Janus Henderson
INVESTORS

IRA Distribution Form

PO Box 219109 • Kansas City, MO 64121-9109 • 800-525-1093

Use this form for a one-time distribution or to set up automatic distributions from your Janus Henderson IRA.

Questions?
Call us at **800-525-1093**

- Please type or print using black ink.
- Please complete all sections of the form unless otherwise noted.
- IRS Announcements 2014-15 and 2014-32 limit rollovers from an IRA to another (or the same) IRA to *one in any 12-month period*, regardless of the number of IRAs you own. This "One-Rollover-Per-Year" rule does not apply to IRA transfers, conversions, recharacterizations, or direct rollovers to or from a qualified plan. Please seek professional tax advice regarding questions about any IRA distributions.
- **Please do not use this form to request distributions for an Inherited IRA.**

Step 1 - Provide all your information

First Name _____ Middle Initial _____ Last Name _____

Address _____

City _____ State _____ Zip Code _____ Phone Number _____

Social Security Number (required) _____ Date of Birth (required) _____

Step 2 - What type of distribution would you like to make?

Select one:

☐ One-time Distribution (proceed to Step 3)

☐ Set Up Automatic Distributions (proceed to Step 4)

Note: If you would like to do a one-time distribution and also set up an automatic distribution please complete a separate form for each request.

Remember to sign on the last page

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Step 3 - One-time distribution amount (please select one)

- ☐ Required Minimum Distribution (RMD)* **(complete beneficiary information in Step 5)**
- ☐ Specific Dollar, Share or Percentage Amount **(choose allocation in Step 6)**

Step 4 - Set Up Automatic Distributions (complete both parts)

Part 1 (please select one)

- ☐ Required Minimum Distribution (RMD)* **(complete beneficiary information in Step 5)**
- ☐ Specific Dollar, Share or Percentage Amount **(choose allocation in Step 6)**
- ☐ Series of Substantially Equal Periodic Payments (call for details)

Part 2 (please select one)

Choose The Frequency of Your Automatic Distribution:

- ☐ Monthly
- ☐ Bimonthly (every other month)
- ☐ Quarterly
- ☐ Semiannually
- ☐ Annually

Choose a start date:

_____/_____/_____
Start Date (MM/DD/YYYY)

Note: We will process your automatic transaction on or about the 24th of the month, unless you specify another date. Start date does not apply to one-time transactions. One-time transactions will be processed at the next calculated net asset value as of the date this form is received and in good order. Unless otherwise specified, bimonthly means February, April, June, August, October and December; quarterly means March, June, September and December; semiannually means June and December; and annually means December. Unless otherwise requested automatic transactions will default to annually and begin on the next available date.

* Janus Henderson will calculate your Required Minimum Distribution (RMD) based off the information in Step 5

Remember to sign on the last page

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Step 5 - Required Minimum Distribution (RMD) Calculation - Complete this step **only** if you indicated in Step 3 or 4 that you are taking your RMD. For Janus Henderson to calculate your RMD, please provide the following beneficiary information:

☐ **Beneficiary is your spouse** (includes if your beneficiary is a trust and your spouse is the sole primary beneficiary).

_____ _____

Spouse's Name Date of Birth

☐ **Beneficiary is not your spouse.**

Required information: Please provide us with the prior year-end value of any previous retirement accounts that were transferred or rolled over to Janus Henderson during the current year:

$_____

Step 6 - Provide which Fund(s) / Account(s) you would like to take your distribution from. Please make sure to indicate: $ Amount, # of Shares, % or All

☐ Proportionally from all funds based on their prior year-end balance **(RMDs only)**.

☐ From the following funds:

_____	_____	_____
Fund Name or Number	Account Number	☐ $ Amount, ☐ # of Shares, ☐ % or ☐ All
_____	_____	_____
Fund Name or Number	Account Number	☐ $ Amount, ☐ # of Shares, ☐ % or ☐ All
_____	_____	_____
Fund Name or Number	Account Number	☐ $ Amount, ☐ # of Shares, ☐ % or ☐ All
_____	_____	_____
Fund Name or Number	Account Number	☐ $ Amount, ☐ # of Shares, ☐ % or ☐ All

Notes:

If you have elected to have Janus Henderson calculate your RMD automatically, we will update the amount each year based on the prior year-end value. Due to the complexities of RMD rules you may want to contact a Janus Henderson Representative to have your RMD reviewed each year to make sure you are meeting your IRS requirements. Failure to do so may result in a distribution amount different than expected. If no option is checked, we will calculate your RMD.

Remember to sign on the last page

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Step 7 - What type of distribution is this? (Please select one)

☐ **Normal Distribution** - I am age 59½ or older.

☐ **Premature Distribution** - I am under age 59½.

☐ **Premature Distribution with Exception** - I am under age 59½, however, these distributions constitute a Series of Substantially Equal Periodic Payments and are not subject to the 10% penalty tax for early distributions. (Please select one)

- ☐ Single Life Calculation
- ☐ Joint Life Calculation
- ☐ Uniform Calculation
- ☐ Other_____ (Call a Janus Henderson Retirement Representative at 800-525-1093)

☐ **Disability**

☐ **Death** - Please call 800-525-1093 for specific distribution instructions.

☐ **Direct Rollover** - (complete Step 10) Used only to move an IRA into a Qualified Retirement Plan. Do not select if moving an IRA or Roth IRA into another IRA or Roth IRA.

☐ **Return of Excess Contribution**

Contribution Year _____

Amount of Excess $_____ (Janus Henderson will calculate and distribute applicable earnings on the excess amount, if any)

Remember to sign on the last page

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Step 8 - Tax Withholding Election (Required)

If NO option is selected, IRS regulations require federal income tax to be withheld at a rate of 10% from your distribution(s). Any applicable mandatory state income tax will also be withheld at your state's required minimum rate. Review the notes below.

The IRS default withholding rate is 10%. You can choose to have a different rate – including any rate from zero to 100%. You can find the current version of IRS Form W-4R online at www.irs.gov for further instructions and a rate table that helps you choose a rate this is appropriate for your tax situation. You cannot choose a rate of less than 10% for payments delivered outside the United States or its territories. Any applicable mandatory state income tax will also be withheld at your state's required minimum rate.

Form W-4R/OMB NO. 1545-0074

☐ **I do not want any federal income tax withheld on my distribution(s).**

I understand that I will be responsible for paying the income tax (if any) which may be due as a result of these distribution(s). If required by my state, mandatory withholding for state income tax will be taken at my state's required minimum rate.

☐ **Please withhold federal income tax on my distribution(s) at the rate of _____ %**

I understand that Janus Henderson will remit any income tax which has been withheld to the Internal Revenue Service on my behalf. If required by my state, mandatory withholding for state income tax will be taken at my state's required minimum rate.

Notes:

- **It is NOT necessary to complete, sign and return IRS Form W-4R with this distribution form.**
- **If NO box is selected, federal income tax will be taken at an IRS default rate of 10% along with any mandatory state income tax for a Traditional IRA, SEP IRA or SAR-SEP IRA; a Roth IRA will default to no withholding.**
- Withholding is not an option on return of excess requests.
- Any amounts withheld cannot be reimbursed by Janus Henderson.
- If you elect not to have withholding apply to your distribution(s), or if you do not have enough federal income tax withheld from your distribution(s), 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. Even if you elect not to have federal income tax withheld, you are liable for payment of federal income tax on the taxable portion of your distribution(s). Whether or not you elect to have withholding apply, you are responsible for any federal income taxes, state and local taxes, and any penalties that may apply to your distribution(s).
- This distribution(s) will be reported to the IRS and the state of your residence, if applicable, as taxable income. The address on the account registration at the time of the distribution(s) will determine the state of residence for state withholding purposes.

Remember to sign on the last page

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Step 9 - Choose where you would like your distribution sent (please select one)

A signature guarantee may be required for the following options (see the requirements in Step 12).

☐ Send my distribution(s) to my new or existing non-retirement account at Janus Henderson:

Fund Name or Number	Existing Account Number or "New"	% or $ Amount
Fund Name or Number	Existing Account Number or "New"	% or $ Amount
Fund Name or Number	Existing Account Number or "New"	% or $ Amount

☐ Send my distribution(s) to the address of record.

☐ Send my distribution(s) to the bank of record.

Remember to sign on the last page

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Step 9 - (continued)

☐ Send my distribution(s) to the following bank (applies only if bank is other than the current bank of record):

This is a:

☐ Checking Account

☐ Savings Account

_____
9-Digit Bank Routing/ABA Number

_____
Checking or Savings Account Number

_____
Bank Name

_____
Owner's Name Exactly as on Bank Account

_____
Joint Owner's Name Exactly as on Bank Account

If the owner(s) of the bank account is anyone other than the owner(s) of the Janus Henderson account please complete a Bank Options Form or call a Janus Henderson Representative for more information at 800-525-1093

Please attach a *preprinted* voided check.



Don't have a preprinted voided check? Please contact a Janus Henderson representative at: **800-525-1093**.

Remember to sign on the last page

Step 9 - (continued)

☐ Send my distribution(s) to the following Third Party (signature guarantee required):

Name of Third Party, Entity, Custodian or Bank _____ Account Number _____

Address _____

City _____ State _____ Zip Code _____

Step 10 - Complete this step only if this a Direct Rollover to a Qualified Plan - Signature guarantee is required (see Step 12)

Send my direct rollover to the following Qualified Plan:

Name of Financial Institution or Custodian _____

Address _____

City _____ State _____ Zip Code _____

Name on Account _____ Financial Institution or Custodian Phone Number _____

Qualified Plan Account Number _____

Type of Qualified Plan this direct rollover is going into (contact the plan administrator for any additional requirements):

☐ 401(k)

☐ 403(b)

☐ 457(b)

☐ 401(a) (Defined Benefit Plan to Purchase Service Credit)

☐ Other _____ **(Do not select an IRA or Roth IRA)**

Note: Janus Henderson does not provide any certification of any after-tax amounts.

Remember to sign on the last page

Step 11 - Please read and sign

- **By signing below, I agree that the information provided is accurate. I have read the most current version of IRS Form W-4R, and I certify the tax withholding election made in Step 8 is correct based on my individual tax situation.**
- **The required minimum distribution (RMD) is my responsibility. Furthermore, if due to my redemption or exchange activity the systematic distribution requested herein cannot be processed, I agree to contact Janus Henderson to adjust my systematic distribution options. Janus Henderson will not be held liable for any failure to distribute. Due to the important tax consequences associated with retirement plan distributions, I have been advised to consult with a tax professional.**

Note: *The terms identified below will apply to any new accounts established using this form. Your signature is required to process this form and to open your new account.*

- I certify that I have received and read the current prospectus of the Fund(s) in which I am investing. I certify that I have the authority and legal capacity to make this purchase and that I am of legal age in my state of residence.
- I agree to read the prospectus for any Janus Henderson fund(s) into which I may request an exchange in the future. I understand that the terms, representations and conditions in this application and the prospectus, as amended from time to time, will apply to this account and any account established at a later date. Access janushenderson.com or call Janus Henderson at 800-525-1093 to obtain a prospectus.
- I authorize the Fund and its agents to act upon instructions (by phone, in writing, online or by other means) believed to be genuine and in accordance with procedures described in the prospectus for this account or any account into which exchanges are made. I agree that neither the Funds nor the transfer agent will be liable for any loss, cost or expense for acting on such instructions, provided the Fund employs reasonable procedures to confirm that instructions communicated are genuine. I understand it is my responsibility to review account statements and inform Janus Henderson of errors posted to my account. I understand Janus Henderson reserves the right not to correct errors not brought to the company's attention within a reasonable time period. I understand that anyone who can properly identify my account(s) may be able to make telephone transactions on my behalf.
- I authorize the Fund and its agents to issue credits to and make debits from the bank account information set forth on this application. I agree that Janus Henderson shall be fully protected in honoring any such transaction. I also agree that Janus Henderson may make additional attempts to debit/credit my account if the initial attempt fails and that I will be liable for any associated costs. I agree that if I submit bank information for a bank that does not participate in the Automated Clearing House (ACH) or provide information for a nonbank account, Janus Henderson will price my purchase at the net asset value next determined after Janus Henderson receives good funds. All account options selected and this authorization will remain in effect and become part of the account application and terms, representations and conditions thereof until I notify Janus Henderson in writing or by phone that I wish to revoke this authorization. I understand that my termination request will be processed within a reasonable time frame upon receipt.
- I authorize the Fund and its agents to establish telephone and online redemption and purchase privileges on my account. I also authorize the Fund and its agents to reinvest all income dividends and capital gains distributions in the distributing fund. I authorize the Fund and its agents to establish redemption privilege by electronic transfer to the bank account set forth on this application.
- I consent to the 'householding' delivery of any fund prospectuses, shareholder reports or other documents (except transaction confirmations and account statements) that I am required, by law, to receive. This means Janus Henderson will generally deliver a single copy of the most recent annual and semiannual reports, prospectuses, and newsletters to investors who share an address, even if the accounts are registered under different names. My participation in this program will continue indefinitely unless I contact Janus Henderson.

Remember to sign on the last page

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Step 11 - (Continued)

- I acknowledge, pursuant to the Emergency Economic Stabilization Act of 2008, Janus Henderson is required to track and report cost basis information on the sale (redemption or exchange) of Covered Shares (shares purchased on or after 1/1/2012) to the Internal Revenue Service (IRS). Reporting is not required for Uncovered Shares (shares purchased before 1/1/2012). Janus Henderson utilizes Average Cost as the default method for tracking and reporting cost basis. If you wish to elect a different method for your account, please cross out this statement and include signed written instructions indicating your desired cost basis method. Alternate elections will apply only to Covered Share purchases.

  Important Note: To help the government deter money laundering and terrorism funding activities, all financial institutions are now required to obtain, verify and record information that identifies each person who opens an account. So that we may comply with these requirements, we ask you to please complete this form in its entirety when opening an account with Janus Henderson. The omission of information may result in the return of your application and investment. Please note that your ability to perform transactions in your account may also be affected or otherwise delayed if Janus Henderson cannot easily verify the accuracy of the required information on this form. If, after 30 days, Janus Henderson is still unable to verify the required information, your account may be closed and your shares redeemed at the next available NAV.

  Under penalty of perjury, I certify that:

  1. The Social Security Number indicated on this form is correct.
  2. I am not subject to backup withholding because: (a) I am exempt from backup withholding; or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends; or (c) the IRS has notified me that I am no longer subject to backup withholding. Cross out item 2 if you have been notified by the IRS that you are currently subject to backup withholding.
  3. I am a US citizen or a US Resident Alien residing in the United States or a US Territory.
  4. I am exempt from reporting per the Foreign Account Tax Compliance Act (FATCA).

Remember to sign on the last page

Step 11 - (continued)

Social Security Number _____

This information is required if you are opening a new non-retirement account.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Signed:

(please review Step 12 below before signing)

X_____ _____

Signature of Account Owner Date

Step 12 - Do you need a signature guarantee?

A signature guarantee is required if your distribution is one or more of the following:

- Amount is over $250,000.
- Being mailed to a name or address other than the address of record or the address of record has been on file for less than 10 days.
- Being paid to a party other than the owner of the account.
- Being paid to an account that is different than the name on the Janus Henderson IRA. Please call 800-525-1093 for specific instructions.
- Being paid to a bank account other than the bank of record or the bank of record has been on file less than 15 days.

PLACE GUARANTEE STAMP AND AUTHORIZED SIGNATURE INSIDE OF THE SPACE PROVIDED. DO NOT OVERLAP ANY PART OF THE STAMP AND/OR SIGNATURE WITH OTHER TEXT IN THE APPLICATION.

SIGNATURE GUARANTEE STAMP (Including Medallion Guarantees)

Note: *A signature guarantee assures a signature is genuine and protects you from unauthorized requests on your account. Financial institutions that may guarantee signatures include banks, savings and loans, trust companies, credit unions, broker/dealers and member firms of a national securities exchange. Contact the financial institution where you intend to obtain a signature guarantee for further information.*

A notary public cannot provide a signature guarantee.

Janus Henderson
INVESTORS

Janus Henderson Funds

PO Box 219109 • Kansas City, MO 64121-9109 • 800-525-3713

U.S. Equity

Adaptive Risk Managed U.S. Equity Fund - JRSDX (26)

Contrarian Fund - JACNX (61)

Enterprise Fund - JANEX (50)

Forty Fund - JFRDX (46)

Growth & Income Fund - JNGIX (40)

Mid Cap Value Fund - JNMCX (67)

Research Fund - JNRFX (48)

Small Cap Value Fund - JNPSX (65)

Small-Mid Cap Value Fund - JSVDX (85)

Triton Fund - JANIX (74)

U.S. Dividend Income Fund - JDDVX (34)

Venture Fund - JANVX (45)

Asset Allocation

Adaptive Global Allocation Fund - JAGDX (44)

Balanced Fund - JANBX (51)

Global Allocation Fund - Conservative - JMSCX (78)

Global Allocation Fund - Growth - JNSGX (76)

Global Allocation Fund - Moderate - JNSMX (77)

Fixed Income

Absolute Return Income Opportunities Fund - JUCDX (90)

Developed World Bond Fund - HFADX (71)

Flexible Bond Fund - JANFX (49)

High-Yield Fund - JNHYX (57)

Multi-Sector Income Fund - JMUDX (89)

Short Duration Flexible Bond Fund - JNSTX (52)

Global/International Equity

Asia Equity Fund - JAQDX (83)

Emerging Markets Fund - HEMDX (39)

European Focus Fund - HFEDX (47)

Global Equity Income Fund - HFQDX (53)

Global Life Sciences Fund - JNGLX (59)

Global Real Estate Fund - JNGSX (31)

Global Research Fund - JANWX (41)

Global Select Fund - JANRX (62)

Global Sustainable Equity Fund - JEDTX (73)

Global Technology & Innovation Fund - JNGTX (60)

Overseas Fund - JNOSX (54)

Responsible International Dividend Fund - HDDVX (33)

Money Market

Government Money Market Fund - JGVXX (38)

Money Market Fund - JNMXX (37)*

*Positions in Money Market Fund other than those beneficially owned by natural persons may no longer be opened. If this fund is selected to open an account that is not beneficially owned by a natural person, the purchase will be deposited into Government Money Market Fund.

Form **W-4R**

Department of the Treasury
Internal Revenue Service

Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions

Give Form W-4R to the payer of your retirement payments.

OMB No. 1545-0074

2024

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

Do Not Complete

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**	%

For Informational

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 an 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.

Purposes Only

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.

Sample Form

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

Form Complete
For Informational Purposes Only
Sample Form

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.

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