

Hartford Funds 403(b) Distribution Request Form

Use Only for Account Plans with UMB Bank, n.a. as Custodian

HARTFORDFUNDS

Our benchmark is the investor.*

Please read this introductory section carefully before completing this form and retain for your records.

- Hartford Funds recommends that you consult with a tax advisor for any questions about distributions from your retirement plans.
- Hartford Funds is not providing you investment advice. Hartford Funds is not acting a fiduciary.
- A reason for the redemption must be provided for a distribution from your Account.
- For 403(b)(7) Custodial Account Plans, the Internal Revenue Code permits surrender of contributions only in the event of death, total and permanent disability, attainment of age 59½, severance from employment, or financial hardship. Special rules may apply to financial hardship.
- Distributions from your account generally result in taxable income to you in the year of the distribution. The IRS requires us to report distributions and generally requires income tax withholding.
- For accounts not registered in the shareholder's name, certified proof of appointment is required. A signature guarantee may also apply.

Special Tax Notice Regarding Payout From Your Section 403(b)(7) Custodial Account Plan

- This notice contains important information you should review before you decide how to receive your benefits from your section 403(b) (7) custodial account. You should review this information because all or part of the payouts you will receive from your 403(b) (7) custodial account may be eligible for rollover by you or the custodian of your Account to a traditional IRA or an eligible employer plan.
- A "rollover" is a payment by you or the custodian of your 403(b) (7) custodial account of all or part of your benefit to another plan or IRA that allows you to continue to defer current federal income taxation of that benefit until it is paid to you. Your payout cannot be rolled over to a SIMPLE IRA (unless the SIMPLE IRA has been funded at least two years) or a Coverdell Education Savings Account (formerly known as an education IRA).
- An "eligible employer plan" includes a plan qualified under section 401(a) of the Internal Revenue Code, including a 401(k) plan, profit sharing plan, defined benefit plan, stock bonus plan, and money purchase plan; a section 403(a) annuity plan; a section 403(b) tax-sheltered annuity; and an eligible section 457(b) plan maintained by a governmental employer.
- An eligible employer plan is not legally required to accept a rollover. Before you decide to roll over your payment to another employer plan, you should find out whether the plan accepts rollovers and, if so, the types of distributions it accepts as a rollover.

Summary

- A payment from a 403(b) (7) custodial account that is eligible for "rollover" may be taken in two ways. You may have all or any portion of your eligible payment either 1) paid in a "direct rollover" or 2) paid to you. A direct rollover is a direct payment of your 403(b) benefits to a traditional IRA or an eligible employer plan that will accept it. This choice will affect the tax you owe.
- If you choose a direct rollover:
 1. Your payment will not be taxed in the current year and no income tax will be withheld.
 2. You choose whether your payment will be made directly to your traditional IRA or to an eligible employer plan that accepts your rollover.
 3. The taxable portion of your payment will be taxed later when you take it out of the traditional IRA or the eligible employer plan.
- If you choose to have your 403(b)(7) benefit that is eligible for rollover paid to you:
 1. You will receive only 80% of the taxable amount of the payment, because we are required to withhold 20% of that amount and send it to the IRS as income tax withholding to be credited against your federal income taxes.
 2. The taxable amount of your payment will be taxed in the current year unless you roll it over.
 3. You can roll over all or part of the payment by paying it to your traditional IRA or to an eligible employer plan that accepts your rollover within 60 days after you receive the payment.

Payments that can and cannot be rolled over

After tax contributions: If you made after-tax contributions to your Account these contributions may be rolled over into either a traditional IRA or to another 403(b) program using a direct rollover if the other 403(b) program provides for separate accounting for amounts rolled over, including separate accounting for the after-tax contributions and earnings on those contributions.

The following payments can not be rolled over:

- Payments Spread Over Long Periods – You cannot roll over a payment if it is part of a series of equal (or almost equal) payments that are made at least once a year and that will last for (a) your lifetime (or a period measured by your life expectancy), (b) your lifetime and your beneficiary's lifetime (or a period measured by your joint life expectancies), or (c) a period of ten years or more.

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- **Required Minimum Payments** – Beginning in the year you reach age 70½ or retire, whichever is later, a certain portion of your payment cannot be rolled over because it is a “required minimum payment” that must be paid to you.
- **Hardship Distributions.** A hardship distribution cannot be rolled over.

Direct Rollover/Decedent Rollover

A Direct Rollover is a direct payment of the amount of your 403(b) (7) custodial account benefits to a traditional IRA or an eligible employer plan that will accept it. You can choose a direct rollover of all or any portion of your payment that is an eligible rollover distribution. You are not taxed on any taxable portion of your payment for which you choose a direct rollover until you later take it out of the traditional IRA or eligible employer plan. In addition, no federal income tax withholding is required for any taxable portion of your 403(b) (7) custodial account benefits for which you choose a direct rollover.

- **Direct Rollover to a Traditional IRA** – If you choose to have your payment made directly to a traditional IRA, contact an IRA sponsor (usually a financial institution) to find out how to have your payment made in a direct rollover to a traditional IRA at that institution. See IRA Publication 590, Individual Retirement Arrangements, for more information on traditional IRAs.
- **Direct Rollover from Decedent 403(b) to Decedent IRA** - If you choose to have your payment made directly to a decedent IRA, contact an IRA sponsor (usually a financial institution) to find out how to have your payment made in a direct rollover to a decedent IRA at that institution.
- **Direct Rollover to a Plan** – If you are employed by a new employer that has an eligible employer plan, and you want a direct rollover to that plan, ask the plan administrator of that plan whether it will accept your rollover. An eligible employer plan is not legally required to accept a rollover.
- **Direct Rollover of a Series of Payments** – If you receive eligible rollover distributions that are paid in a series of payments for less than ten years, your choice to make or not make a direct rollover for a payment will apply to all payments in the series until you change your election. You are free to change your election for any subsequent payment in the series.
- **Rollover to a Roth IRA**
 - If you roll over the payment to a Roth IRA, a special rule applies under which the amount of the payment rolled over (reduced by any after-tax amounts) will be taxed. However, the 10% additional income tax on early distributions will not apply (unless you take the amount rolled over out of the Roth IRA within 5 years, counting from January 1 of the year of the rollover).
 - If you roll over the payment to a Roth IRA, later payments from the Roth IRA that are qualified distributions will not be taxed (including earnings after the rollover). A qualified distribution from a Roth IRA is a payment made after you are age 59½ (or after your death or disability, or as a qualified first-time home buyer distribution of up to \$10,000) and after you have had a Roth IRA for at least 5 years. In applying this 5-year rule, you count from January 1 of the year for which your first contribution was made to a Roth IRA. Payments from the Roth IRA that are not qualified distributions will be taxed to the extent of earnings after the rollover, including the 10% additional income tax on early distributions (unless an exception applies). You do not have to take required minimum distributions from a Roth IRA during your lifetime. For more information, see IRS Publication 590, Individual Retirement Arrangements (IRAs).
 - You cannot roll over a payment from the Plan to a designated Roth account in an employer plan.

Payment Paid to You

If your payment can be rolled over and the payment is made to you rather than a rollover to a successor custodian for your benefit, it is subject to 20% mandatory federal income tax withholding on the taxable portion (state tax withholding may also apply). The payment is taxed in the year you receive it unless, within 60 days, you roll it over to a traditional IRA or an eligible employer plan that accepts rollovers.

- **Mandatory Withholding** – If any portion of the distribution payment is made to you, we are required by law to withhold 20% of that amount and send it to the IRS as federal income tax withholding. 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.

Income Tax Withholding

- **Sixty-Day Rollover Option** – If you have an eligible rollover distribution paid to you, you can still decide to roll over all or part of it to a traditional IRA or eligible employer plan that accepts rollovers. If you decide to roll over the surrendered amount, 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 or eligible employer plan.
- You can roll over up to 100% of the eligible rollover distribution, including an amount equal to the 20% that was withheld. If you choose to rollover 100%, you must find other money within the 60-day period to contribute to the traditional IRA or the eligible employer plan to replace the 20% that was withheld. If you rollover only the 80% that you received, the 20% that was withheld will be included in your gross income for the year.
- **Additional 10% Federal Income Tax Penalty if You are Under Age 59½** - If you receive a payment before you reach age 59½ and you do not roll it over, in addition to the regular income tax, you may have to pay an extra tax equal to 10% of the taxable portion of the payment unless an exception applies.

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- Decedent Rollover Option - If not rolled into a Decedent IRA, whether it be to a spousal or non-spousal beneficiary account, may be subject to 20% withholding.

Surviving Spouses, Alternate Payees and Other Beneficiaries

- In general, the rules summarized above, with some exceptions, also apply to payments to surviving spouses of employees and to spouses or former spouses who are "alternate payees". (You are an alternate payee if your interest in the 403(b) (7) custodial account results from a "qualified domestic relations order" issued by a court in connection with a divorce or legal separation.) Some of these rules also apply to a deceased employee's beneficiary who is not a spouse.
- If you are a surviving spouse or an alternate payee, you may choose to have an eligible rollover distribution paid as a direct rollover to a traditional IRA or an eligible employer plan or paid to you. If you have the payment paid to you, you can keep it or roll it over yourself to a traditional IRA or eligible employer plan. In summary, you have the same choices as the employee.
- In the event of an employee's death, additional paperwork will be required. Please provide a certified copy of the employee's death certificate, a IRS Form W-9 for the beneficiary, and the legal name, physical address, date of birth and Social Security Number of the beneficiary.
- If you are a surviving spouse, an alternate payee, or another beneficiary, your payment is generally not subject to the additional 10% tax described above.

How to Obtain Additional Information

This notice summarizes only the federal (not state or local) tax rules that might apply to your payment. The rules are complex and contain many conditions and exceptions that are not included in this notice. Therefore, you may want to consult with a professional tax advisor before you take a payment of your benefits from your 403(b) (7) custodial account.

Also, you can find more specific information in the tax treatment of payments from 403(b) programs in IRS Publication 571, Tax Sheltered Annuity Programs for Employees of Public Schools and Certain Tax-Exempt Organizations, IRS Publication 575, Pension and Annuity Income and IRS Publication 590, Individual Retirement Arrangements. These publications are available from your local IRS office, on the IRS Internet website at www.irs.gov or by calling 1-800-829-3676 (1-800-TAX-FORM).

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- **Rollover Option** - You may withdraw any or all of the assets from a 403(b) account and reinvest some or all of the proceeds into an IRA or non-Roth eligible retirement plan, except for any non-qualifying distributions, tax-free within 60 days. Hartford does not accept contributions or rollover money into Hartford 403(b) accounts. Please consult with a tax advisor for complete details on the IRS rollover guidelines. If you are eligible for a rollover, the proceeds can be reinstated into another qualified retirement plan with Hartford Funds without a sales charge, as long as the transfer agent is notified before you invest and the purchase does not exceed contribution limits. All accounts involved must have the same registration.
- **Reinstatement Privilege** - Please note that Hartford Funds does not accept contributions or rollover money into Hartford Funds 403(b) mutual fund accounts, so this privilege would only be applicable under the conditions noted above for 403(b) funds being rolled into a different qualified account type with Hartford Funds.

When shares of a fund are sold, some or all of the proceeds can be reinvested in the same fund, or any other Hartford Funds fund, within 90 days without a sales charge, as long as we are notified at the time of the reinvestment. If class A or C shares were sold, the shareholder must reinvest in shares of the same class. If a CDSC was paid when the class A or C shares were sold, the account will be credited with the amount of the CDSC. All accounts involved must have the same registration.

Please refer to the fund prospectus for complete details of the reinstatement privilege.

Section A - Hartford Funds Account Owner Information (all fields required)

Owner's Name	Hartford Funds Account Number		Date of Birth (mm/dd/yyyy)
Residential Address (required)	City	State	ZIP Code
Owner's Social Security Number or Tax Identification Number	Telephone Number		

Section B - Distribution Election (One election type is required per form)

1. ☐ **Full Redemption** - All funds within the account number listed above will be redeemed.

2. ☐ **Partial Redemption** (Section C is required)

Note: Redemption requests from C shares may be subject to a Contingent Deferred Sales Charge (CDSC). In order to provide a check for your requested amount; it may be necessary to redeem an additional amount for any applicable CDSC.

3. ☐ **Systematic Withdrawal** (Section C is required) - Periodic withdrawals of \$50 or more are available only for accounts with balances of \$5,000 or more. You may request a specific dollar amount or annualized percentage of the market value of your account to be withdrawn on any day of the month between the 1st and 28th.

Frequency (required): ☐ Monthly ☐ Quarterly ☐ Semi-annually ☐ Annually

Please begin my systematic withdrawal on _____ (mm/dd/yyyy)

If no date is chosen, the program will run on the 10th of the month based on payment frequency.

☐ I would like my distributions to represent an annualized percentage of the account(s) listed. Specify percent: ____ %

☐ I would like to receive a total of \$ _____ each payout, distributed from the funds as specified in Section C.

Section C - Fund Election

For a partial redemption or systematic withdrawal, please indicate the fund(s) being redeemed and the amount(s) to redeem from each fund:

Fund Name	Class	Dollar Amount	Number of Shares	Percentage
		\$		or %
		\$		or %
		\$		or %
		\$		or %

Section D - Reason for Redemption (required)

Note: In an effort to properly code the 1099 tax form for tax reporting, a reason for the redemption must be provided. Hartford Funds recommends you consult with a tax advisor for any questions about distributions from your retirement plans.

Indicate Reason for Redemption: ☐ Attainment of Age 59½ ☐ Terminated Plan* ☐ Severance from Employment
☐ Death ☐ Disability
☐ Financial Hardship [My 12/31/1988 account balance (if applicable) \$ _____]

*Additional documents are required in the case of a terminated plan. Please submit a copy of the Certified Board Resolution stating the plan is terminating. The resolution must also state that all benefits are fully vested and include the date of termination.

Section E - Financial Hardship

My financial hardship is due to:

- ☐ Purchase, excluding mortgage payments, of a principal residence for myself.
- ☐ Funeral expenses of a family member.
- ☐ Payment of tuition for the next 12 months of post-secondary education for myself, my spouse, my children or other dependents.
- ☐ Medical expenses described in Section 213(d) of the Internal Revenue Code incurred by myself, my spouse, or my dependents as defined in Section 152 of the Internal Revenue Code.
- ☐ Need to prevent eviction from my principal residence or foreclosure on the mortgage on that residence.

I certify that the distribution requested is necessary to satisfy an immediate and heavy financial need and does not exceed the amount needed to meet such need, and the need can not be satisfied by any of the following alone, or in combination.

- (a) through reimbursement or compensation by insurance or otherwise,
- (b) by reasonable liquidation of my assets, to the extent such liquidation would not itself cause an immediate and heavy financial need,
- (c) by cessation of elective contributions to the plan,
- (d) by borrowing from all employer-sponsored qualified plans, or by borrowing from commercial sources at reasonable commercial terms.

Property owned by you and your spouse together must be counted to determine whether you have other assets that may be used to meet any financial need.

Section F - Delivery Instructions (required)

Please select one of the following options:

1. ☐ Forward check to my current address of record

Forward check to an alternate address:

Note: If other than address of record, a Medallion Signature Guarantee Stamp is required in Section J under "Medallion Stamp Here". If nothing is checked below, the address will not be changed.

- ☐ Permanent Address Change ☐ Temporary Address Change (default)

Mailing Address	City	State	Zip
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2. ☐ Forward check to new custodian:

(Please provide Transfer of Asset Paperwork and a Letter of Acceptance from the receiving Custodian)

Name of Receiving Custodian			
Mailing Address	City	State	Zip

Note: If a Letter of Acceptance is not provided by the receiving Custodian, the distribution may become a taxable event.

3. ☐ Deposit into bank account by ACH (all fields below are required)

Important: By signing this paperwork, you agree and confirm that your use of the Automated Clearing House ("ACH") Network will not result in transfers to or from a financial institution outside of the United States. You also understand it is your responsibility to notify Hartford Funds if any changes to your status occur that may require funds to be sent to or from a financial institution outside of the United States.

Name of Financial Institution		Telephone Number	
Address	City	State	Zip
Checking Number at Financial Institution	Bank Routing Number (must be 9 digits - attach a voided check) <div style="display: flex; justify-content: space-around; width: 100%;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>		
Account Type (please select one) <input type="checkbox"/> Checking (attach a voided check) <input type="checkbox"/> Savings (attach a deposit slip)			
Bank Account Owner(s)			

Note: If the registration on the bank account is different from the registration on the Hartford Funds account or if this is a new or updated bank account on the record, we require a medallion signature guarantee.

Medallion Signature Guarantee Stamp Here

John Q. Public
123 Main Street
Anywhere, ST 00000-0000 0000

Pay to the order of _____ \$ _____ Dollars

Any Bank
Any Town, ST 00000

MEMO _____

1:000000000:1

0000000000

XXXX

↓
Bank Routing Number

↓
Account Number

Attach an original voided check here. Please use tape instead of staples.



- No faxed copies allowed.
- No Starter Checks.
- Minimum ACH is \$50 per fund per month.
- ACH will arrive in 2-3 business days.
- There is no fee for this option.

Section G - State Income Tax Withholding

Hartford Funds may be required to withhold state tax from your distribution based upon state tax law for your state of residency. Your state of residency is determined by the legal address of record on your account. We recommend that you contact your tax professional regarding your tax withholding elections, and to answer any questions that you may have regarding your state's withholding laws.

Section H - Federal Income Tax Withholding

Federal tax law requires us to withhold a default rate of 20% of the taxable amount of all eligible rollover distributions from a 403(b) account. You can choose a rate greater than 20%.

For any portion of your payment that is not an eligible rollover distribution, Federal tax law requires us to withhold a default rate of 10% of the taxable amount of distributions made to payees within the United States unless you select a different rate. For distributions outside the United States, the default withholding rate is 10%. You can choose to have a different rate, but you generally can't choose a rate of less than 10% for payments delivered outside the United States and its territories.

For distributions to nonresident aliens, federal tax law generally requires us to withhold a default rate of 30% of the taxable amount of the distribution. Do not use Form W-4R. See IRS Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Publication 519, U.S. Tax Guide for Aliens, for more information.

Complete the attached Form W-4R, Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions, to indicate your federal tax withholding election. Use whole percentages only. Return the completed and signed Form W-4R with this completed and signed 403(b) distribution request form. If Form W-4R is not returned, incomplete, indicates a percentage less than 20%, or indicates partial percentage withholding, we must withhold 20% of the payment for federal income tax and we cannot honor requests to have a lower (or no) amount withheld.

If you have chosen a systematic distribution, you may change your federal withholding election at any time by calling us at (888) 843-7824 or by completing and submitting a new Form W-4R. You can obtain another copy of Form W-4R at www.irs.gov/forms-instructions.

Section I - Employer Acknowledgment

Employer Certification

This section must be completed by the employer that sponsored the 403(b) plan with our company if a distribution, exchange (change to a contract under same 403(b) plan), direct transfer (to another 403(b) plan) or direct rollover is being requested. In addition to the signature of the employer that sponsored the plan with our company, if a direct transfer (to another 403(b) plan) is being requested the employer sponsoring the 403(b) plan at the new financial institution must certify that this transfer is allowed. We require that a letter from the plan acknowledging who is authorized to sign on behalf of the plan(s) (both plans if applicable) be attached. Please note, an employer signature is not necessary when redeeming due to the death of the employee.

Distribution, Direct Rollover and Exchange Requests

My signature below represents and warrants that I am a duly authorized representative of the employer, (documentation attached) that sponsored the 403(b) plan that the contract was issued under Hartford Funds. By signing this form I acknowledge and certify that all requirements under applicable law have been met to permit the transaction requested in this form.

403(b) Plan Sponsoring Employer ("Employer")

403(b) Plan Name ("Plan")

Direct Transfer Requests

My signature below represents and warrants that I am a duly authorized representative of the employer, (documentation attached) sponsoring the 403(b) plan that will be receiving the direct transfer. By signing this form I acknowledge and certify that all requirements under applicable law have been met to permit the transaction requested in this form.

403(b) Contract Exchange Representations, Warranties, and Agreement

I, as a duly authorized representative of the Employer sponsoring this 403(b) Plan, represent and warrant the following:

- (a) this exchange is permitted by the Plan;
- (b) the distribution eligibility provisions under the new contract/custodial account are at least as restrictive as those under this contract and the Plan;
- (c) after the exchange, the accumulated benefit in the new contract or custodial account will be at least equal to the accumulated benefit of this contract;
- (d) the Employer has entered into an information sharing agreement with the contract issuer/account custodian which satisfies the requirements of Treasury Regulations Section 1.304(b)-10(b) (2).

403(b) Plan Sponsoring Employer ("Employer")

403(b) Plan Name ("Plan")

Section J - Employee Acknowledgment

Based on your request, please review the applicable disclosure and sign below in Authorization/Acknowledgment section.

Distribution and Direct Rollover requests - I understand that there are complex tax laws that Hartford Funds must comply with pertaining to permitting distributions from my 403(b) account. These laws require Hartford Funds to seek confirmation from the employer that sponsored my 403(b) plan that the triggering event indicated in the applicable section of this form has occurred that will allow me take a distribution or rollover from my 403(b) account. I understand that Hartford Funds may not have the name or contact information for that employer. Accordingly, I understand that I must have the employer that sponsored my 403(b) plan sign the above certification. I understand and agree that if I receive a distribution without appropriate employer certification, I will be responsible for any and all taxes, penalties or other costs that may result from such distribution, including those taxes and penalties that Hartford Funds or other parties to the Plan may incur. By signing below, I represent and warrant that all information contained herein is true and accurate and that I will indemnify and hold harmless Hartford Funds and any other party who may incur liability because of any misrepresentations made herein, for any taxes, penalties or other losses incurred because of such misrepresentations.

Direct Transfers Request to Another 403(b) Plan or Exchange to Another Contact under the Same 403(b) Plan - I understand if I am requesting a direct transfer to a 403(b) plan sponsored by someone other than the employer that sponsored the 403(b) plan with Hartford Funds that certification from the employer that sponsored the 403(b) plan with Hartford Funds and certification from the new employer sponsoring the plan at the new financial institution must be provided above. I understand that if I am requesting an exchange to another contract under the same plan that certification from the employer that sponsored the 403(b) plan with Hartford Funds must be provided. The employer signature(s) will acknowledge that the contract issued at the new financial institution meets all of the conditions under applicable law in order to permit such a transfer or exchange.

Investment Advice - I understand that Hartford Funds is not providing me investment advice. I understand that Hartford Funds is not acting as a fiduciary with respect to this matter. I understand that I should consult my financial professional for investment advice.

Section K - Authorization/Acknowledgment

Please redeem the above requested amounts as directed. I agree with the requirements set forth on this form.

Account Owner's Name (print)

Medallion Signature Guarantee Stamp Here

Account Owner's Signature

Date Signed (mm/dd/yyyy)

**Fax this completed form to (888) 802-0039,
or mail it to the appropriate address below.**

**For standard mail delivery,
please mail this form to:**

Hartford Funds
P.O. Box 219060
Kansas City, MO 64121-9060

**For private express mail,
please mail this form to:**

Hartford Funds
801 Pennsylvania Ave Suite 219060
Kansas City, MO 64105-1307

1a First name and middle initial	Last name	1b Social security number
Address		
City or town, state, and ZIP code		

Your withholding rate is determined by the type of payment you will receive.

- For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100% on line 2. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its territories.
- For an eligible rollover distribution, the default withholding rate is 20%. You can choose a rate greater than 20% by entering the rate on line 2. You may not choose a rate less than 20%.

See page 2 for more information.

2	Complete this line if you would like a rate of withholding that is different from the default withholding rate. See the instructions on page 2 and the Marginal Rate Tables below for additional information. Enter the rate as a whole number (no decimals)	2	%
Sign Here	Your signature (This form is not valid unless you sign it.)		Date

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 or eligible rollover distribution from your employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See page 2 for the rules and options that are available for each type of payment. Don't use Form W-4R for periodic payments (payments made in installments at regular

intervals over a period of more than 1 year) from these plans or arrangements. Instead, use Form W-4P, Withholding Certificate for Periodic Pension or Annuity Payments. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

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.

2024 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 page 2 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%
14,600	10%	29,200	10%	21,900	10%
26,200	12%	52,400	12%	38,450	12%
61,750	22%	123,500	22%	85,000	22%
115,125	24%	230,250	24%	122,400	24%
206,550	32%	413,100	32%	213,850	32%
258,325	35%	516,650	35%	265,600	35%
623,950*	37%	760,400	37%	631,250	37%

* If married filing separately, use \$380,200 instead for this 37% rate.

General Instructions (*continued*)

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 2024, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

Eligible rollover distributions—20% withholding. Distributions you receive from qualified retirement plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a 20% default rate of withholding on the taxable amount of the distribution. You can’t choose withholding at a rate of less than 20% (including “-0-”). Note that the default rate of withholding may be too low for your tax situation. You may choose to enter a rate higher than 20% on line 2. Don’t give Form W-4R to your payer unless you want more than 20% withheld.

Note that the following payments are **not** eligible rollover distributions for purposes of these withholding rules:

- Qualifying “hardship” distributions;
- Distributions required by federal law, such as required minimum distributions;
- Generally, distributions from a pension-linked emergency savings account;
- Eligible distributions to a domestic abuse victim;
- Qualified disaster recovery distributions;
- Qualified birth or adoption distributions; and
- Emergency personal expense distributions.

See Pub. 505 for details. See also *Nonperiodic payments—10% withholding* above.

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 1b

For an estate, enter the estate’s employer identification number (EIN) in the area reserved for “Social security number.”

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 on page 1 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 \$62,000 without the payment. Step 1: Because your total income without the payment, \$62,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$82,000, is greater than \$61,750 but less than \$115,125, 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 \$43,700 without the payment. Step 1: Because your total income without the payment, \$43,700, is greater than \$26,200 but less than \$61,750, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$63,700, is

greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. The two rates differ. \$18,050 of the \$20,000 payment is in the lower bracket (\$61,750 less your total income of \$43,700 without the payment), and \$1,950 is in the higher bracket (\$20,000 less the \$18,050 that is in the lower bracket). Multiply \$18,050 by 12% to get \$2,166. Multiply \$1,950 by 22% to get \$429. The sum of these two amounts is \$2,595. This is the estimated tax on your payment. This amount corresponds to 13% of the \$20,000 payment (\$2,595 divided by \$20,000). Enter "13" on line 2.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request additional federal income tax withholding from your nonperiodic payment(s) or eligible rollover distribution(s); (b) choose not to have federal income tax withheld from your nonperiodic payment(s), when permitted; or (c) change a previous Form W-4R (or a previous Form W-4P that you completed with respect to your nonperiodic payments or eligible rollover distributions). To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s).

Failure to provide a properly completed form will result in your payment(s) being subject to the default rate; providing fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.