

IRA Distributions and Withholding Elections

Complete this form to request distributions from your Baird Individual Retirement Account (IRA) as well as your federal and state tax withholding elections with respect to these distributions. Baird does not provide tax advice. For more information regarding the tax consequences of any IRA distribution, please consult IRS Publication 590-B or your tax advisor.

IRA Holder Information

Account Registration (Transfer from any Client Account with same registration)	Social Security Number
Account Number(s)	Date of Birth

Withholding Elections (Form W-4P)

Unless otherwise instructed in writing, Baird will apply the following withholding instructions to all distributions from the IRA.

Yes. Withhold from each distribution as indicated below.

Federal Withholding

Withhold ___% OR \$ _____ (amount must be 10% or greater)

State Withholding

Withhold ___% OR \$ _____

No. Do not withhold from my distributions.

By checking above, I elect not to have Federal or state income tax withheld. I understand that I remain liable for the payment of any Federal and state income tax obligations on the amount of any distributions received. I also understand that I may be subject to Federal income tax penalties under the estimated tax payment rules if my payments of the estimated tax and withholding are insufficient.

Distribution Recipient

Future payments from the IRA may be made to the Recipient indicated below at IRA Holder's verbal or written instruction.

Recipient Name	Baird Account No. (if applicable)
Street Address	City State ZIP

Distribution Information

Distributions may be made to Recipient in cash or in-kind via check, wire, ACH, internal transfer or other means acceptable to Baird. A voided check is required for establishing ACH.

Recurring Distributions (complete only if applicable)

Frequency <input type="radio"/> Monthly <input type="radio"/> Quarterly <input type="radio"/> Annually	Gross Amount (may be modified for future distributions) \$ _____	Begin Date (MM-DD-YYYY) _____
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Additional Distribution Detail (complete if applicable)

One time Excess Contribution Removal: Amount of Excess \$ _____ Tax Year: _____

Check here if this removal is prior to the tax return due date of the tax year.

The amount of excess contribution to be removed will be subject to a prorated adjustment for any realized or unrealized gain (or loss) in the IRA from the date such excess contribution was made.

This is a charitable distribution.

By checking this box, you represent to Baird all of the following are true about the distribution: (i) I will have attained age 70 ½ or older as of the date of this distribution; (ii) the distribution meets the deductibility requirements under Internal Revenue Code Section (IRC Sec.) 170 and I certify that I will not receive any additional benefit from the receiving organization in return for this charitable deduction; (iii) the amount of the charitable distribution from this IRA, when combined with all qualified charitable distributions I will be taking in the current year, will be \$100,000 or less; and (iv) the receiving organization is a church, educational organization, medical organization, private foundation, or other organization listed under the IRC Sec. 170 (b) (1) (A).

Signature

The undersigned ("you") hereby directs Robert W. Baird & Co. Incorporated ("Baird") to make one or more distributions, in the form of cash and/ or securities, from the specified Individual Retirement Account (the "IRA") now or in the future (the "Distribution") in accordance with the instructions provided above. In consideration of Baird following your instructions, you represent, understand and agree as follows: (i) you have the authority to make a withdrawal from the IRA and to instruct Baird to make the Distribution, (ii) the Distribution complies in all respects with applicable law, (iii) sufficient cash or marketable securities will be maintained in the IRA to support the Distribution, (iv) you understand and agree these instructions, including all tax withholding elections will be permanent unless and until changed or revoked in writing, (v) Baird does not provide tax or legal advice and provided no such advice with regard to the Distribution, (vi) if you request withholding on an in-kind distribution, the withholding will be processed separately using available cash, (vii) you understand and agree that Baird may in its sole discretion require any instruction to be provided in writing and (viii) all instructions provided herein are accurate and complete and you agree to indemnify and hold Baird harmless from any breach any of the foregoing representations, the tax or other consequences of the Distribution and the instructions made above.

IRA Account Owner / Authorized Representative	Client Name	Date (MM-DD-YYYY)

Process ID