# IRA Systematic Distribution Request Form

# (Do not use for Required Minimum Distribution requests or 72(t) requests)

## **HARTFORD**FUNDS

Requests may be submitted via fax to Attn: Hartford Funds at 1-888-802-0039.				Contact Information:
Note: Medallion Signature Guarantees cannot be	faxed. For additional	intormation, reter	r to page 4.	Online: www.hartfordfunds.com
Section A - Hartford Funds A	Account Ow	ner Inforn	nation	Telephone:
Owner Name	Account Number Date of Birth (mm/dd/yyyy)		Birth (mm/dd/yyyy)	Call 1-888-843-7824 Monday-Thursday Friday
Residential Address (required)				8:00am-7:00pm ET 8:00am-6:00pm ET Fax:
City		State Zip		1-888-802-0039
Oity		State Zip		Attn: Hartford Funds (Note: Medallion Signature Guarantee
Owner SSN or TIN	Telephone	Number		stamp cannot be faxed)
Castian B. Biatuibutian E				
Section B - Distribution Free		h halanaaa of ¢E	000 or more. Vou	may request a specific dellar amount or
Periodic distributions of \$50 or more are available an annualized percentage of the market value of y 28th).	our account to be wit	thdrawn (via ACH	l) on the day of the	e month specified (any day, 1st through
Begin my systematic withdrawal plan on:				
(If a date is not specified, this option will begin				
Select a payment frequency: Monthly	•	☐ Semi-A	nnually $\square$	Annually
Deferred sales charges may apply, see prospectus	s ioi details.			
Section C - Fund Election				
☐ I would like my distributions to represent an a	annualized percentag	e of the account(s	s) listed. Specify p	ercent: %
I wish to receive a total of \$		•	,	
Fund Name		Class		
			•	
			\$	
			\$	
			\$	
			, <u> </u>	
			\$	
			\$	
* We will only accept whole percentages (e.g. 50%, 67%, etc.	:.)	Total	\$	
Section D - Reason for Rede	emption (Re	quired)		,
☐ Normal Distribution (age 59 <sup>1/2</sup> or older)		Distribution (unde	er age 50 <sup>1</sup> /2\	
Total and Permanent Disability	☐ Death	ווטווטנווטנו (uilut	or age Ja/	
Note: In an effort to properly code Form 1099 for t		n for the redemnt	ion <b>must</b> be provi	ded. If a reason is not indicated, the
distribution will be coded based on your age. Hartf your retirement plans.				

Account Type (please select one)

Bank Account Owner(s)

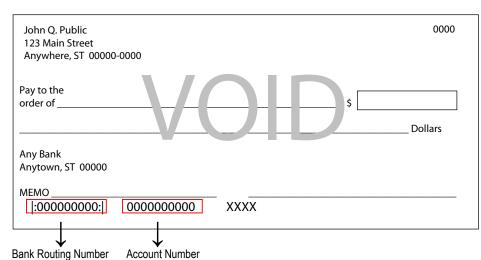
### Section E - Delivery Options (Required) Please select one of the following options: Forward check to my current address of record (Default) Forward check to an alternate address: (medallion signature guarantee required in section H) Zip Mailing Address City State Yes Is this a Permanent Change of Address? Deposit to current bank account of record via ACH (If multiple banks on record, please indicate below) 2. Financial Institution Name Account Number 3. Deposit to the bank account below via ACH (all fields below are required) Important: By signing this paperwork, you agree and confirm that your use of the Automated Clearing House ("ACH") Network will not result in transfers to or from a financial institution outside of the United States. You also understand it is your responsibility to notify Hartford Funds if any changes to your status occur that may require funds to be sent to or from a financial institution outside of the United States. Name of Financial Institution Account Number at Financial Institution Bank Routing Number (must be 9 digits - attach a voided

Attach a voided check below. Please use tape instead of staples. If a voided check is not provided, a document on bank letterhead with account registration information, account number, and routing number may be sufficient.

Savings (Include a verification letter which may be obtained from your bank)

Checking (Attach a voided check below)

check)



- No Starter Checks.
- Minimum ACH is \$50 per fund.
- ACH will arrive in 2-3 business days.
- There is no fee for this option.

Note: If the registration on the bank account is different from the registration on the Hartford Funds account or if this is a new or updated bank account on the record, we require a medallion signature guarantee on the form in section H.

#### Section F - Income Tax Withholding (Substitute W4-P; OMB No. 1545-0074)

Federal tax law requires us to withhold 10% of your withdrawal unless you tell us not to. Even if you tell us not to withhold taxes, you may have to pay federal and state income taxes on the taxable portion of your withdrawal. You may also have to pay tax penalties if your estimated tax withholdings are not adequate. Your signature on this form acknowledges that you have read this information about income tax withholding and that the social security or taxpayer identification number that you wrote on this form is correct.

If you are a non-resident alien and you are requesting a reduced tax withholding rate, you must give us your Individual Taxpayer Identification Number (ITIN). You must also send us a completed IRS Form W-8 BEN to certify your foreign status. We will withhold 30% federal income tax from the taxable amount of your withdrawal if you are claiming reduced withholding under a tax treaty and there is no applicable tax treaty, if you have not properly completed and signed Form W-8 BEN, or you do not provide us with an ITIN.

Fed	deral Income Tax Withholding:		
	Do not withhold federal income taxes		
	Withhold \$	or	% (as Federal Income Taxes)
Gro	oss or Net:		
	partial distributions please indicate whether you waterwise.	ant your distribution	gross or net of withholding. We will default to gross unless you tell us
	Gross - Redeem the amount indicated in Section	n C, reducing the pr	oceeds by the amount of withholding.
	Net - Send me the amount indicated in Section 0	C and redeem an ac	dditional amount for withholding.
Se	ection G - State Income Tax	Withholdin	g
	ase be advised that if you withhold federal income ount. Please refer to the Additional Information sec		ntial state requires mandatory withholding, we will withhold the required ax withholding information.
1.	Residents of DE, IA*, KS, MA, ME, MS** will hat tax is withheld. You may also request an addition	ive state income tax nal amount of state t	withheld of at least the state's minimum requirements if federal income tax withholding.
	Residents of MI will have state income tax withh Information section for more state tax withholding		hether or not federal tax is withheld. Please refer to the Additional
			nether or not federal tax is withheld for lump sum distributions. For all old DC income tax only if you instruct us to do so.
	In addition to the state's required tax withhole Please indicate in whole dollars.	ding, please withho	Id an additional amount of \$
	*lowa residents only: Residents of lowa may qua information.	lify for partial exem	ption. Please refer to the Additional Information section for more
	Please note: The amount of your distribution Please check one of the following if you qual	-	elected exemption amount will be subject to state tax at the applicable rate.
	I qualify for a partial exemption in the a	amount of:	\$6,000 or \[ \] \$12,000
	**MS early distributions are the only distributions for all other distributions.	subject to mandato	ory withholding in Mississippi. State income tax withholding is not available
2.	Residents of AR, CA, NC, OR, OK, VT will have not to have state income taxes withheld.	e state income tax w	vithheld if federal income taxes are withheld, unless you specifically elect
	Do not withhold state income taxes		
	In addition to the state's required tax withho Please indicate in whole dollars.	lding, please withho	old an additional amount of \$
3.	Residents of Voluntary States will not have stated for more information on the voluntary tax withhold		out specific instructions. Please refer to the Additional Information section
	I elect to have state income tax withheld in the state income tax withheld in the state income tax.	the amount of \$	

Please indicate in whole dollars.

#### **Section H - Authorization / Acknowledgement**

Please redeem the above requested amounts as directed. I agree with the requirements set forth on this form and understand that I am responsible for reporting and payment of any and all taxes or penalties that may apply to this distribution.

Account owner signature	Date signed (mm/dd/yyyy)	Medallion Signature Guarantee
Bank Account Owner's Signature	Date signed (mm/dd/yyyy)	Medallion Signature Guarantee
Joint Bank Account Owner's Signature	Date signed (mm/dd/yyyy)	Medallion Signature Guarantee

#### Medallion Signature Guarantee

A Medallion Signature Guarantee Stamp is required in the following circumstances:

- Your address of record has changed within the past 15 days.
- Your bank information has been added or updated on the record within the past 15 days.
- You are selling more than \$100,000 worth of shares.
- You are requesting payment be delivered to an address other than the address of record.
- You are requesting payment to be sent by wire or EFT to a bank registration that does not match the account registration or your bank information has been added or updated on the record within the past 15 days.
- You are requesting payment be payable to a party other than the registered owner(s).
- You are requesting payment as a POA.

A medallion signature guarantee is not the same as a notarized signature. You must obtain a medallion signature guarantee from a commercial bank, trust company, savings association, credit union, or a registered broker/dealer that participates in the medallion signature guarantee program. The guarantee must state the words "Medallion Signature Guarantee Stamp."

#### Have you...

- completed Section A and provided a Name, Account, and Social Security Number?
- provided the distribution frequency in Section B?
- provided fund election in Section C, if applicable?
- completed Section D to provide us with your reason for redemption?
- completed Section E to provide us with delivery instructions and included a voided check for ACH?
- completed Section F and G to provide us with income tax withholding instructions?
- signed and dated the form in Section H and received a Medallion Signature Guarantee, if applicable?
- signed and dated the form in Section H and received a signature guarantee if the Power of Attorney is acting on behalf of the account owner?

For standard mail delivery:

Hartford Funds P.O. Box 55022 Boston, MA 02205-5022

For private express mail: Hartford Funds 30 Dan Road Suite 55022 Canton, MA 02021



#### **Additional Information**

#### 60 Day IRA Rollover / 90 Day Hartford Funds Reinstatement Privilege

Rollover Option - You may withdraw any or all of the assets from an IRA and reinvest some or all of the proceeds, in the same IRA, tax-free within 60 days. Please refer to the IRA disclosure statement and/or consult with a tax advisor for complete details on the IRS rollover guidelines. If you are eligible for a rollover, the proceeds can be reinstated without a sales charge, as long as the transfer agent is notified before you invest and the purchase does not exceed contribution limits. All accounts involved must have the same registration.

Reinstatement Privilege - When shares of a fund are sold, some or all of the proceeds can be reinvested in the same fund, or any other Hartford Funds, within 90 days without a sales charge, as long as we are notified at the time of the reinvestment. If Class A or C shares were sold, the shareholder must reinvest in shares of the same class. If a CDSC was paid when the Class A or C shares were sold, the account will be credited with the amount of the CDSC. If Class B shares were sold, the shareholder must reinvest in Class A shares and any CDSC paid on the sale of the Class B shares will not be credited to the account. All accounts involved must have the same registration.

Please refer to the fund prospectus for complete details of the reinstatement privilege.

#### State Income Tax Withholding

This general information is provided to help you understand state income tax withholding requirements for Individual Retirement Account distributions. While Hartford Funds makes every effort to obtain information about state tax laws from sources believed to be reliable, Hartford Funds cannot guarantee the accuracy or timeliness of state tax withholding information because state tax laws are subject to change and interpretation. Hartford Funds may be required to withhold state tax from your distribution based upon state tax law for your state of residency. Hartford Funds will determine your state of residency by the legal address of record on your account, which may or may not be your state of residency for tax purposes. We recommend that you contact your tax advisor regarding your tax withholding elections and to answer any questions you may have regarding your state's withholding laws.

If your state of residency is:	Your withholding options are:
MI	If you reside in Michigan, state income tax withholding will apply regardless of whether federal income tax is withheld. You may not opt out of MI withholding using this form; withholding will be taken at the default rate unless we are provided a completed Michigan withholding certificate, the MI W-4P, or you have indicated a higher amount.
DC	If you reside in DC, lump sum distributions are the only distributions subject to mandatory withholding in DC regardless of whether or not federal tax is withheld. For all other distributions withholding is voluntary, Hartford Funds will withhold DC income tax only if you instruct us to do so.
DC, DE, IA*, KS, MA, ME, MS**	If federal income tax is withheld, The Hartford is required to withhold state income tax of at least your state's minimum requirements. You <u>may</u> elect to have additional withholding.
	If federal income tax is not withheld, you may elect to have state income tax withheld.
*IA	* IA - Optional lowa exemption - A partial exemption is provided to qualified lowa residents receiving retirement account benefits. To qualify you must be 55 years of age or older, disabled or a surviving spouse or other survivor of an individual who would have qualified for the partial exemption in the tax year. If you are receiving retirement income from more than one source, you are only entitled a maximum exemption of \$6,000/\$12,000, depending on lowa tax return filing status.
**MS	**MS - early distributions are the only distributions subject to mandatory withholding in Mississippi. State income tax withholding is not available for all other distributions.
AR, CA, NC, OR, OK, VT	If federal income tax is withheld, Hartford Funds is required to withhold state income tax of at least your state's minimum requirements unless you specifically elect not to have state income tax withheld.
	If federal income tax is not withheld, you may elect to have state income tax withheld.
AL, CO, CT, GA, ID, IL, IN, KY, LA, MD, MN, MO, MT, ND, NE, NJ, NM, NY, OH, PA, RI, SC, UT, VA, WI, WV	State income tax withholding is voluntary regardless of whether or not you elect to have federal income tax withheld. Hartford Funds will withhold state income tax only if you instruct us to do so.
AK, AZ, FL, HI, NH, NV, SD, TN, TX, WA, WY	State income tax withholding is not available. Hartford Funds will not withhold state income tax even if you elect to withhold state income tax.