

Visit our website at www.heartlandfunds.com

# **IRA DISTRIBUTION FORM**

REGULAR MAIL TO: Heartland Funds PO. Box 219942, Kansas City, MO 64121-9942 FOR ASSISTANCE AND OVERNIGHT MAILING, PLEASE CALL A SHAREHOLDER SERVICES REPRESENTATIVE AT 1-800-432-7856.

	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1					
1	ACCOUNT INFORMATION					
NAMI	E OF ACCOUNT OWNER TELEPHONE NUMBER					
ADDF	press					
ADDI						
SOCI	AL SECURITY NUMBER FUND NAME/ACCOUNT NUMBER					
E-MA	IL ADDRESS (OPTIONAL) *By providing your email address you consent to receive periodic e-mail communication from Heartland Funds.					
2	DISTRIBUTION REASON (PLEASE SELECT ONE)					
Plea	ase consult with your tax advisor for assistance in determining which Distribution Reason applies.					
	Regular Distribution. Participant is over age 59½ and no other reason applies.					
	Early (Premature) Distribution – IRS Penalty Applies. Generally, if you are under age 59½, you must pay a 10% additional tax on the distribution of any assets (money or other property) from your traditional IRA.					
	Early (Premature) Distribution – IRS Penalty Exception. Exceptions may apply if distribution is made for expenses related to first home purchase, medical, health insurance premiums, higher education, among others. Please see IRS Publication 590 for a complete list and explanation of exceptions.					
	Distributions Under Section 72(t) of Internal Revenue Code. Substantially Equal Periodic Payments.					
	Removal of Excess Contribution. Tax year the excess was made: Excess contribution tax and penalty may apply.					
	Disability. Permanent or long-term.					
	<b>Death of Account Holder.</b> Please attach a certified copy of the Participant's death certificate. Other documentation may be required Please contact a Heartland representative for assistance.					
	Divorce (Qualified Domestic Relations Order). Please attach a certified copy of the divorce decree.					
	Required Minimum Distribution (For automatic withdrawals, distributions may be recalculated annually. Complete Section 3.):  Please redeem \$ for my Required Minimum Distribution. I am at least 70 ½ years old.					
	Please calculate my Required Minimum Distribution according to the IRS distribution regulations and redeem that amount immediately Is your spouse more than 10 years younger than you, and is he or she your sole beneficiary for the entire calendar year?  Yes. If yes, the joint life expectancy of you and your spouse, recalculated, is used. Spouse age:  No. If no, the uniform lifetime table is used to determine the required minimum distribution.					
	Convert my Traditional IRA to a Roth IRA. Convert All Shares Dollar Amount \$ Percentage %  To: A new Roth IRA (Complete and enclose an IRA new account form)  My existing Roth IRA* – Fund Name: Account Number:					
	Recharacterize my Contribution. Recharacterize my contribution of \$ for tax year from my account					
	To: A new Traditional or Roth IRA (Complete and enclose an IRA Application) My existing Traditional or Roth IRA – Fund Name: Account Number:					
	Recharacterize my Roth IRA Conversion. Recharacterize my conversion for tax year					
	To: A new Traditional IRA (Complete and enclose an IRA new account form) My existing Traditional IRA – Fund Name: Account Number:					
	All shares will be recharacterized unless you enter a specific dollar amount \$					

3	METHOD OF DISTRIBUTION (PLEASE CHECK ONE)
	Single Distribution. Please Distribute \$ or shares from the account indicated in Section 1.
	Complete Distribution. Please Liquidate all shares in the account indicated in Section 1. The annual IRA maintenance fee of \$15.00 may be charged at the time of the distribution.
	Systematic Withdrawals - (Please complete sections A and B below.)
	A. Amount of Systematic Withdrawal – The amount indicated below will be distributed for each scheduled withdrawal.  \$ shares% Please calculate my Required Minimum Distribution according to the IRS distribution regulations and begin systematic withdrawals.
	B. Frequency of Systematic Withdrawal - If no option is selected, distributions will be scheduled quarterly on the 5th. (Medallion
	signature guarantee will be required if the redemption proceeds will exceed \$50,000.)
	Monthly Quarterly Semi-Annual Annual Date to begin distributions: (mm/yy)
4	METHOD OF PAYMENT (PLEASE CHECK ONE)
	Mail check to the address of record.
	Deposit Directly into my Heartland Funds non-IRA account # OR open a new non-IRA account for distributions. (New Account Application must be attached.)
	Electronic Funds Transfer directly to my bank account indicated in section 5. ( <b>Medallion signature guarantee</b> is required for this option if banking instructions are not previously established on the account.)
	Federal Wire directly to my bank account indicated in section 5. A wire fee may apply. (Medallion signature guarantee is required for
	this option if banking instructions are not previously established on the account.)
	Alternative Payee and/or Address as indicated below. ( <b>Medallion signature guarantee</b> is required for this option.)
5	BANK AUTHORIZATION (PLEASE ATTACH A VOIDED CHECK)
Rea	uired for direct deposit into bank.
-	must receive this form at least 15 business days prior to your initial transaction.
the instinent emporate not current if tra	selecting the electronic transfer options, I authorize the Heartland Funds to initiate credit and debit entries to my account(s) at financial institution designated below through the Automated Clearing House (ACH) network, subject to the rules of the financial tution, ACH, and the Funds. The Heartland Funds, their transfer agent, and any of their respective affiliates, officers, directors, cloyees or agents (collectively "Heartland") will not be responsible for banking system delays beyond their control. Heartland will be liable for acting upon instructions believed genuine and acted upon in accordance with the procedures described in the Funds' ent prospectus or the rules of ACH. I understand that the electronic transfer options may be terminated by Heartland at any time ansfers fail for any reason beyond the control of Heartland. This authorization will remain in effect until I notify Heartland of its nination and Heartland has a reasonable time to act upon that termination notice.
BANK	NAME NAME(S) ON BANK ACCOUNT
BANK	ADDRESS BANK ACCOUNT NUMBER CHECKING SAVINGS

SIGNATURE OF BANK ACCOUNT OWNER (IF DIFFERENT THAN SHAREHOLDER)

BANK ROUTING NUMBER OR ABA NUMBER

## WITHHOLDING ELECTION (Form W-4R/OMB 1545-0074)

Please read the WITHHOLDING INSTRUCTIONS before making your selection below. This information is also available on the IRS website. To ensure you have the most recent version, please go to www.irs.gov/FormW4R.

## **Federal Withholding**

6

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% below. Generally, you can't choose less than 10% for payments
to be delivered outside the United States and its possessions. (See the Withholding Instructions for more information.)

Complete this section if you would like a rate of withholding that is different from the default withholding rate. See the instruction and the Marginal Rate Tables that follow for additional information. Enter the rate as a whole number (no decimals).
Withhold%

**State tax withholding is mandatory for the following states when Federal tax is withheld:** AR, CA, DE, IA, KS, MA, MD, ME, NC, OK, OR, VT. NE and VA withholding is required based on the type of retirement account. State tax will be applied at the current rate for the state in which you reside and is subject to change.

# 7 SIGNATURES

I certify that I am the proper party to receive payment(s) from this IRA and that all information provided by me is true and accurate. I have read and understand the IRS rules and conditions applicable to withdrawals and agree to abide by those rules and conditions. No tax advice has been given to me by the Trustee or Custodian. All decisions regarding this withdrawal are my own. I expressly assume the responsibility for and adverse consequences which may arise from this withdrawal and I agree that the Trustee or Custodian shall in no way be held responsible.

SIGNATURE OF ACCOUNT OWNER	DATE

MEDALLION SIGNATURE GUARANTEE (If required)

A Medallion Signature guarantee may be obtained from a commercial bank, savings and loan association, credit union, or broker-dealer. A notary public is not an acceptable guarantor.

Page 3 of 6 050423

The term IRA will be used below to mean Traditional IRA, SIMPLE IRA, and Roth IRA unless otherwise specified.

#### **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 from.** 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 below 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 below for more information on how to use this table.

Single or Married	Filing Separately	Married Filing Jointly or Qualifying Widow(er)		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%
591975*	37%	721,450	37%	598,900	37%

## For Privacy Act and Paperwork Reduction Act Notice, see below.

**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 for your withholding election. 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-" for your withholding election. 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% for your withholding election. 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-" for your withholding election. See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

#### **SPECIFIC INSTRUCTIONS**

#### **Estate**

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

### Withholding Election

**More withholding.** If you want more than the default rate withheld from your payment, you may enter a higher rate for your withholding election.

**Less withholding (nonperiodic payments only).** If permitted, you may enter a lower rate for your withholding election (including "-0-") if you want less than the 10% default rate withheld from your payment. If you have already paid, or plan to pay, your tax on this payment through other withholding or estimated tax payments, you may want to enter "-0-".

**Suggestion for determining withholding.** Consider using the Marginal Rate Tables above to help you select the appropriate withholding rate for this payment or distribution. The tables are most accurate if the appropriate amount of tax on all other sources of income, deductions, and credits has been paid through other withholding or estimated tax payments. If the appropriate amount of tax on those sources of income has not been paid through other withholding or estimated tax payments, you can pay that tax through withholding on this payment by entering a rate that is greater than the rate in the Marginal Rate Tables.

The marginal tax rate is the rate of tax on each additional dollar of income you receive above a particular amount of income. You can use the table for your filing status as a guide to find a rate of withholding for amounts above the total income level in the table.

To determine the appropriate rate of withholding from the table, do the following. Step 1: Find the rate that corresponds with your total income not including the payment. Step 2: Add your total income and the taxable amount of the payment and find the corresponding rate.

If these two rates are the same, enter that rate for your withholding election. (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 for your withholding election. (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 for your withholding election.

**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" for your withholding election.

**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" for your withholding election.

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.