

Required Minimum Distribution Form

Contact Information:

PHONE: 1-800-442-3814 MONDAY – FRIDAY, 9:00AM – 5:00PM ET.

Regular Mail:

BARON CAPITAL® P.O. BOX 219946, KANSAS CITY, MO 64121-9946

Overnight Mail:

BARON CAPITAL® 801 PENNSYLVANIA AVE, SUITE 219946, KANSAS CITY, MO 64105-1307

Wire Instructions:

UMB BANK, N.A.
ABA NO. 1010-0069-5
FBO BARON FUNDS,
ACCOUNT NO. 98-7037-101-4
OWNER'S NAME, OWNER'S ACCOUNT
NO., SPECIFY FUND NAME

Website:

https://www.baroncapitalgroup.com/

This form may be used to request a Required Minimum Distribution (RMD) from your Baron Capital® retirement account. If you are a beneficiary looking to take a distribution due to the death of an IRA account owner, you will need to complete the Inherited IRA Beneficiary Re-Registration Form. All other types of non-mandatory distributions may be completed with an IRA Distribution Form.

Please complete all sections and mail form to the address on the left.

1. Account Information (Please Print)				
Name				
Residential Address (If the address	s not in the United States, please see section 7.)			
Primary Phone Number		Date of Birth		
Note: Baron Capital® will calculate y IRAs, please list each fund/account r	your distribution(s) for the fund/account(s) provided. If your distribution(s) for the fund/account(s) provided. If you distribution (s) for the fund/account(s) provided (s) for the fund/account(s) for the fund/account(s) for the fund/account(s) provided (s) for the fund/account(s) for the fu	you wish to take distributions from all of your Baron Capital®		
Fund Name/Number	Account Number	Percent Distribution (see section 2 below)		

2. Required Minimum Distributions

Required Minimum Distributions (RMDs) are minimum amounts that IRA account owners (excluding Roth IRAs) must withdraw annually starting in the year they reach age 73. The first RMD payment can be delayed until April 1 following the year in which the account owner turns 73. For all subsequent years, including the year of the original distribution, the account owner must take the RMD by December 31. IRA account owners are responsible for taking the correct amount of RMDs on time every year from their accounts and face potential penalties for failure to take RMDs. We encourage you to consult your accountant or tax adviser for additional information on RMD rules, penalties, and exceptions.

Please select one of the following:					
	n, I authorize Baron Capital® to distribute \$_ ion is to be taken from multiple fund/accou	* or% of my accounnts please indicate the amount/percentage for each in section 1 above.)			
	I authorize Baron Capital® to calculate my RMD for me*. I wish to set up distributions based on my age, year-end account balance, and the applicable expectancy divisor using the Uniform Lifetime Table.				
	is your spouse and they are more than 10	nt and Last Survivor Table*. (Your choice of beneficiary does not affect you years younger than you. If this applies to your beneficiary selection, please			
Spouse's Name		Date of Birth			
		ematic Distributions option in section 4. If you take a one-time distribution, Baron Capital® is not responsible for the accuracy of your calculations.			
* A Medallion Signature Guarantee i	s required in section 8 if you request a distri	bution for more than \$100,000.			
3. Method of Payment					
(Please select one of the following)					
☐ Send my distribution check to my	address of record.*				
☐ Send my distribution check to an	address other than my address of record.*				
Payee Name					
Street Address or P.O. Box					
City	State	Zip			
* A Medallion Signature Guarantee i is not made payable to the registere	s required in section 8 if you request a distred owner, or the address of record has been	ibution to be sent to an address other than the address of record, the check changed within the last 30 days.			
☐ Invest my distribution into my exi	isting non-retirement account with Baron Ca	apital®:			
Fund Name/Number	Account Number	Percent Distribution			
		TOTAL 100%			
☐ Send my distribution proceeds to	my bank. (Please complete section 5.)				

4. Systematic Distributions

(Please choose the date(s) and frequency of the redemptions. Complete section 2 to determine the exact amount of the systematic distribution or if you wish for Baron Capital® to calculate your RMD for you.) Date of Distribution: 25th Starting Month_ **Frequency of Withdrawal:** □ Monthly □ Quarterly □ Annually How would you like to receive your distributions? (Please select one.) ☐ By Check to my address as outlined in section 3 ☐ By ACH to my bank (See section 5) Note: The withdrawal program will start at least 15 days after the initial set-up. 5. Bank Instructions (Please select one of the following methods of redemption. Please attach a pre-printed voided check below.)* ☐ ACH (requires up to three business days, at no charge) ☐ Fed Wire (next day, for an additional charge of \$10, deducted directly from the redemption proceeds. This option is for a one-time distribution, as wires are not available for systematic withdrawals.) ATTACH VOIDED CHECK Bank Name Bank Routing Number Checking or Savings Name(s) on Bank Account **Bank Account Number** * A Medallion Signature Guarantee is required in section 8 if the above bank instructions are different than the bank of record. 6. Withholding Instructions The law requires the federal income tax be withheld from your IRA distributions at a rate of 10% unless you elect otherwise. If you do not check a box, 10% will be withheld. ☐ I elect to have taxes withheld from my IRA distribution ☐ I elect to have ___ _% taxes withheld from any IRA distribution. (can not be less than 10%)

🗖 I elect not to have federal tax withheld from my distributions. I understand that I may be liable for payment of estimated tax. I may incur penalties under

the estimated tax rule, if my withholding and tax payments are not sufficient.

7. Foreign Payment Instructions

Payments to an address outside the United States are subject to	special rules. U.S. citizens receiving payments outside the United States may not waive
withholding. Withholding for foreign citizens is subject to tax trea	

Certification:

- □ I hereby certify that I am a United States citizen living abroad. I understand that payments sent to me abroad are subject to 10% tax withholding and cannot be waived.
- □ I hereby certify that I am a foreign citizen. I am attaching Form W-8BEN to certify my status and comply with IRS rules. I understand that withholding, if applicable, will be applied to my distribution payments based on my certification or lack thereof.

8. Authorization

I hereby authorize the distribution from the IRA to the undersigned and certify that it is in accordance with the provisions of the IRA plan. If I am over 73, I accept full responsibility for withdrawing from my IRA the minimum amount required. I indemnify the Custodian for Baron Capital®, its agents, successors and affiliates from any and all claims the undersigned may have or hereafter claim to have with respect to the distribution or in the event I fail to meet the minimum distribution requirements.

A Medallion Signature Guarantee assures that a signature is genuine and protects investors from unauthorized requests. A Medallion Signature Guarantee may be obtained from an officer of a commercial bank or trust company, savings and loan or savings bank, or a member firm of a domestic stock exchange. Notarization by a notary public is <u>not</u> acceptable.

Account Owner's Signature and Date	Medallion Signatu	Medallion Signature Guarantee Stamp.	
	Name of Bank or Firm		
	Signature of Officer	Title	
Title (if acting on behalf of the Account Owner)			