



IRA DISTRIBUTION REQUEST FORM

FOR ALL IRA TYPES INCLUDING TRADITIONAL, ROTH, AND SEP IRAS

Complete and return this form to: Northern Funds Center, P.O. Box 75986, Chicago, IL 60675-5986 or fax this form to: **312-557-0411**.

Questions? Call the Northern Funds Center at **800-595-9111** weekdays from 7:00 a.m. to 5:00 p.m. Central time.

Please print all information.

1 PROVIDE YOUR INVESTOR INFORMATION

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER (DAYTIME) _____ TELEPHONE NUMBER (EVENING) _____

SOCIAL SECURITY NUMBER _____ DATE OF BIRTH _____

2 INDICATE YOUR REASON FOR DISTRIBUTION

TYPE OF IRA

- Traditional Roth SEP

CHOOSE ONE:

Normal – Age 59½ or older

Premature Distribution – Under Age 59½

If you are eligible to take a premature distribution without penalty, please consult IRS Publication 590-B. Available at www.irs.gov, this provides additional eligibility requirements for premature distributions.

Required Minimum Distribution – Age 72 or older

Check here if spouse is more than 10 years younger
Spouse's Date of Birth _____

Charitable Contribution – Age 70½ or older

Excess Contribution Distribution

- Current Year
 Prior Year

Divorce

Please include:

- A copy of the divorce decree
- Owner's signature Medallion guaranteed (See Step 7.)
- A completed Traditional or Roth IRA application (available on northerntrust.com/funds).

Death

Please include:

- A certified copy of the owner's death certificate
- Have your signature Medallion guaranteed (See Step 7.)
- A completed Traditional or Roth IRA application (available on northerntrust.com/funds).

Date(s) Excess Contribution was Made

3 SELECT YOUR DISTRIBUTION OPTION

A. ONE-TIME DISTRIBUTION

- I want the amount indicated below withdrawn based on instructions provided in Step 4.
- I want to take a Required Minimum Distribution (RMD).
 - Please calculate my RMD for me and distribute this amount.
 - I have calculated my RMD which is the amount indicated below. Distribute this amount.

ACCOUNT NUMBER	AMOUNT
	Select One: <input type="checkbox"/> Dollars <input type="checkbox"/> Shares <input type="checkbox"/> Percentage
_____	_____
_____	_____
_____	_____
_____	_____

B. PERIODIC DISTRIBUTIONS

- I want to establish an automatic distribution plan based on information below.
- I want to establish an automatic distribution plan for a Required Minimum Distribution (RMD).
 - Please calculate my RMD for me and distribute this amount. Recalculate annually until otherwise notified.
 - I have calculated my RMD which is the amount indicated below. Distribute this amount.

ACCOUNT NUMBER	AMOUNT	FREQUENCY	START DATE
	Select One: <input type="checkbox"/> Dollars <input type="checkbox"/> Shares	Select One: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually	(Please choose a start date no later than the 29th; if no date is selected, the 1st will be used.)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

C. EXCESS CONTRIBUTION

- Please redeem my excess contribution of \$ _____ from account number _____
- Please calculate and withdraw any earnings in addition to the excess contribution amount.
- The excess contribution amount I have indicated above includes earnings that I have calculated.

Note: If neither box is checked, Northern Funds will calculate any earnings and withdraw them in addition to the excess contribution amount.

4 SELECT YOUR METHOD OF PAYMENT

A. BY CHECK:

Payable to me and sent to the address of record.

If you wish to have your distribution check made payable to someone other than yourself or mailed somewhere other than the address of record, complete the following. (Medallion Signature Guarantee may be required. See Step 7.)

NAME _____

ADDRESS _____

CITY _____

STATE _____

ZIP _____

If recipient is a public charity, check here

B. BY TRANSFER TO MY BANK AS FOLLOWS: (Medallion Signature Guarantee may be required. See Step 7.)

NAME ON BANK ACCOUNT _____

BANK NAME _____

BANK ADDRESS _____

ACCOUNT NUMBER _____

BANK ROUTING NUMBER _____

C. BY TRANSFER TO MY NORTHERN FUNDS ACCOUNT AS FOLLOWS: (Medallion Signature Guarantee may be required. See Step 7.)

My existing non-IRA Northern account.

FUND NAME _____

ACCOUNT NUMBER _____

A new Northern Funds account. Please attach a new account application (available on northerntrust.com/funds).

5 INDICATE YOUR TAX WITHHOLDING ELECTION

Refer to IRS Form W-4R, including its instructions and marginal rate tables, prior to making your federal income tax withholding election. Form W-4R is also provided as the final pages of this IRA Distribution Request form. **Please make your withholding election below rather than on Form W-4R.**

Distributions from your IRA, other than a Roth IRA, are subject to the default federal income tax withholding rate of 10% unless you provide a different election below. You may choose not to have federal income tax withheld by entering 0% below. If no election is made, if your election is invalid or incomplete, or if your distribution is delivered outside the United States, then your distribution will be subject to federal income tax withholding at a rate of 10%. The election below applies to the one-time or systematic distribution on this form only. You may change or revoke your election at any time.

If you choose not to have withholding applied to your distribution, or if you do not have enough withheld, 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.

Federal Income Tax Withholding Election (Form W-4R)

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 the line below. Generally you can't choose less than 10% for payments to be delivered outside the United States and its possessions. See IRS Form W-4R for more information.

Complete this line if you would like a rate of withholding that is different from the default withholding rate. See the instructions and Marginal Rate Tables on Form W-4R for additional information. Enter the rate as whole number (no decimals).

Withholding Election _____ % (Enter 0 if you do not want federal income tax withheld)

6 SIGN YOUR NAME

I certify that I am the proper party to receive payments from this IRA and that all information provided by me is true and accurate. By making a withholding election on this form, I certify that I have received and read the current IRS Form W-4R including its instructions and marginal rate tables. No tax advice has been given to me by the Custodian. All decisions regarding this withdrawal are my own. I expressly assume responsibility for any adverse consequences which may arise from this withdrawal and I agree that the Custodian shall in no way be responsible.

YOUR SIGNATURE

PRINTED NAME

DATE

7 MEDALLION SIGNATURE GUARANTEE

You can obtain a Medallion Signature Guarantee from a commercial bank or trust company, a member firm of a national stock exchange, or from an eligible guarantor institution as defined by the Securities and Exchange Commission.

MEDALLION SIGNATURE GUARANTEE IS REQUIRED IF:

- Payment is equal to or greater than \$100,000
- Electronic payment is to a bank account not on file
- The payment recipient is someone other than the account owner
- Payment is being sent to an address that is different from the address of record
- Funds are being transferred to another Northern Funds account that is not registered to the account owner

SIGNATURE GUARANTEED BY:

AFFIX SIGNATURE GUARANTEED STAMP

NAME OF BANK OR FIRM

SIGNATURE OF OFFICER AND TITLE

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 possessions.

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 2022, 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 \$54,725 but less than \$102,025, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$80,000, is greater than \$54,725 but less than \$102,025, 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 \$23,225 but less than \$54,725, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$62,500, is greater than \$54,725 but less than \$102,025, the corresponding rate is 22%. The two rates differ. \$12,225 of the \$20,000 payment is in the lower bracket (\$54,725 less your total income of \$42,500 without the payment), and \$7,775 is in the higher bracket (\$20,000 less the \$12,225 that is in the lower bracket). Multiply \$12,225 by 12% to get \$1,467. Multiply \$7,775 by 22% to get \$1,710.50. The sum of these two amounts is \$3,177.50. This is the estimated tax on your payment. This amount corresponds to 15.9% of the \$20,000 payment (\$3,177.50 divided by \$20,000). Rounding up to the next whole number, enter “16” 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 possessions 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.

FORM AND MAKE YOUR ELECTION
DISTRIBUTION REQUEST FORM