default state tax withholding, or (3) increase the rate of withholding. Depending on the state, state tax withholding could be mandatory, optional, unavailable, or the client may need to complete a state-specific form. For state tax withholding rules, go to riversource.com/statetax.
- Please note that taxes withheld per your elections or in accordance with state rules will not be refunded.
- Different withholding rules apply in certain situations: If we do not have a valid Taxpayer Identification Number on the account, if the payment is delivered outside the United States or if you are a non-resident.
- For all tax-qualified annuities: Withholding is taken from the total amount distributed.
- For non-qualified annuities: Withholding is taken from the taxable amount distributed.
- Please consult your tax professional for additional information regarding federal and/or state withholding.

Federal Withholding

10% federal tax will be withheld unless you make a different withholding election below.

- Do not withhold federal tax Withhold 10% federal tax Withhold _____% federal tax-*must be more than 10%*

State Withholding

- If you do not indicate an election, we will generally follow your choice for federal election unless your state does not allow.
 - No state tax withholding will be taken for states where withholding is not available.
 - The taxpayer's resident state on file is the state we use for state tax withholding.
- Do not withhold state tax Withhold default state tax Withhold _____% state tax

Authorization and Acknowledgments

- **I have read and understand:**
- **I have reviewed the withdrawal provisions and conditions of my contract prior to making my withdrawal selection, and understand the impact taking this withdrawal will have on my values.**
- **I understand if my annuity has an optional benefit rider, certain riders contain features that may be negatively impacted by taking a withdrawal.**
- For *SecureSource 4 Plus*SM benefit, any withdrawal (including Required Minimum Distributions) prior to the Base Doubler effective date will permanently set the Base Doubler value to \$0.
- All withdrawals will be processed when the acceptable signed request from the contract owner(s) is received in the corporate office.
- My withdrawal may include taxable income, and if I am under age 59 1/2, an IRS early withdrawal penalty may apply.
- This paragraph applies only to non qualified annuities, and only if the annuity is or was part of a partial 1035 exchange from one annuity to another annuity. IRS Revenue Procedure 2011-38 states if withdrawals are taken from either annuity within a 180-day period following a partial 1035 exchange, the IRS will apply general tax principles to determine the tax treatment of the previous exchange and the subsequent withdrawal. For example, a distribution from either contract within 180 days of the exchange may result in additional taxable income related to the contracts involved in the exchange. The IRS tax treatment may be different than what is reported on Form 1099-R. A tax advisor should be contacted before any withdrawals are taken from either annuity contract during the 180-day period. This 180-day limitation on withdrawals does not apply to annuitized amounts if the annuitization is for life/lives or a period of 10 years or more.



- Federal Tax law requires all non-qualified deferred annuity contracts issued by a company to a policyholder during the same calendar year be treated as a single, unified contract (Serial Annuities). All income included and taxed in a distribution for one or more Serial Annuities are aggregated with regard to any earnings and cost basis. If your annuity is a Serial Annuity, the tax information included with your check may not include the Serial Annuity calculation. Tax information for a Serial Annuity distribution will be sent in a separate letter.

- **I understand that my decision to take this withdrawal is final.**

Signature of Contract Owner	Phone Number of Contract Owner	Date Signed
X		
Signature of Joint Contract Owner		Date Signed
X		



RiverSource Life Insurance Company

829 Ameriprise Financial Center, Minneapolis MN 55474
Client Service: 1-800-333-3437 Fax: 1-612-317-3726



RiverSource Life Insurance Co. of New York

Service address:
70122 Ameriprise Financial Center, Minneapolis MN 55474
Client Service: 1-800-504-0469 Fax: 1-612-317-3726

RiverSource Contract Number

Standing Instruction: Bank

If you own a RAVA series variable annuity and currently work with an Ameriprise advisor, please contact your advisor. If you own a RAVA 5® variable annuity and no longer work with an Ameriprise advisor, please use this form.

Client Information

Owner Name:

Joint Owner Name:

Servicing Advisor Name (if applicable):

Bank Information

Bank Account Owner:

Are you the owner of the bank account?

Yes No

Is the bank owner a person or an organization?

Person Organization

Bank Account Co-Owner:

Checking: Deposit funds to my checking account through ACH. You must attach a voided check. If you do not attach a voided check, RiverSource Life Insurance Company will send a check to your address of record, your withdrawal will not be directly deposited into your account. ACH deposits will not be available for your account type 9930 in New York.

Attach voided check here.
Note: Starter checks, deposit slips and handwritten information will not be accepted.



Wire instructions for this bank are different from above.

Wire Routing Transit Number:

Wire Bank Account Number:

Additional Information to be sent to Bank:

Savings

Name of Bank:

Bank Routing Number / RTN:

Must be 9 digits and begin with a 0, 1, 2, or 3

Bank Account Number:

Standing Authorization

This bank will be authorized for money in and money out for the following accounts you select:

Account Number	New Arrangement	Existing Arrangement
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

All future use bank instructions/standing authorizations, received in good order, will be processed within 1-2 business days. All requests will be reviewed and processed in the order they are received.

Acknowledgements and Signatures

In this disclosure statement, "you" and "your" refer to you, the applicant. "We," "us" and "our" refer to RiverSource Life Insurance Company and RiverSource Life Insurance Co. of New York.

- You authorize us to act upon your written instructions in this form and understand that we will retain said instructions on file for future use by you; your financial advisor or any other person you choose to act on your behalf pursuant to receiving your prior written authorization.
- You authorize us to use the instructions we hold on file to debit or credit your external bank account and to facilitate distributions to third parties pursuant to your instruction or pursuant to receiving your prior written authorization, by your financial advisor or any person you may elect to act on your behalf.
- You authorize us to apply this authorization, upon request by you, your financial advisor or anyone acting pursuant to your written authorization, to other same ownership accounts that you may hold with us, as well as, accounts of unlike ownerships, permitted at our discretion.



- You understand that instructions to debit or credit your account or to apply this authorization to other accounts you have with us may be received in writing, by phone, by computer, or by other electronic medium and agree to the recording of all said instructions. You may stop any payment by notifying us at least three banking days before the charge is made.
- If an Electronic Deposit fails or was returned, you understand that we may mail a check to you at your address of record.
- Banking channels require 10 business days for processing before Electronic Deposit authorizations become effective.
- You understand and agree that the instructions and authorization that you give will remain in effect until you notify us to cancel them, allowing reasonable time to act on your cancellation. Any such notification shall be effective only with respect to entries initiated after receipt of, and reasonable time to act upon such notification, usually 15 days. We reserve the right to terminate your Electronic Funds Authorization or your access to its services without notice at our sole discretion.
- We are authorized to cancel any ACH deposits if the payments are returned by your bank.
- You understand that this agreement shall be binding upon your personal representatives, heirs, legatees and assignees.

By signing this authorization, you acknowledge and agree that: a) the information you provided is correct, b) you will hold RiverSource Life Insurance Company and RiverSource Life Insurance Co. of New York, its affiliates and agents harmless for any and all situations arising from an ineligible or inappropriate transfer or redemption, and c) you agree to all terms and conditions stated herein.

For your protection we may verify signatures from a signature sample file. If you do not have a signed application or account certification form on file, we will not be able to honor your request until the signed application or account certification form has been received. Any redemption completed pursuant to these instructions revokes any trust, transfer on death ("TOD") or payable on death ("POD") designation of the funds or account being redeemed.

If this is a joint account, all owners must sign. If this is a fiduciary account (e.g., Trust, UGMA/UTMA, etc.), the fiduciary must sign and must be listed on the ownership of the account.

In certain circumstances, we may contact you in an effort to validate the request before the transaction can be processed.

Owner Name

Owner Signature

Date (MMDDYYYY)

Joint Owner Name

Joint Owner Signature

Date (MMDDYYYY)

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