



FRANKLIN TEMPLETON/WESTERN ASSET FUNDS - SIMPLE INDIVIDUAL RETIREMENT ACCOUNT (IRA) DISTRIBUTION REQUEST FORM

This form is not intended for required minimum distributions, trustee-to-trustee transfers, or conversion requests. For trustee-to-trustee transfers, please complete the appropriate receiving custodian's trustee-to-trustee transfer form. This form is not intended to facilitate a beneficiary/inherited IRA transfer due to death. For revocations, refer to the SIMPLE Individual Retirement Account (IRA) Disclosure Statement for instructions and information regarding your revocation rights. All required documentation must be received in good order before the distribution request can be honored. All legal documents must be certified and a Medallion Signature Guarantee may be required. Please see the Participant Authorization Section for an explanation of the Medallion Signature Guarantee.

I. PARTICIPANT INFORMATION - Please print

Name:	Cell Phone: ()
Address:	Alternate Telephone: ()
City:	State: Zip Code:
Social Security Number:	Date of Birth:
Account Number:	SIMPLE IRA – Year First Established*:

Complete the following if you are a beneficiary requesting a full liquidation of the inherited proceeds.

Beneficiary Name:	Cell Phone: ()	
Address:	Alternate Telephone: ()	
City:	State: Zip Code:	
Social Security Number:	Date of Birth:	

* A distribution received before you attain age 59½ is considered a premature distribution and is subject to a penalty tax equal to 10% of the distribution unless an exception applies (see "Early Distributions from a SIMPLE IRA" in your SIMPLE IRA Disclosure Statement). If the premature distribution is made prior to satisfying the required two-year holding period (2 years from the date on which you first participated in a SIMPLE IRA maintained by your employer) and no exception applies, then the penalty tax is increased to 25%.

II. REASON FOR DISTRIBUTION

The distribution is being made for the following reason (check one):

- 1. Normal distribution You are age 59½ or older.
- 2. Early (premature) distribution You are under age 59%, including distributions due to medical expenses, health insurance premiums, higher education expenses, first time homebuyer expenses, or other reasons.
- 3. Substantially equal periodic payments within the meaning of section 72(t) of the Internal Revenue Code. Complete Section IV Part B and review B Part II
- 4. Death/Beneficiary liquidation The Date of Death of the Owner of the account MM/DD/YYYY is required ______, contact Shareholder Services regarding additional document requirements.
- 5. Permanent disability You certify that you are disabled within the meaning of section 72(m)(7) of the Internal Revenue Code.*
- 6. Transfer incident due to divorce or legal separation Contact Shareholder Services regarding additional document requirements.
- 7. Removal of excess You must complete Section III (Excess Contribution Election) in its entirety.
- 8. Direct rollover to a Qualified Plan, 401(k), TSP or 403(b) You are certifying that the receiving custodian will accept the IRA assets issued and that you have satisfied the required two-year holding period.
- 9. Qualified Reservist Distribution
- 10. Qualified Hurricane Distribution
- 11. Qualified Birth or Adoption Distribution as defined in section 72(t)(2) of the Internal Revenue Code

* For purposes of section 72(m)(7), an individual shall be considered to be disabled if he is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or to be of long-continued and indefinite duration.

III. EXCESS CONTRIBUTION ELECTION

Instructions for the Participant: You must indicate how the return of excess should be distributed in **Section IV - DISTRIBUTION AMOUNT (subsection A)**. A check for the proceeds will be mailed to your address of record unless the amounts are attributable to employer contributions that are being returned to the employer with your authorization. Amounts returned as excess contributions are not eligible for rollover.

Important: Please consult with your employer to discuss the appropriate steps to correct excess contributions. Amounts deferred to your SIMPLE IRA in excess of the allowable limit may be subject to a non-deductible excise tax of 6% for each year until the excess is removed. The 6% excise tax on excess contributions will not apply if the excess contribution and earnings allocable to it are distributed by April 15th of the year following the annual deferral.

Earnings on Salary Deferral and Employer Contributions - For the purpose of the excess contribution, we will calculate the net income attributable (NIA) to the contribution using the method provided for in the IRS Final Regulations for Earnings Calculation for Returned or Recharacterized Contributions. This method calculates the NIA based on the actual earnings and losses of the SIMPLE IRA during the time it held the excess contribution. Please note that a negative NIA is permitted and, if applicable, will be deducted from the amount of the excess contribution. The IRS may impose an early distribution penalty tax on the earnings if you are under age 59%. You must file IRS Form 5329 Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts to report any excise tax.

SALARY DEFERRAL CORRECTION

Excess Salary Deferral: \$_____ Date Deposited:_____

Salary deferral excess is being corrected: (select either A, B, or C)

- A. Within the same calendar that the excess deferral was deposited. Earnings (if any) will be calculated through the date of correction.
- **B.** Between January 1 and April 15th following the calendar year in which excess deferral was deposited. Earnings (if any) will be calculated based on the December 31st value for the deferral calendar year.
- C. After April 15th following the calendar year in which the excess deferral was deposited. Earnings (if any) will be calculated through the date of correction.

EMPLOYER CONTRIBUTION CORRECTION - (Employer signature required)

Excess Employer Contribution: \$ Date Deposited:

Important: The participant must complete Section IV - DISTRIBUTION AMOUNT (subsection A) and sign the Participant Authorization section to facilitate this request. Please indicate how we should distribute the proceeds:

Earnings (if any) will be calculated through the date of correction.

The check will be made payable to the company and mailed to the following address.

Company Name:	Phone Number: ()
Address:	City:	State:	Zip Code:
Employer's Signature (required):		Date:	
Employer's Printed Name (required):			

۹.	One time redemption - Choose one: 🗌 Liquidate Entire	Account or	Partial Dist	ribution of \$		1
<u>OR</u>			_	•		
3.	Systematic Distributions: Amount of each distribution \$		1			
	Beginning Date MM/DD/YYYY//		Frequency:	Monthly Q	uarterly 🗌 Semi-Annu	ally 🗌 Annually
	If no beginning date is selected distributions will be scheduled for the 20 th , If this after the beginning date selected the first distribution will occur immediately upo future payments scheduled on the date selected.		lf a frequency i month	s not selected, your RMD w	ill be distributed annually on th	e 20 th of the next availab
	B Part II - Substantially Equal Periodic Payments ("SEPP" unde If you are requesting BNYM I S Trust recalculate the amount of Distributions blank and select the calculation method to use:				"Amount of each distrib	oution" in B. Syster
	Calculate under the RMD method using 🔲 Uniform Lifetime T	able 🗌 Sing	e Life Table	Joint and Last Su	rvivor Table*	
	*Beneficiary's Nam	ie:			Date of Birth:	
	I acknowledge I have consulted with a qualified tax professional and <i>IR</i> responsible for determining the amount to distribute and for monitorin will monitor the SEPP. I understand the custodian does not report SEPP IRS Form 5329 along with my income tax return to the IRS to claim a per	g if a modificatio distributions on l alty tax exceptio	n of the SEPP u IRS Form 1099-F n for this reason	under Section 72(t) has as exempt from the end.	occurred. Neither the cust	todian nor the plan s
tri	butions will be taken proportionately across all funds unless sp	oecific funds an	id amounts ar	e indicated below:		
	Fund:	Amo	unt: \$		or Percentage:	%
	Fund:	Amo	unt: \$		or Percentage:	%
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VI. TAX WITHHOLDING ELECTION

A. Federal Withholding: Federal income tax will be withheld at the rate of 10% from any distribution, subject to the IRS withholding rules, unless you elect a withholding rate of 0% below or have previously elected out of withholding. Tax will be withheld on the gross amount of the payment even though you may be receiving amounts that are not subject to withholding because they are excluded from gross income. This withholding procedure may result in excess withholding on the payments. If you elect to have no federal taxes withheld from your distribution, or if you do not have enough federal income tax withheld from your distribution, 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. You understand that your below election will remain in effect until such time as you make a different election with the Custodian.

□ I elect federal income tax withholding of 0%, do not withhold federal income tax from my distributions.*

I elect federal income tax withholding of _____% must be a whole percent, you may elect any rate from 1% to 100%.*

See the attached Form W-4R Withholding Certificate for Nonperiodic Payments which has the **Marginal Rate Tables** and "**Suggestion for determining** withholding" instructions. You may use these tables and instructions to help you select the appropriate withholding rate.

*Generally, you can't elect less than 10% federal income tax withholding for payments to be delivered outside the United States and its possessions.

B. State Withholding: Your state of residence will determine your state income tax withholding requirements, if any. Those states with mandatory withholding may require state income tax to be withheld from payments if federal income taxes are withheld or may mandate a fixed amount regardless of your federal tax election. Voluntary states let individuals determine whether they want state taxes withheld. Some states have no income tax on retirement payments. Please consult with a tax advisor or your state's tax authority for additional information on your state requirements. If you are completing this form, your below election will remain in effect until such time as you make a different election in writing to the Custodian.

I elect NOT TO have state income tax withheld from my retirement account distributions (only for residents of states that do not require mandatory state tax withholding).

VII. PARTICIPANT AUTHORIZATION

I certify that I am the individual authorized to make these elections and that all information provided is true and accurate. I further certify that the Custodian, Franklin Templeton/Western Asset Funds, or any agent of either of them has given no tax or legal advice to me, and that all decisions regarding the elections made on this form are my own. The Custodian is hereby authorized and directed to distribute funds from my account in the manner requested. The Custodian may conclusively rely on this certification and authorization without further investigation or inquiry. I expressly assume responsibility for any adverse consequences which may arise from the election(s) and agree that the Custodian, Franklin Templeton/Western Asset Funds, and their agents shall in no way be responsible, and shall be indemnified and held harmless, for any tax, legal or other consequences of the election(s) made on this form.

Substitute W-9 - Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number, and

2. I am not subject to backup withholding because:

* Beneficiary's signature for inheritance liquidations.

- 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 (as defined in the Form W-9 instructions found at www.irs.gov).

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Cross out item 2 above if the IRS has notified you 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.

Participant's Signature*:

Date:

Please review the Franklin Templeton/Western Asset Funds prospectus for Medallion Signature Guarantee stamp requirements.

Medallion Signature Guarantee Stamp and Signature: An eligible guarantor is a domestic bank or trust company, securities broker/dealer, clearing agency or savings association that participates in a medallion program recognized by the Securities Transfer Agents Association. The three recognized medallion programs are the Securities Transfer Agents Medallion Program (known as STAMP), Stock Exchanges Medallion Program (SEMP), and the Medallion Signature Program (MSP). A notarization from a notary public is NOT an acceptable substitute for a signature guarantee.

Medallion Signature Guarantee Stamp	

CONTACT INFORMATION (INCLUDING CUSTOMER COMPLAINTS)

Mail:	Postal address	Overnight carrier address		
	Franklin Templeton	Franklin Templeton		
	P.O. Box 534447	Attention: 534447		
	Pittsburgh, PA 15253-4447	500 Ross Street, 154-0520		
		Pittsburgh PA 15262		
Phone:	one: To speak with an investment professional regarding any of our funds,			
	please call toll-free: (800) 625-4554, Monday through Friday, 8:00 am – 5:30 pm (ET)			
Fax:	1-833-751-5146			
Internet:	www.franklintempleton.com			

Substitute W-4R 2025 - Withholding Certificate for Nonperiodic Payments – For use with IRAs ONLY

Where instructed to provide your withholding election on "line 2" use the space provided on the attached form under "Federal Income Withholding Election."

2025 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 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%	
15,000	10%	30,000	10%	22,500	10%	
26,925	12%	53,850	12%	39,500	12%	
63,475	22%	126,950	22%	87,350	22%	
118,350	24%	236,700	24%	125,850	24%	
212,300	32%	424,600	32%	219,800	32%	
265,525	35%	531,050	35%	273,000	35%	
641,350*	37%	781,600	37%	648,850	37%	
*If married filing separately, use \$390,800 instead for this 37% rate.						

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 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.

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.

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 2025, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

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 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 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 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 \$65,000 without the payment. Step 1: Because your total income without the payment, \$65,000, is greater than \$63,475 but less than \$118,350, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$85,000, is greater than \$63,475 but less than \$118,350, 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 \$61,000 without the payment. Step 1: Because your total income without the payment, \$61,000, is greater than \$26,925 but less than \$63,475, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$81,000 is greater than \$63,475 but less than \$118,350, the corresponding rate is 22%. The two rates differ. \$2,475 of the \$20,000 payment is in the lower bracket (\$63,475 less your total income of \$61,000 without the payment), and \$17,525 is in the higher bracket (\$20,000 less the \$2,475 that is in the lower bracket). Multiply \$2,475 by 12% to get \$297. Multiply \$17,525 by 22% to get \$3,856. The sum of these two amounts is \$4,153. This is the estimated tax on your payment. This amount corresponds to 21% of the \$20,000 payment (\$4,153 divided by \$20,000). Enter "21" on line 2.