

## IRA Distribution Request Form

### Mailing Address

Regular Mail:  
Dodge & Cox Funds  
P.O. Box 219502  
Kansas City, MO 64121-9502

Express, Certified, or Registered Mail:  
Dodge & Cox Funds  
430 W 7th Street, Suite 219502  
Kansas City, MO 64105-1407

### Part 1 Current Account Information

NOTE: The below should be considered Line 1 and 1b of Form W-4R. Please refer to the attached instructions.

Name/Account Registration

\_\_\_\_ - \_\_\_\_ - \_\_\_\_ (\_\_\_\_)  
Social Security Number Contact Phone Number

Fund Account Number

### Part 2 Reason for Distribution

NOTE: Rules related to distributions from IRAs are complex, and it is your responsibility to ensure that the requested IRA distribution complies with all IRS rules. Please consult with your own tax advisor regarding your individual circumstances.

- A. Normal Distribution**  
I am age 59 ½ or older.
- B. Premature Distribution\***  
I am under age 59 ½.
- C. Permanent Disability**  
I am permanently disabled according to the IRS definition.\*
- D. Death of IRA Owner/Inherited IRA**  
The original IRA Owner has died and I am the beneficiary (a Medallion Signature Guarantee is required).\*  
\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date of Death of IRA Owner
- E. Excess Contribution (without penalty)**  
Remove excess contribution of \$ \_\_\_\_\_ made for the tax year \_\_\_\_\_ and any earnings (gain or loss) attributable to such contribution. **Go to Part 5 (Do not complete Part 3 and part 4).** Tax withholding cannot be applied to removal of excess contributions.
- F. Divorce of IRA Owner**  
I am distributing due to a divorce settlement.

\*You may be required to file IRS Form 5329. Consult your tax or financial advisor for further information.

## IRA Distribution Request Form

### Part 3 Calculation Method

For Option A:  
Complete 1, 2, and 3  
(if applicable)

Select A, B, or C below to indicate your calculation method. Not all distribution options may be allowable for every situation. The SECURE act of 2020 has impacted the distribution rules for certain beneficiaries of inherited IRAs. Consult with your tax advisor regarding your specific situation.

**A. Life Expectancy Distributions**

Establish periodic distributions from the account(s) based on my life expectancy or a complete distribution over a fixed number of years as calculated by Dodge & Cox Funds.

1. Method of determining distribution amounts based upon:

- My age using the IRS Uniform Lifetime Table.
- The joint life expectancy of my spouse and I using the IRS Joint Life Expectancy Table. **This option can only be used if your spouse is your sole beneficiary and your spouse is more than 10 years younger than you.**

Spouse's: Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

- A complete distribution over \_\_\_\_\_ years. **Number of years may not exceed the distribution period allowed under the IRS Uniform Lifetime Table or your joint life expectancy with your spouse as beneficiary (IRS Joint Life Expectancy Table).**

2. I would like these payments distributed to me:

Frequency:  Monthly  Quarterly  Semi-annually  Annually

Start Date (Month/Year): \_\_\_\_\_ Day of Month: \_\_\_\_\_

3. **If assets in the account were not invested in the Dodge & Cox Funds as of the prior year-end,** provide prior year-end value of IRA assets. \$ \_\_\_\_\_

**B. Periodic Distributions**

Establish periodic distributions in the amount of \$ \_\_\_\_\_

Frequency:  Monthly  Quarterly  Semi-annually  Annually

Start Date (Month/Year): \_\_\_\_\_ Day of Month: \_\_\_\_\_

**C. One-time Distribution**

I would like to take a **one-time** distribution of \$ \_\_\_\_\_

### Part 4 Distribution Election

Please select one of the partial distribution methods below. If no election is made, life expectancy distributions will be made pro-rata based upon each Fund account's prior year end balance.

Take my partial distribution:  Pro rata **OR**  As indicated below:

_____	_____	\$ _____	or	_____ %
Fund	Account Number			
_____	_____	\$ _____	or	_____ %
Fund	Account Number			
_____	_____	\$ _____	or	_____ %
Fund	Account Number			
_____	_____	\$ _____	or	_____ %
Fund	Account Number			
_____	_____	\$ _____	or	_____ %
Fund	Account Number			
_____	_____	\$ _____	or	_____ %
Fund	Account Number			

**TOTAL:** \$ \_\_\_\_\_ or \_\_\_\_\_ **100%**

## IRA Distribution Request Form

**Part 5**  
**Income Tax**  
**Withholding**  
**and Certification**  
(required)

If you elect not to have withholding apply to your distributions, you are still responsible for payment of any tax due. You may incur penalties under the estimated tax rules if your withholding and estimated tax payment(s) are not sufficient.

**Federal Withholding:**

Your withholding rate is determined by the type of payment you will receive.

For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100% on line 2. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its possessions.

NOTE: The below should be considered Line 2 of Form W-4R. Please refer to the attached instructions.

Complete this line if you would like a rate of withholding that is different from the default withholding rate. See the instructions on page 2 and the Marginal Rate Tables below for additional information. If you do not wish to have federal taxes withheld, you must enter "0" in the space below. If the field is left blank, the default 10% withholding will be applied.

Enter the rate as a whole number (no decimals): \_\_\_\_\_ %

**State Income Tax Withholding: Applicable ONLY to AR, CA, CT, DC, DE, IA, KS, ME, MA, MI, MN, MS, NE, NC, OK, OR, VT, VA.** In most cases, if federal taxes are withheld, mandatory state tax withholding will apply, unless you check one of the boxes below. Some states have additional requirements in order to opt out of mandatory state tax withholding, (e.g., Connecticut or Michigan). Consult with your tax advisor or refer to your state's tax laws for more information.

**Notice to Connecticut Residents:** There is a mandatory state withholding regardless of your federal withholding election unless you have provided a Form CT-W4P indicating an exemption to, or alternate rate of withholding.

**Notice to Minnesota Residents:** There is a mandatory state withholding regardless of your federal withholding election unless you have provided a Form W-4MNP indicating an exemption to, or alternate rate of withholding.

- I do not wish to have state taxes withheld.
- Withhold state taxes at the rate of \_\_\_\_\_ % of the total distribution, or in the amount of \$ \_\_\_\_\_ (Refer to your state for minimum withholding amount)

**Note to U.S. citizens living abroad and non-U.S. citizens:** Withholding may not be waived by U.S. citizens receiving payments outside of the United States. Withholding for non-U.S. citizens is subject to tax treaty rules; see IRS Publication 515 for details. If you fall under either of these categories, check the appropriate box below:

- I certify that I am a U.S. citizen living abroad. I understand that payments sent to me abroad are subject to 10% federal tax withholding that cannot be waived.
- I certify that I am a non-U.S. citizen. I am attaching IRS Form W-8BEN to certify my status and to comply with IRS rules. I understand that withholding, if applicable, will be applied to my distribution amounts based upon my W-8BEN certification or lack thereof.

## IRA Distribution Request Form

**Part 6**  
**Distribution**  
**Instructions**

I would like the distribution proceeds:

- A. Sent electronically to a bank account. **A Medallion Signature Guarantee is required if the distribution will be sent to a new bank account. Enclose a voided check (checking account) or a deposit slip (savings account).**
- ACH (Automated Clearing House)  Wire
- B. Sent by check to me at the address on the account. **A Medallion Signature Guarantee is required if the account address was updated within the last 15 days.**
- Regular Mail  Overnight Mail (\$15 fee will apply)
- C. Sent by check to me at the alternate address below. **A Medallion Signature Guarantee is required.**
- Regular Mail  Overnight Mail (\$15 fee will apply)

Alternate Mailing Address

City

State

Zip Code

- D. Sent by check to person or entity listed below. **A Medallion Signature Guarantee is required.**
- Regular Mail  Overnight Mail (\$15 fee will apply)

Name of Payee

Mailing Address of Payee

City

State

Zip Code

- E. Deposit to a Dodge & Cox Funds account.
- Existing Account: Fund \_\_\_\_\_ Account # \_\_\_\_\_  
**Your name must be listed in the registration of the account.**
- New Account (attach a completed Account Application). **Your name must be listed in the registration of the new account and you must meet the investment minimum of \$2,500 per Fund.**
- New IRA (for an inherited IRA or an IRA due to divorce – attach a completed IRA Application). The beneficiary's name must be listed in the registration of the new IRA.

## IRA Distribution Request Form

**Part 7**  
**Certifications**  
**and Signatures**

I, the undersigned, authorize and request that UMB Bank, n.a., as custodian for my IRA, make the above distribution(s) from the account. I acknowledge that the box checked for reason for distribution is correct, and I am aware of the possible tax consequences of these distribution(s). I understand that I am responsible for determining that the minimum distribution requirement, if applicable, is met each year for my traditional IRA and that failure to meet this requirement may result in tax penalties. I agree to indemnify and hold Dodge & Cox, Dodge & Cox Funds, SS&C GIDS, Inc., UMB Bank, n.a., and any affiliate and/or any of their directors, trustees, employees, and agents harmless in this regard for elections I have made, and for any actions taken as a result of the information and instructions I have provided.



\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature of IRA Owner Date

OR if the IRA Owner is deceased, the designated beneficiary must sign and provide the following information.

\_\_\_\_\_  
Name of Beneficiary Social Security Number



\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature of Beneficiary Date

**Select one:**

- I am a U.S. citizen.     I am a resident alien.

I certify under penalties of perjury that: (1) the Social Security number provided above is correct; and (2) I am not subject to IRS backup withholding because: (a) I am exempt from backup withholding; or (b) I have not been notified by the IRS that I am subject to backup withholding; or (c) I have been notified by the IRS that I am no longer subject to backup withholding.

**OR**

- I am a non-resident alien and certify under penalties of perjury that I am not a U.S. citizen or resident alien. I am an "exempt foreign person" as defined under IRS regulations. I have attached a completed W-8BEN form and a copy of my government issued ID as proof of my foreign tax status.

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

(if applicable)

Medallion Signature Guarantee

NOTE: A medallion signature guarantee may be obtained from a domestic bank or trust company, broker, dealer, clearing agency, savings association, or other financial institution which participates in a Medallion program recognized by the Securities Transfer Association. Signature guarantees from financial institutions which do not participate in a Medallion program will not be accepted. A notary public cannot provide a signature guarantee.

# 2024 Substitute Form W-4R Instructions – Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions

## 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](http://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 or eligible rollover distribution from an employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See page 2 for the rules and options that are available for each type of payment. Don't use Form W-4R for periodic payments (payments made in installments at regular intervals

over a period of more than 1 year) from these plans or arrangements. Instead, use Form W-4P, Withholding Certificate for Periodic Pension or Annuity Payments. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

### 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.

## 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 page 3 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%
14,600	10%	29,200	10%	21,900	10%
26,200	12%	52,400	12%	38,450	12%
61,750	22%	123,500	22%	85,000	22%
115,125	24%	230,250	24%	122,400	24%
206,550	32%	413,100	32%	213,850	32%
258,325	35%	516,650	35%	265,600	35%
623,950*	37%	760,400	37%	631,250	37%

\* If married filing separately, use \$380,200 instead for this 37% rate.

## 2024 Substitute Form W-4R Instructions – Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions

### General Instructions (continued)

#### 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.

#### Eligible rollover distributions—20% withholding

Distributions you receive from qualified retirement plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a 20% default rate of withholding on the taxable amount of the distribution. You can't choose withholding at a rate of less than 20% (including “-0-”). Note that the default rate of withholding may be too low for your tax situation. You may choose to enter a rate higher than

20% on line 2. Don't give Form W-4R to your payer unless you want more than 20% withheld.

Note that the following payments are **not** eligible rollover distributions for purposes of these withholding rules:

- Qualifying “hardship” distributions;
- Distributions required by federal law, such as required minimum distributions;
- Generally, distributions from a pension-linked emergency savings account;
- Eligible distributions to a domestic abuse victim;
- Qualified disaster recovery distributions;
- Qualified birth or adoption distributions; and
- Emergency personal expense distributions.

See Pub. 505 for details. See also Nonperiodic payments—10% withholding above.

#### 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.

## 2024 Substitute Form W-4R Instructions – Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions

### Specific Instructions

#### Line 1b

For an estate, enter the estate's employer identification number (EIN) in the area reserved for "Social security number."

#### 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 on page 1 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.