

IRA Beneficiary Claim Form- Trust Beneficiary

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Use this form to establish an account when the original IRA owner is deceased and a trust has been designated as a beneficiary (inheritor). Each inheritor must complete a separate claim form.

Questions?

Call us at 800-241-1838

Here are a few important things to know before starting:

- For inherited IRAs registered in the name of a trust please provide the full legal name of the entity.
- Inherited IRA assets have many options to consider. Janus Henderson encourages you to consult with a tax advisor and/or financial planner before making any choices.
- The inherited assets will be transferred to the same fund as the original account. If you would like to exchange to a different fund at a later date, please contact a Janus Henderson representative or visit www.janushenderson.com.
- In the event of an IRA participant's death, the executor/personal representative of the decedent's estate or the IRA beneficiary(ies) may request a date-of-death valuation of the decedent's IRA account pursuant to IRS Revenue Procedure 89-52.
- The trust must be established and located in the United States or a US Territory with a valid US taxpayer identification number to open a Janus Henderson account. Shares inherited by an IRA beneficiary who does not meet this requirement must be immediately liquidated (mandatory tax withholding rules may apply).
- **Important Note:** To help the government deter money laundering and terrorism funding activities, all financial institutions are required to obtain, verify and record information that identifies each person who opens an account. Please read important disclosures in Step 13.

There are two parts to filling out this claim form:

- **Steps 1-7 will provide Janus Henderson with information about the account owner who has passed away and will help finalize any Required Minimum Distributions (RMD) that may need to be taken on their behalf.**
- **Steps 8-13 will be used to establish a new account for the inheritor of the assets.**

Remember to sign on the last page

Step 1 - Please include an original certified death certificate

- This is used as proof of death for the original owner
- Original death certificates and/or court documents will be returned to the address listed in Step 9. If you would like it sent somewhere else please include a note stating where to send it
- Photocopies will not be accepted

Step 2 - Deceased IRA Owner's Information

First Name

Middle Initial

Last Name

Social Security Number

Date of Birth

Date of Death

Age at Death (Years, Months)

Step 3 - Select the type of IRA (choose all that apply)

- ☐ Traditional IRA
- ☐ SEP IRA
- ☐ SARSEP IRA
- ☐ Roth IRA

Step 4 - Does a Required Minimum Distribution (RMD) need to be satisfied for the Decedent's year of death?

An RMD is not required for the original owner of a Roth IRA.

- ☐ Yes, RMD needs to be taken. (Proceed to Step 5)
- ☐ No, RMD for deceased owner is not required. (Proceed to Step 8)

Notes:

- The RMD will be distributed proportionately from all inherited funds.
- If there is more than one beneficiary, each beneficiary should distribute their portion of the deceased owner's RMD before 12/31 in the year of death (if applicable).
- Any missed distributions (excess accumulations) may be subject to a 50% IRS excise tax.
- Due to the complexity of any missed RMDs for either the original owner or beneficiary, you may need to include a letter of instruction. Should you have any questions, please consult a tax advisor and/or financial planner or see IRS Publication 590-B.

Remember to sign on the last page

Step 5 - If an RMD is required, would you like to have Janus Henderson calculate the amount or have another amount taken?

- ☐ Have Janus Henderson calculate the amount.
- ☐ I have calculated the RMD, please distribute this amount: \$_____ (If the amount is over \$10,000 we will contact you as other documentation may be needed)

Step 6 - Where would you like us to send the RMD?

- ☐ Use the assets to open a new Janus Henderson non-retirement account.
- ☐ Deposit the assets into my existing Janus Henderson non-retirement account.

Account Number: _____

- ☐ Send the assets to the address in Step 9.

Remember to sign on the last page

Step 7 - Tax Withholding Election (Required)

If NO option is selected, IRS regulations require federal income tax to be withheld at a rate of 10% from your distribution(s). Any applicable mandatory state income tax will also be withheld at your state's required minimum rate. Review the notes below.

The IRS default withholding rate is 10%. You can choose to have a different rate – including any rate from zero to 100%. You can find the current version of IRS Form W-4R online at www.irs.gov for further instructions and a rate table that helps you choose a rate this is appropriate for your tax situation. You cannot choose a rate of less than 10% for payments delivered outside the United States or its territories. Any applicable mandatory state income tax will also be withheld at your state's required minimum rate.

Form W-4R/OMB NO. 1545-0074

☐ **I do not want any federal income tax withheld on my distribution(s).**

I understand that I will be responsible for paying the income tax (if any) which may be due as a result of these distribution(s). If required by my state, mandatory withholding for state income tax will be taken at my state's required minimum rate.

☐ **Please withhold federal income tax on my distribution(s) at the rate of _____ %**

I understand that Janus Henderson will remit any income tax which has been withheld to the Internal Revenue Service on my behalf. If required by my state, mandatory withholding for state income tax will be taken at my state's required minimum rate.

Notes:

- **It is NOT necessary to complete, sign and return IRS Form W-4R with this distribution form.**
- **If NO box is selected, federal income tax will be taken at an IRS default rate of 10% along with any mandatory state income tax for a Traditional IRA, SEP IRA or SAR-SEP IRA; a Roth IRA will default to no withholding.**
- Any amounts withheld cannot be reimbursed by Janus Henderson.
- If you elect not to have withholding apply to your distribution(s), or if you do not have enough federal income tax withheld from your distribution(s), 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. Even if you elect not to have federal income tax withheld, you are liable for payment of federal income tax on the taxable portion of your distribution(s). Whether or not you elect to have withholding apply, you are responsible for any federal income taxes, state and local taxes, and any penalties that may apply to your distribution(s).
- This distribution(s) will be reported to the IRS and the state of your residence, if applicable, as taxable income. The address on the account registration at the time of the distribution(s) will determine the state of residence for state withholding purposes.

Remember to sign on the last page

Step 8 - Trust Information

Name of Trust

Date Trust was Established

Trust's Tax Identification Number or EIN

Step 9 - Trustee Information

Name of Trustee

First Name Middle Initial Last Name

Social Security Number Date of Birth

Mailing Address (If you provide a PO Box, you must also fill out Physical Address below.)

Address

City State Zip Code

Phone Number E-mail Address (optional)

Physical Address (Required if different from above. No PO Box addresses.)

Address

City State Zip Code

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Step 10 - Co-Trustee Information (if applicable)

Name of Co-Trustee

_____	_____	_____
First Name	Middle Initial	Last Name
_____	_____	
Social Security Number	Date of Birth	

☐ **Check here if the mailing address is the same as the primary Trustee.**

Mailing Address (If you provide a PO Box, you must also fill out **Physical Address** below.)

Address		
_____	_____	_____
City	State	Zip Code
_____	_____	
Phone Number	E-mail Address (optional)	

Physical Address (Required if different from above. No PO Box addresses.)

Address		
_____	_____	_____
City	State	Zip Code

Remember to sign on the last page

Step 11 - Provide your bank information

Please provide your bank information if you would like to make future **electronic redemptions**.

This is a:

☐ Checking Account

☐ Savings Account

9-Digit Bank Routing/ABA Number

Checking or Savings Account Number

Bank Name

Owner's Name Exactly as on Bank Account

Joint Owner's Name Exactly as on Bank Account

If the owner(s) of the bank account is anyone other than the owner(s) of the Janus Henderson account, please complete a Bank Options Form or call a Janus Henderson Representative for more information at 800-241-1838

Please attach a *preprinted* voided check.



Don't have a preprinted voided check? Please contact a Janus Henderson representative at: **800-241-1838**.

Remember to sign on the last page

Step 12 - Add a Trusted Contact to Your Account

- A Trusted Contact is a designated individual that Janus Henderson may contact for additional information if there is a concern about your account activity and we are unable to reach you.
- Your Trusted Contact must be at least 18 years old.
- One Trusted Contact will be added to all accounts under the primary owner’s Social Security Number.
- On accounts with multiple owners, the Trusted Contact information applies only to the first owner listed.
- Your Trusted Contact is not authorized to transact on your Janus Henderson account(s).
- This can be changed at any time. To remove a Trusted Contact, please contact Janus Henderson by telephone or submit written instructions. To replace an existing Trusted Contact, please submit a new Trusted Contact Form.

Trusted Contact Information

_____	_____	_____
First Name	Middle Initial	Last Name

Date of Birth		

_____	_____	
Preferred Phone Number	E-mail Address	

Mailing Address

Address		

_____	_____	_____
City	State	Zip Code

By providing a Trusted Contact, I authorize Janus Henderson to contact the Trusted Contact Person and disclose information in the following circumstances:

- To prevent the presumption of abandonment.
- To address possible financial exploitation.
- To confirm my current contact information.
- To confirm my health status.
- To obtain the identity of any legal guardian(s), executor(s), trustee(s), or holder(s) of a power of attorney.
- To obtain information as otherwise permitted by federal or state law.

Remember to sign on the last page

Step 13 - Please read and sign below.

By signing below, I:

- I agree that the information provided is accurate. I have read the most current version of IRS Form W-4R, and I certify the tax withholding election made in Step 7 is correct based on my individual tax situation.
- (1) establish an Individual Retirement Account (IRA) pursuant to the Internal Revenue Code of 1986, as amended, and in accordance with all the terms of the Custodial Agreement on Form 5305-A, 5305-SEP or 5305-RA (whichever is applicable); (2) appoint State Street Bank and Trust Company, or its successors, as custodian on the account; (3) agree that I have received, read, accepted and specifically incorporated herein the Custodial Agreement on Form 5305-A, 5305-SEP or 5305-RA (whichever is applicable) and the IRA Disclosure Statement; (4) agree to promptly give instructions to the custodian necessary to enable the custodian to carry out its duties under the Custodial Agreement; (5) agree that this account will be subject to the Custodial Agreement as amended from time to time; and (6) agree that the terms, representations and conditions in this application and the prospectus, as amended from time to time, will apply to this account and any account established at a later date.
- Certify that I have received and read the current prospectus of the Fund(s) in which I am investing. I certify that I have the authority and legal capacity to make this purchase and that I am of legal age in my state of residence. I agree to read the prospectus for any Janus Henderson fund into which I request an exchange.
- Authorize the Fund and its agents to act upon instructions (by phone, in writing, online or by other means) believed to be genuine and in accordance with procedures described in the prospectus for this account or any account into which exchanges are made. I agree that neither the Funds nor the transfer agent will be liable for any loss, cost or expense for acting on such instructions, provided the Fund employs reasonable procedures to confirm that instructions communicated are genuine. I understand it is my responsibility to review account statements and inform Janus Henderson of errors posted to my account. I understand Janus Henderson reserves the right not to correct errors not brought to the company's attention within a reasonable time period. I understand that anyone who can properly identify my account(s) may be able to make telephone transactions on my behalf.
- Authorize the Fund and its agents to issue credits to and make debits from the bank account information set forth on this application. I agree that Janus Henderson shall be fully protected in honoring any such transaction. I also agree that Janus Henderson may make additional attempts to debit/credit my account if the initial attempt fails and that I will be liable for any associated costs. I agree that if I submit bank information for a bank that does not participate in the Automated Clearing House (ACH) or provide information for a nonbank account, Janus Henderson will price my purchase at the net asset value next determined after Janus Henderson receives good funds. All account options selected and this authorization will remain in effect and become part of the account application and terms, representations, and conditions thereof until I notify Janus Henderson in writing or by phone that I wish to revoke this authorization. I understand that my termination request will be processed within a reasonable time frame upon receipt.
- Authorize the Fund and its agents to reinvest all income dividends and capital gains distributions in the distributing fund.
- Authorize the Fund and its agents to establish check and telephone redemption privileges on my account.
- Consent to the 'household' delivery of any fund prospectuses, shareholder reports or other documents (except transaction confirmations and account statements) that I am required, by law, to receive. This means Janus Henderson will generally deliver a single copy of the most recent annual and semi-annual reports, prospectuses, and newsletters to investors who share an address, even if the accounts are registered under different names. My participation in this program will continue indefinitely unless I contact Janus Henderson.
- Agree that the information provided is accurate. Any required minimum distributions are my responsibility. Janus Henderson will not be held liable for any failure to distribute. Due to the important tax consequences associated with retirement plan distributions, I have been advised to consult with a tax advisor.

Remember to sign on the last page


Step 13 - Continued

- Important Note:** To help the government deter terrorism funding and money laundering activities, all financial institutions are required to obtain, verify and record information that identifies each person who opens an account. So that we may comply with these requirements, we ask you to please complete the registration section in its entirety when opening an account with Janus Henderson. The omission of this information will result in the return of your application and investment. Please note that your ability to perform transactions in your account may also be affected or otherwise delayed if Janus Henderson cannot easily verify the accuracy of the required information in the registration section. If, after 30 days, Janus Henderson is still unable to verify the required information, your account may be closed and your shares redeemed at the next available net asset value (NAV).

Under penalty of perjury, I certify that:


1. The Social Security and Tax Identification Number(s) shown on this application are correct.
2. I am not subject to backup withholding because: (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 failure to report all interest or dividends; or (c) the IRS has notified me that I am no longer subject to backup withholding. Cross out item 2 if you have been notified by the IRS that you are currently subject to backup withholding.
3. I am a US Citizen or a US Resident Alien residing in the United States or a US Territory.
4. I am exempt from reporting per the Foreign Account Tax Compliance Act (FATCA).

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

X

Signature of Trustee

Date

X

Signature of Co-Trustee (if applicable)

Date