

IRA Distribution Request

Systematic Distribution and Partial or Complete Liquidation

J.P.Morgan
ASSET MANAGEMENT

Please write your account number in box provided.

Shareholder Services: 1-800-480-4111
Website: www.jpmorganfunds.com

This form should be used for withdrawals from your Traditional, Roth or SEP IRA. Please complete, sign and return this form to J.P. Morgan Funds, PO Box 219143, Kansas City, MO 64121-9143. Incomplete information may delay the processing of your distribution.

1. Personal Information

Plan type (check one) ☐ Traditional IRA ☐ Roth IRA ☐ SEP IRA

First Name MI Last

Street address

Suite/Apartment City State Zip code

☐ Address Change. Please check if the address above needs to be updated on your account. **A Medallion Guarantee is required, see section 6.**

Date of Birth (MMDDYYYY) Daytime phone

Social Security Number

2. Reason For Distribution

This section must be completed in accordance with IRS regulations. If your IRA is a beneficiary DCD IRA, do not check any boxes. Your distribution will be coded "Due to Death". For Required Minimum Distribution (RMD), please use the Required Minimum Distributions Request form.

Please check one.

- ☐ NORMAL: I am age 59 1/2 or older.
- ☐ PREMATURE: I am under age 59 1/2, not disabled and not taking substantially equal periodic payments. May be subject to 10% IRS penalty. Consult your tax advisor.
- ☐ PREMATURE EXCEPTION: (72T Rule) I am under age 59 1/2, not disabled and taking substantially equal periodic payments based on a life expectancy method. Not subject to 10% IRS penalty. Consult your tax advisor. If not included with this form, J.P. Morgan Funds may ask for your calculation details such as year-end balance, method, and applicable federal rate used. We may choose whether to code one-time or systematic distributions as 'premature exempt' based on an account review and method used.
- ☐ DISABILITY: I am under age 59 1/2 and disabled. (Please attach physician's determination.)

3. Type Of Distribution

Please check one.

A. ☐ FULL ACCOUNT DISTRIBUTION (Redeem all shares of all funds and close account.) (Proceed to section 4.)

B. ☐ ONE TIME DISTRIBUTION (From fund(s) and specific dollar amount listed below.)

Fund name	Fund number	Account Number	Distribution amount (\$) OR shares	*Net	*Gross
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$/shares <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$/shares <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$/shares <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Type Of Distribution (continued)

C. ☐ SYSTEMATIC DISTRIBUTIONS (From fund(s) and specific dollar amount listed below.) (Allow 20 days for set up.)

☐ Change Existing OR ☐ Add New

Frequency: ☐ Monthly ☐ Quarterly ☐ Semi-annually ☐ Annually

Start Date (If no date is selected, will begin 30 days after receipt of form.)

Fund name	Fund number	Account Number	Distribution amount (\$) OR shares	*Net	*Gross
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$/shares <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$/shares <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note: You may be subject to a Contingent Deferred Sales Charge (CDSC). Please see the Prospectus to determine if you are. *Net=Amount after any applicable fees and CDSC and withholding (if elected). *Gross=Overall total, before deductions and CDSC. **If no selection is made, your distribution will be processed as Gross.**

4. 10% Default Tax Withholding or Elective Withholding Instructions

- For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate from 0% up to 100% on the attached form W-4R. Generally, you cannot choose less than 10% for payments to be delivered outside the United States and its possessions. If this election is not completed, IRS regulations require federal income tax to be withheld at the rate of 10% from your distribution requested on this form. If you elect a withholding amount other than 10%, please complete and sign form W-4R which has been included at the end of this form for your convenience.
 - IMPORTANT: 10% of your distribution will be withheld unless you provide another amount from 0%-100% on the attached Form W-4R. You must include a signed Form W-4R to elect no withholding (by writing "0" on line 2) or anything other than 10%.**
 - If you do elect to withhold the default 10%, you must still include a blank copy of the W-4R. If no W-4R is returned with this form, JPMorgan Funds will need to contact you for clarification.**
- Roth IRAs:** The 10% default withholding does not apply to Roth IRA distributions as Roth IRAs are generally not subject to Federal withholding. However, you do still have the option to voluntarily withhold any amount 0%-100% on the W-4R.
- For payments delivered outside the United States and its territories, 10% default withholding will apply, or you may provide a whole percentage above 10% on a signed form W-4R.
- State withholding:**
 - Some states require us to withhold state income tax usually based on the percent or amount of federal tax withheld. Some states do not accept any income tax withholding from IRA distributions. If you would like a specific state withholding amount, please attach a separate letter of instruction. Consult your state's tax department with questions about state withholding and taxes on IRA distributions.
- Whether 10% default withholding applies, you requested another amount from 1%-100% on Form W-4R, or if there is voluntary or mandatory state withholding, you will receive the remaining amount after subtracting all withholding from your distribution total.

5. Method of Payment

Please check one.

- A. ☐ Mail my distribution check(s) to my address of record. (If \$50,000 or more or address of record changed in last 15 days, **Medallion Guarantee required. See section 6.)**
- B. ☐ Mail my distribution check(s) to an address other than my address of record. Note: The check will still be made payable to the account owner. This form should not be used for IRA Transfers. For Transfers, acceptance and delivery instructions from the New Custodian are required. **(Medallion Guarantee required. See section 6.)**

Mail Check(s) to: Street Address

Suite/Apartment

City

State

Zip code

- C. ☐ Make my distribution check(s) payable to a qualified charitable organization and mail the check(s) directly to the qualified charitable organization. Note: This option is only available if you are age 70 1/2 or older. **(Medallion Guarantee required. See section 6.)**
- Limit per year is \$100,000. Please consult the IRS or your tax advisor for tax benefits and individual eligibility clarification. The distribution will be reported as a Normal Distribution. Please maintain your own records for tax reporting purposes.

Make check(s) payable to:

Mail Check(s) to: Street Address

Suite/Apartment

City

State

Zip code

5. Method of Payment (continued)

- D. ☐ Deposit my distribution(s) into my bank account. A voided check or deposit slip must be attached (**Medallion Guarantee required if the banking information is not already on the account-see section 6.**)

NOTE: Credit Unions and non-Federal Member banks may require additional routing information to accept a wire. Please contact your financial institution for this information. Please attach a separate sheet of paper including this information if applicable. Failure to provide complete wire instructions may delay the delivery of your redemption proceeds.

☐ ACH OR ☐ Wire

☐ Checking Account I (we) have attached a voided check.

☐ Savings Account I (we) have attached a voided deposit slip.

Bank name:

ABA Routing Number:

Bank account number:

Name of Bank Account Owner:

Name of Bank Account Owner:

6. Signature And Certification

The Participant hereby authorizes this distribution(s) from the IRA to the undersigned and certifies that it is in accordance with the provisions of the IRA plan. I indemnify the custodian of J.P. Morgan Funds IRA, its agents, successors and affiliates from any and all claims the undersigned may have or hereafter claim to have with respect to the distribution(s).

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
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, and
3. I am a U.S. citizen or other U.S. person; and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Please note that certification #4 does not apply because you are not being asked for a FATCA exemption code.

Certification Instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

X _____
Participant signature

Date

Financial institution: Place Medallion Guarantee stamp here (important information below).

IMPORTANT INFORMATION

You may obtain a Medallion Guarantee from a bank or brokerage firm where you hold an account. We ask for a guarantee of your signature instead of a notarization because a notary does not provide the legal protection needed to process your transaction. Medallion Guarantee required if: **(1) Requesting to add or update banking instructions for a checking or savings account for ACHs or Wire requests,** (2) you request a check distribution to be sent to your address of record, and your address of record has been changed in the last 15 days, (3) you request a check distribution to be sent to an address other than the address of record, (4) the distribution is \$50,000 or more.

7. Completion Checklist

*Note: If you obtained a medallion guarantee, you must mail the original copy of this form to the address listed below.

☐ Sign the form?

☐ Attach a voided check or deposit slip if needed?

☐ Obtain a Medallion Guarantee in section 6 if needed?

☐ Complete all sections?

Please mail this form to:

Mailing address:

J.P. Morgan Funds

PO Box 219143

Kansas City, MO 64121-9143

Overnight mail:

J.P. Morgan Funds

430 W 7th Street Suite 219143

Kansas City, MO 64105-1407

J.P. Morgan Asset Management is the brand name for the asset management business of JPMorgan Chase & Co., and its affiliates worldwide.

1a First name and middle initial	Last name	1b Social security number
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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	%
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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.

2023 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%
13,850	10%	27,700	10%	20,800	10%
24,850	12%	49,700	12%	36,500	12%
58,575	22%	117,150	22%	80,650	22%
109,225	24%	218,450	24%	116,150	24%
195,950	32%	391,900	32%	202,900	32%
245,100	35%	490,200	35%	252,050	35%
591,975*	37%	721,450	37%	598,900	37%

* If married filing separately, use \$360,725 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 2023, 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: (a) qualifying “hardship” distributions, and (b) distributions required by federal law, such as required minimum 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 \$60,000 without the payment. Step 1: Because your total income without the payment, \$60,000, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$80,000, is greater than \$58,575 but less than \$109,225, 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 \$42,500 without the payment. Step 1: Because your total income without the payment, \$42,500, is greater than \$24,850 but less than \$58,575, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$62,500, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. The two rates differ. \$16,075 of the \$20,000 payment is in the lower bracket (\$58,575 less your total income of \$42,500 without the payment), and \$3,925 is in the higher bracket (\$20,000 less the \$16,075 that is in the lower bracket). Multiply \$16,075 by 12% to get \$1,929. Multiply \$3,925 by 22% to get \$863.50. The sum of these two amounts is \$2,792.50. This is the estimated tax on your payment. This amount corresponds to 14% of the \$20,000 payment (\$2,792.50 divided by \$20,000). Enter “14” 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.