



1. Instructions

Questions?

1-800-OAKMARK
(625-6275)

Hours:

Monday - Friday
8:00am - 6:00pm ET

Please complete this form online, then print, sign and mail it to us.

- Use this form to set up a payroll deduction plan and invest after-tax dollars directly from your paycheck to your Oakmark account.
- Use this form and the [New Account Registration Form](#), [IRA Application & Adoption Agreement](#) or [Coverdell Savings Account \(ESA\) Application & Adoption Agreement](#) to open a *new* Oakmark account with a payroll deduction plan.
- Provide a copy of this completed form to your payroll department to initiate or change your payroll deduction plan.

Regular Mail:

Oakmark Funds
P.O. Box 219558
Kansas City, MO 64121-9558

For Overnight Delivery:

Oakmark Funds
330 West 9th Street
Kansas City, MO 64105-1514

2. Existing Account Information

Please see an account statement for this information.

If you are opening a new account, please leave account number blank.

Account Number

Social Security Number/ Tax Identification Number

Account Registration

Primary Phone Number

Secondary Phone Number

Email Address

3. Payroll Deduction Instructions

Select one:

- Add this new payroll deduction plan to my account.
- Update my existing payroll deduction plan. Please change my investment allocation and the total amount deducted from my paycheck.
- Update my existing payroll deduction plan. Please change my investment allocation only. The total amount deducted from my paycheck will not change. Skip to [Section 6](#).
- Stop my existing payroll deduction plan. I have contacted my employer to stop deductions from my paycheck. Skip to [Section 7](#).

4. Employer Information

Employer Name

Payroll Department Contact Name

Primary Phone Number

Mailing Address

City

State Zip Code

5. Instructions to Employer

A. Deduct _____ (whole dollar amount only) from my paycheck and send the amount to Oakmark.

6. Investment Allocation

IRA or ESA contributions will be coded as current year contributions.

| Fund Name | Share Class | Percent Must equal 100% |
|---|-------------|-------------------------------|
| Oakmark Fund | _____ | _____ % |
| Oakmark Select Fund | _____ | _____ % |
| Oakmark Global Fund | _____ | _____ % |
| Oakmark Global Select Fund | _____ | _____ % |
| Oakmark International Fund | _____ | _____ % |
| Oakmark International Small Cap Fund | _____ | _____ % |
| Oakmark Equity and Income Fund | _____ | _____ % |
| Oakmark Bond Fund | _____ | _____ % |
| Oakmark Units of the Financial Square Treasury Solutions Fund | _____ | _____ % |
| Total Investment: | | <input type="text"/> % |

7. Account Owner Signature(s) *Required*

I understand that my employer must initiate payroll deduction. I realize I can change the amount deducted from my paycheck or cancel this service at any time by notifying my employer. I authorize the specified investment amount above. I understand that it is my responsibility to monitor my IRA/ESA contributions for applicable IRS limits.

X _____ Name _____ Date _____
Signature

X _____ Name _____ Date _____
Signature

RETAIN A COPY OF THIS COMPLETED FORM FOR YOUR RECORDS