AQUILA GROUP OF FUNDS REQUIRED MINIMUM DISTRIBUTION ELECTION FORM

P.O. Box 534428 Pittsburgh, PA 15253-4428 1-800-437-1000

Note: Failure to withdraw your RMD amount by the applicable deadline could result in a 50% penalty tax. The penalty tax would be assessed on the difference between the amount that you were required to take and the amount that was actually distributed, if any. Before making any decision regarding your RMD, we urge you to consult your tax advisor or tax attorney.

PARTICIPANT INFORMATION	ON		
Name:		Phone Num	ber:
Social Security Number:	Date	of Birth:/	Type of Account: Traditional IRA SEP IRA SIMPLE IRA
DISTRIBUTION ELECTION -	(RMD amounts are calculated on the entire	account balance including all of the	underlying investments in your IRA.)
Account Number:	New	RMD election (If new account, price	or year end balance \$)
	☐ Cha	nge an existing RMD election	
Distribute my RMD from:	Across all funds proportionately (roundi	ng may occur), or	
	Distribute from fund(s):		
Your RMD amount is calcul B, Distributions from Indiv Note: Your RMD will be ca checking the box below. My sole primary ber	(RMD amounts are calculated on the entire aclated in accordance with Internal Revenue Seridual Retirement Arrangements (IRAs), which alculated based on the Uniform Lifetime Table neficiary is my spouse who is more than 10 yearncy Table. Spouse's Date of Birth/	vice ("IRS") regulations. The regulat includes the life expectancy tables a unless the following exception appears younger than I am. I elect to c	tions are explained in IRS Publication 590- used to calculate RMD amounts. plies to you and you have indicated so by
TYPE OF DISTRIBUTION	IVIIVI	11	
TYPE OF DISTRIBUTION SINGLE SUM / ONE-TIME I	DISTRIBUTION (OPTIONS):		
☐ Calculate RMD Am	count : Calculate and distribute immediately uring any future year RMD amounts are satisfi		•
	ibute $\underline{\text{my prior year deferred RMD Amount}}$ (vanuary 1^{st} and April 1^{st}).	Only valid if you reached age 72 in	the previous year. Your request must be
	mount of \$ immediately upatisfied each year and for contacting the Cust		
excluded). Attac The amount(s) d	table Distribution ("QCD") - mark this box if the haletter of instruction providing the name of distributed as a QCD must not exceed \$100,00 s provided in the section titled Payment Methers.	of the charity(ies), specific allocation 00. Any amounts in excess of the ap	n(s) and provide the mailing instructions.
SYSTEMATIC DISTRIBUTIO	ONS (OPTIONS):		
	bute my current year RMD amount for this y tribute my RMD amount for all subsequent ye		
that I am responsible	mount of \$ for this year and al e for ensuring my RMD amounts are satisfied e stments to the fixed dollar amount or frequer	ach year. I also understand that I am	
SYSTEMATIC DISTRIBUTIO	ON CYCLE		
Begin systematic distribu	utions on ¹ :/ Frequence	:y (choose one)²: ☐ Monthly ☐ C	Quarterly Semi-Annually Annually

Page 1 of 4 IRCFSW2024

¹ If this form is received after the date selected it will be processed immediately upon receipt. Future RMD's will be established with date listed.

² If a frequency is not selected, your RMD will be distributed annually on the 20th of the next available month.

REQUIRED MINIMUM DISTRIBUTION ELECTION FORM Continued

PAYMENT METHOD		
Based on your selected distribution method, a Medallion Signature Guarantee Stamp may be required the number listed on this form for specific requirements. If a payment method is not selected, your R mailed to your address of record. Your payout method will remain in effect until we receive notice for	MD will be issued as a check payable to you and	
Mail check to my address of record currently on file.		
Purchase into my non-retirement account:		
Application attached with investment instructions (or)		
Existing Account Number: Investment Fund(s):		
*Transfer funds electronically via ACH (voided check required) (or) *Mail check to:	[· · · · ·	
Name of Institution:	*Medallion Signature Guarantee is required and may be obtained at your local bank or trust company, securities broker/dealer, clearing agency or savings association.	
Address:		
Routing Number:	*The receiving bank account must include	
Account Number:	your name in the account registration.	
TAX WITHHOLDING ELECTION (required)		
A. Federal Withholding		
Federal income tax will be withheld at the rate of 10% from any distribution, subject to the IRS w rate of 0% below or have previously elected out of withholding. Tax will be withheld on the gross be receiving amounts that are not subject to withholding because they are excluded from gross in excess withholding on the payments. If you elect to have no federal taxes withheld from your dincome tax withheld from your distribution, you may be responsible for payment of estimated tax rules if your withholding and estimated tax payments are not sufficient. You understand that such time as you make a different election with the Custodian.	s amount of the payment even though you may income. This withholding procedure may result istribution, or if you do not have enough federal x. You may incur penalties under the estimated	
I elect federal income tax withholding of 0%, do not withhold federal income tax from my dist	tributions.*	
☐ 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 determining withholding" instructions. You may use these tables and instructions to help you		
*Generally, you can't elect less than 10% federal income tax withholding for payments to be del possessions.	livered outside the United States and its	
B. State Withholding		
Your state of residence will determine your state income tax withholding requirements, if any, require state income tax to be withheld from payments if federal taxes are withheld or may may tax election. Voluntary states let individuals determine whether they want state taxes withheld, payments. You may wish to consult with a tax advisor or your state's tax authority for additional are completing this form, your below election will remain in effect until such time as you make a	ndate a fixed amount regardless of your federal Some states have no income tax on retirement I information on your state requirements. <mark>If you</mark>	
Please select one:		
I elect <u>NOT TO</u> have state income tax withheld from my retirement account distributions (mandatory state tax withholding).	only for residents of states that do not require	
☐ I elect TO have the following dollar amount or percentage withheld from my retirement a residents of states that allow voluntary state tax withholding). \$ or		

Continued on next page.

Page 2 of 4 IRCFSW2024

REQUIRED MINIMUM DISTRIBUTION ELECTION FORM Continued

AUTHORIZATION

I certify that I am the Participant authorized to make these elections and that all information provided is true and accurate. I further certify that the Custodian, the Sponsor, or the agent of either of them has given no tax or legal advice to me and shall be indemnified and held harmless, for any tax, legal or other consequences resulting from my election(s). I expressly assume responsibility for any adverse consequences which may arise from the election(s). The Custodian is hereby authorized and directed to distribute funds from my account in the manner requested. I have read and understand and agree to be legally bound by the terms of this form.

X

Participant's Signature (required)

*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.

D	а	t	6

Medallion Signature Guarantee Stamp

Mail to the following:

First Class Mail:

Aquila Group of Funds P.O. Box 534428 Pittsburgh, PA 15253-4425 Overnight Mail:

Aquila Group of Funds Attention: 534428 500 Ross Street, 154-0520 Pittsburgh, PA 15262 **Shareholder Services:**

1-800-437-1000

The information provided herein is based on current laws, which are subject to change at any time. Such information should not be construed as investment, tax, or legal advice, or a solicitation to buy or sell any specific securities or product.

Aquila Investment Management LLC and Aquila Distributors LLC does not provide retirement planning, accounting, tax or legal advice. Individuals should seek tax advice based upon their particular situation. Please consult your professional tax advisor.

Page 3 of 4 IRCFSW2024

Substitute W-4R 2024 - 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."

2024 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%		
13,850	10%	7,700	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.							

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 2024, 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 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 \$62,000 without the payment. Step 1: Because your total income without the payment, \$62,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$82,000, is greater than \$61,750 but less than \$115,125, 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 \$43,700 without the payment. Step 1: Because your total income without the payment, \$43,700, is greater than \$26,200 but less than \$61,750, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$63,700 is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. The two rates differ. \$18,050 of the \$20,000 payment is in the lower bracket (\$61,750 less your total income of \$43,700 without the payment), and \$1,950 is in the higher bracket (\$20,000 less the \$18.050 that is in the lower bracket). Multiply \$18,050 by 12% to get \$2,166. Multiply \$1,950 by 22% to get \$429. The sum of these two amounts is \$2,595. This is the estimated tax on your payment. This amount corresponds to 13% of the \$20,000 payment (\$2,595 divided by \$20,000). Enter "13" on line 2.