

J.P. Morgan Securities LLC
Member FINRA and SIPC

You can submit this form and any attachments by:

Secure Message

For instructions on how to submit this request by secure message, visit www.chase.com/brokerageforms.

Fax

(866) 786-4788

Mail

J.P. Morgan Securities LLC
Attn: Retirement - WM
Mail Code: IL1-0291
10 S. Dearborn St.
Chicago, IL 60603

If you have questions, please send us a secure message on chase.com.

Use this form to

- Authorize a one-time withdrawal from your J.P. Morgan Securities LLC (**JPMS**) Roth or Traditional Individual Retirement Account (**IRA**) (including SEP and Beneficiary IRA).
- Authorize a one-time direct rollover from an IRA to an employer-sponsored plan.
- Authorize the return of an excess IRA contribution.

What you need to know

- Before submitting this form, please ensure that:
 - There are sufficient funds in your account to cover the distribution amount and any fees. Your request will not be processed if there are insufficient funds to cover it.
 - Your current address is on file because we will apply tax withholding requirements for the state of residence listed in our records.
- Don't use this form to make a distribution to a Chase checking or savings account unless this request is for a Return of Excess Contribution. A distribution to a Chase account (except for Return of Excess Contribution) **MUST** be completed online on chase.com using the Pay & transfer tab.
- You can roll over only one IRA distribution to another IRA in any 12-month period, regardless of how many IRAs you own or distributions you take (i.e., one 60-day IRA-to-IRA rollover in a 12-month period).
- Using a different form, you can make unlimited trustee-to-trustee transfers between IRAs of the same type, conversions between Traditional and Roth IRAs, and rollovers from a qualified retirement plan to an IRA.
- This form may not be used for a recharacterization, Roth conversion, qualified charitable distribution or trustee-to-trustee transfer.
- This form must be notarized only if you are submitting this form by fax or mail, and you have selected an option in Section 2 or 4 that indicates notarization is required. If you are submitting the form by secure message, notarization is not required.
- You must provide your Social Security number **and** federal tax withholding election so we can process your distribution. Forms without this information will not be processed.
- Refer to IRS Publications 590-B and 505 at www.irs.gov or consult your tax professional to learn more about IRA distributions, federal income tax withholding, and estimated tax requirements and penalties.
- For best results, complete this form using Adobe Reader. You will need to print a copy for your signature (and notarization, if necessary).

1. Tell Us About Your IRA

Your Name

Both your Social Security Number and Account Number are required.

Social Security Number (IRS Form W-4R Line 1b)

Your Account Number

For a Traditional or SEP IRA: Select the option below and proceed to Section 2.

This is a **Traditional or SEP IRA**.

For a Roth IRA: For a distribution to be "qualified," as defined by the Internal Revenue Code, a client must meet the 5-year holding period requirement. You are responsible for tracking the 5-year holding period. If you indicate below that you have met the Roth IRA 5-year holding period requirement, JPMS will review its records to confirm that the requirement is satisfied. If not, you will need to complete a new *IRA Distribution Request* form.

This is a **Roth IRA** and I have met the 5-year holding period requirement by holding this Roth IRA at JPMS for 5 years or more.

This is a **Roth IRA** and I have met the 5-year holding period requirement by holding a Roth IRA at JPMS and another firm for 5 years or more, and will provide account statements from my prior firm that prove this to be the case.

This is a **Roth IRA**, but I have not met the 5-year holding period requirement or I don't know if I have met the requirement.

Select only one.

If you're not sure what type of IRA you have, you can review the name of the account on the investment statement. Select the appropriate option under "Traditional or SEP IRA" or "Roth IRA."

Your Name

Your Account Number

2. What Type of Distribution Are You Taking?

Select only one.

Refer to Section 72(t)(2) of the Internal Revenue Code and consult your tax professional to find out if you qualify for an early distribution exception.

- Normal Distribution** – I'm age 59½ or older.
- Early Distribution: No Exceptions** – I'm under the age of 59½ with no known exceptions.
- Early Distribution: Exception for First-Time Home Purchase** (cash distribution only) – I'm under the age of 59½; I understand there is a lifetime limit of \$10,000.
- Early Distribution: Exception for Health Insurance Premiums** (cash distribution only) – I'm under the age of 59½; I have received unemployment compensation for 12 weeks.
- Early Distribution: Exception for Qualified Higher Education Expenses** (cash distribution only) – I'm under the age of 59½.
- Early Distribution: Exception for Qualified Birth or Adoption Distribution** (cash distribution only) – I'm under the age of 59½; I understand there is a limit of \$5,000 per child.
- Early Distribution: Exception for Medical Expenses in Excess of 10% of My Adjusted Gross Income** (cash distribution only) – I'm under the age of 59½.
- Disability Distribution** – I am considered disabled as defined in Section 72(m)(7) of the Internal Revenue Code.
- Distribution to Beneficiary, Executor, Trustee or Representative from previously established Beneficiary IRA.**
- Direct Rollover from Traditional IRA (including SEP IRA) to an Employer-Sponsored Plan:** Please submit a signed letter of acceptance from the receiving employer-sponsored plan administrator with this form. Direct rollovers will be made payable to the receiving employer-sponsored plan. If this form is submitted by fax or mail, it must be notarized. It does not need to be notarized if this form is submitted by secure message.
- Return of Excess Contribution from Traditional or Roth IRA** (cash distribution only). Select this option to remove an invalid, ineligible or over contribution. Note: If this is selected, you will not be able to make additional contributions for this tax year into any of your IRAs at JPMS.

Consult your tax professional regarding the tax treatment and use of a returned excess contribution.

1. On what date did you make the excess contribution?

 (month/day/year)

2. For what tax year did you make the excess contribution?

 (year)

3. How much was the original excess contribution?

 (dollar amount)

4. Are you requesting the return of this excess contribution after your tax filing deadline, including the available 6-month IRS extension, for the tax year you entered in question 2? (If you select 'Yes,' you can withdraw the excess contribution without taking into account any gains or losses. If you select 'No,' the amount returned will include any net income (gain or loss) attributable to the excess contribution.)

- Yes (go to question 6)
- No

5. How much was the net income (gain or loss) attributable to the excess contribution? (This may be a negative number. You do not need to calculate this amount if you answered 'Yes' to question 4.)

 (dollar amount)

6. Amount that we will return to you:

 (dollar amount)

Treasury regulations require a specific calculation to be used to determine whether there is a gain or a loss on your excess contribution when removing it on or before your tax filing deadline. If there is a loss, the amount will be deducted from the excess contribution amount to be withdrawn.

Use IRS Publication 590-A worksheets (or contact your tax professional) when calculating your gain or loss amount.

 Your Name

 Your Account Number

3. What Assets Would You Like to Distribute?

Important information about your distribution

- **For cash distributions**, ensure there is enough cash in your account to cover the amount of the distribution before submitting this request. **The request will not be processed if there are insufficient funds to cover the request.**
- **If you are closing this account, any residual credits will be paid out according to your instructions on this form.**
- **For securities distributions**, make sure you have enough cash to cover any federal and state tax withholding amounts or the request cannot be processed. The value of your securities may vary due to market fluctuations and will be determined at the close of business on the transaction date. As a result, specific dollar withholding amounts may be a lower or higher percentage of the distribution than expected.
- **Custodial fees and termination fees** may be charged if your distribution depletes your account. Be sure there is enough cash available to cover these fees after the distribution. Fees can be found at www.chase.com/online-investing-fees.

Select only one.

Only complete the cash and securities table if you select the second option. If you select the first option, proceed to Section 4.

- Distribute all of my assets and close my account.** If you would like an all-cash distribution, ensure that all assets have been liquidated. *(Please proceed to Section 4 – do not complete the table below.)*
- Distribute only the cash and/or securities listed below.** For securities, only whole shares may be distributed unless you note that you want "All" shares distributed, which would include fractional shares.

Enter Dollar Amount or "All"

CASH	
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If you need more room, attach an additional sheet to this form that includes your name, account number and security descriptions – sign and date the additional sheet.

	Security Description	Symbol/CUSIP	Enter Number of Shares or "All"
SECURITIES			

Your Name

Your Account Number

Fill out only one section (A, B, C or D).

4. How Would You Like to Receive the Distribution?

A. DEPOSIT DIRECTLY INTO MY BANK/FINANCIAL INSTITUTION ACCOUNT

Here are some important things to know about distribution via direct deposit:

- Don't use this form to make a distribution to a Chase checking or savings account unless this request is for a Return of Excess Contribution. A distribution to a Chase account (except for Return of Excess Contribution) MUST be completed online on chase.com using the Pay & transfer tab.
- If you are requesting a distribution to a non-Chase bank/financial institution account, you must first verify that your non-Chase account is linked to your JPMS IRA. If the non-Chase account is **not** linked, we will be unable to process your distribution request. To view or edit your linked non-Chase accounts, go to chase.com → Pay & transfer → Transfer money → External accounts.
- When you link your JPMS IRA to a non-Chase bank/financial institution account, you will notice a \$1 charge and a \$1 credit to your bank/financial institution account. We do this to validate the account before linking it to your JPMS IRA.

- Deposit directly into my bank/financial institution account using the instructions below.

Bank/Financial Institution Name

Account Type (select one)

Checking

Savings

Bank/Financial Institution Account Number

Routing Number

This must be a non-Chase bank/financial institution account, UNLESS you selected 'Return of Excess Contribution' in Section 2. A 'Return of Excess Contribution' distribution may be deposited into a Chase or non-Chase account.

There may be additional fees associated with overnight delivery. Overnight delivery fees can be found at www.chase.com/online-investing-fees.

This form must be notarized if you are requesting a check be sent to an alternative address or to a third party, and you are submitting this form by fax or mail. This form does not need to be notarized if submitted by secure message.

B. SEND A CHECK

- Optional overnight delivery:** Please send this check overnight using the delivery instructions below. Overnight delivery requests will expedite a check's receipt, but only after the transaction itself is processed. Please note that overnight delivery to a PO Box is unavailable.

- Send a check, made payable to me, to my address of record.
- Send a check, made payable to me, to the alternative address below.

Mailing Address

City

State

ZIP Code

- Send a check, made payable to a third party, to the address below.

Payee Name

Mailing Address

City

State

ZIP Code

Your Name

Your Account Number

This form must be notarized if the account number provided belongs to someone other than you (a third party) and you are submitting this form by fax or mail. This form does not need to be notarized if submitted by secure message.

This form must be notarized for all wire transfers if you are submitting this form by fax or mail. This form does not need to be notarized if submitted by secure message.

We may call you at the number on file for your account to confirm the wire before it is processed.

Please ensure you have enough cash available in your account to cover the wire fee. Please refer to the Fee Schedule at www.chase.com/online-investing-fees for Wire Transfer fees.

C. DISTRIBUTE MY ASSETS TO A JPMS NON-RETIREMENT BROKERAGE ACCOUNT

- Distribute the assets I listed in Section 3 to my existing JPMS non-retirement brokerage account.
- Distribute the assets I listed in Section 3 to an existing JPMS non-retirement brokerage account of a third party.

Account Number

Account Number

D. DISTRIBUTE AS A WIRE TRANSFER

- Send a wire to me or a third party using the wire instructions below.

Receiving Account Information

Bank/Financial Institution Name

Wire Routing Number

Bank/Financial Institution Account Number

Bank/Financial Institution Account Holder Name

Please confirm the Wire Routing Number with your bank/financial institution. A financial institution's wire and checking/savings routing numbers are not always the same.

Intermediary Bank/Financial Institution Details and Special Instructions *(complete if applicable)*

Not all banks and financial institutions can receive wires directly through the Fed Funds wire system. In these situations, wires are normally routed through an intermediary bank or financial institution that then credits an account established for the receiving bank or financial institution. If this applies, complete Section I below. In some cases, the receiving bank or financial institution may need additional information in order to credit those funds to the right party. Typical examples include situations where the account number belongs to another financial firm or pension plan. If this applies, complete Section II below.

I. Intermediary Bank/Financial Institution Details

Intermediary Bank/Financial Institution Name

Intermediary Bank/Financial Institution Account Number

II. Special Instructions

Account Number

Final Recipient Name

Reference Details (optional)

Instruction Description

Your Name

Your Account Number

5. Tax Withholding Elections

- **U.S. Person (U.S. Citizen or Resident Alien) or Beneficiary that is a U.S. Estate, Trust or Charity**
 - Distributions from an IRA are subject to federal and, in some cases, state income tax withholding.
 - If applicable, state income tax must be withheld according to the requirements for your state of residence.
 - Several states require withholding from your distribution if you are subject to federal income tax withholding and may require that a separate election form be completed.
 - Consult your tax professional for additional information regarding state income tax withholding.
- **U.S. Person residing abroad**
 - If you are a U.S. person residing abroad, you are not permitted to opt out of federal income tax withholding. We will withhold 10% unless a greater amount is elected.
 - Consult your tax professional for additional information regarding state income tax withholding.
- **Withholding for Nonresident Alien or a Beneficiary that is a Foreign Estate, Trust or Charity**
 - If you are a nonresident alien, this form must be accompanied by a properly completed IRS Form W-8BEN.
 - We will generally withhold tax at a rate of 30%.
 - If you are a foreign simple or grantor trust, you must provide Form W-8IMY along with any necessary supporting documentation required by the Form W-8IMY instructions.

The following General Instructions, Marginal Rate Tables and Specific Instructions are mandated and provided by the IRS. They may help you select the appropriate withholding rate for this distribution. You must complete the federal and state income tax election sections that follow these instructions. Contact your tax professional for any questions. Note: References to specific pages and line numbers align to the IRS Form W-4R that can be found at www.irs.gov/FormW4R.

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.

Your Name

Your Account Number

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.

Your Name

Your Account Number

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.

Your Name

Your Account Number

You must make an election for both federal and state tax withholding.

5A. FEDERAL WITHHOLDING ELECTION (DO NOT LEAVE BLANK)

You may elect not to have federal income tax withholding apply to your distribution. Your election will remain in effect until you revoke it in writing, which can be done at any time. There are penalties for not paying enough federal income taxes during the year, either through withholding on distributions or by making estimated tax payments.

You **must** elect to have either:

- **No federal income tax withheld** from your distribution by entering "0" in the election box, **OR**
- **Federal income tax withheld** by entering a whole percent from **1 to 100** in the election box.

The following section is mandated and provided by the IRS. (Reference to page 2 and Marginal Rate Tables align to the IRS Form W-4R that can be found at www.irs.gov/FormW4R.)



Important: DO NOT LEAVE BLANK.

Enter 0 to waive federal tax, or a whole percent from 1 to 100% as your federal withholding election. If you would like the default withholding rate, enter either 10% or 20%, as applicable.

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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5B. STATE WITHHOLDING ELECTION

Certain states require withholding of a specific minimum percentage of your distribution or federal tax withholding amount or an amount in whole dollars. By signing this form, you authorize JPMS to adjust the withholding amount or percent requested to meet those requirements.

I elect to have **no** state income tax withheld from my distribution, or I certify that I am not subject to state tax withholding.

I elect to have the **following percentage** withheld from my distribution.

(percentage)

I elect to have the **following dollar amount** withheld from my distribution.

(in whole dollars)

Your Name

Your Account Number

6. Authorization

By signing below, I authorize JPMS to make this one-time distribution from my JPMS IRA as indicated on this form.

I acknowledge and understand:

- There may be fees associated with the liquidation of certain investments and/or the distribution.
- I am responsible for ensuring that there are sufficient funds available in my JPMS IRA for this distribution.
- This distribution may have important tax consequences. This distribution and any tax withholding, if applicable, will be reported to the IRS on Form 1099-R or Form 1042-S.
- I should consult a legal, accounting or tax professional with any questions.
- I assume full responsibility for the tax consequences of this election and the resulting distribution.
- If indicated on this form, and subject to the terms of the *Brokerage Account Agreement* governing my JPMS IRA, I authorize JPMS to direct the distribution of money electronically according to the instructions outlined on this form between the JPMS IRA and the bank/financial institution account designated on this form, and authorize that bank/financial institution to credit and/or debit the same to the bank/financial institution account. JPMS will undertake to make transfers as directed, but is not responsible for damages of any nature resulting from delays, failures, omissions or errors relating to such transfers. I understand that, in rare instances, erroneous credits or debits may be made to the bank/financial institution account. If such is the case, I authorize JPMS to reverse such errors by debiting or crediting the bank/financial institution account and crediting or debiting the JPMS IRA as is appropriate.
- The origination of Automated Clearing House (**ACH**) transactions to or from my account(s) must comply with the provisions of U.S. law.
- This authorization is to remain in effect until JPMS has written received notification from me (provided to J.P. Morgan Securities LLC, Mail Code: IL1-0291, 10 S. Dearborn St., Chicago, IL 60603) of its termination in such time and manner as to afford JPMS and the bank/financial institution a reasonable opportunity on which to act.
- I agree to indemnify and hold JPMS, its successors, affiliates, assigns, officers, directors, agents and employees (the **Indemnified Parties**) harmless from, and to pay the Indemnified Parties promptly on demand, any and all losses, liabilities, damages, claims, costs or expenses (including attorney fees and expenses) incurred by the Indemnified Parties in connection with their reliance on this distribution request and authorization(s), including in the event that I fail to meet applicable requirements regarding the requested distribution from my IRA. These indemnification provisions are in addition to (and in no way limit or restrict) any rights that any of the Indemnified Parties may have under any other agreement(s) between myself and any of the Indemnified Parties or under any federal or state statutes, laws, rules or regulations. This indemnity shall survive termination of any authorization with respect to transactions entered into during the term of the authorization.

I certify that:

- No tax or legal advice has been given to me by JPMS and all decisions regarding this election are my own.
- Under penalties of perjury, I am a U.S. person (including a U.S. resident alien).
- For a rollover to an employer-sponsored plan, these funds are eligible for rollover to the plan as I have met or will meet all applicable requirements, including that I have retained any Required Minimum Distribution (**RMD**) and I am not rolling over any funds I am required to withdraw.

Your Signature

Date (month/day/year)

Your Name

Your Account Number

7. Identity Verification

If you are submitting this form by secure message, notarization is never required.

If you are submitting this form by fax or mail, notarization is required if you have selected an option in Section 2 or 4 that indicates notarization is required. Please have a notary public complete the box below.

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy or validity of that document.

STATE OF _____) COUNTY OF _____) Subscribed, sworn to and acknowledged before me by _____ Name of Document Signer (above) this _____ day of _____ , _____ Day Month Year _____ Signature of Notary Public) SS: <div style="border: 1px solid black; padding: 10px; text-align: center;">Place Stamp Here</div> My commission expires _____
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Your Name

Your Account Number