



A Change of Withholding Election

Please complete the following form if you wish to change your tax withholding election on your IRA account. If you have any questions or need assistance, please call Shareholder Services at (888).544.2685. Once completed please mail the form to Giant 5 Funds, P.O. Box 2175, Milwaukee, WI 53201-2175.

Name of Participant

Account Number

Fund name (if the election is for the entire IRA and not fund specific, leave blank or write "all")

Social Security Number

Date of Birth

Type of IRA Traditional/Rollover IRA SEP-IRA ROTH IRA

Withholding Election:

- Please withhold 10% federal income tax from my distribution.
- Please withhold _____% (greater than 10%) federal income tax from my distribution.
- Please do not withhold any federal income tax from my distribution. (Must have U.S. Residence on file)

Withholding Disclosure (Substitute W-4P)

The distribution(s) you receive from Giant 5 Funds retirement plan in your name are subject to federal income tax withholding at a rate of 10% unless you elect not to have withholding apply. Withholding will only apply to the total amount of the distribution, whether taxable or not. You may elect not to have withholding apply to you. If you do not make an election by the date of your distribution, federal income tax will be withheld from the distribution. If you elect not to have withholding apply to your distribution payments, 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 of your withholding and estimated tax payments are not sufficient. The withholding election above will be applied to all distributions from this account from this date forward **including any Systematic Withdrawal Plans you currently have in place**. You may change your withholding election for future distributions by completing a new IRA Change of Withholding Election form.

Signature: I certify that I am the proper party to authorize payments (s) from this account, and that all information provided is true and accurate. I have read the [Notice of] Withholding Disclosure above and have completed the Withholding Election.

Signature of IRA participant

Date