# Oakmark Funds.

## Redemption **Request Form**

#### 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 redeem from your Oakmark account or to redeem from an Oakmark account due to death.
- A STAMP2000 Medallion Signature Guarantee (MSG) stamp is required if the redemption proceeds exceed \$100,000, are to be sent to a bank account that is not on file or was added online within the last 60 days, are to be sent to the address on file that has changed within the last 15 days, or are to be made payable or mailed to someone other than the account owner(s).
- Do not use this form to redeem from an Oakmark IRA account. Use the IRA Distribution Form.
- The paperclip [indicates that additional documentation is required with this form.

Regular Mail: Oakmark Funds P.O. Box 219558

For Overnight Delivery: Oakmark Funds 801 Pennsylvania Ave Kansas City, MO 64121-9558 Suite 219558 Kansas City, MO 64105-1307

You can also redeem from your account online at Oakmark.com

## 2. Existing Account Information

Please see an account statement for this information. To redeem from another account, please complete and attach an additional form.

Account Number	Social Security Number/Tax Identification Number
Account Owner Name(s)/Account Registration	

#### 3. Contact Information

Primary Phone Number	Secondary Phone Number	Email Address

### 4. Type of Redemption

Select one:
Partial Redemption. Go to Section 6.
Redemption Due to Death. Go to Section 5.
Account Liquidation. Redeem assets in all Funds under the account number listed in Section 2. Go to Section 7C.

## 5. Redemption Due to Death

Please attach an inheritance tax waiver if required by the respective state of the deceased account owner's residence.

Date of death	h of account owner:	
	(MM/DD/YYY	Υ)
R Type of	f Distribution —————	
	Distribution	
Select one:		
in order		te one form. A conduit account will be established in your name name, and address in Section C below. You must provide your nature guarantee in Section 10.
the bene utor nan	eficiary's name in order to redeem the ass nes, and the beneficiary address in <mark>Sectio</mark>	must complete one form. A conduit account will be established in sets. Provide the beneficiary SSN, both the beneficiary and execon C below. Both the executor and beneficiary must provide their a medallion signature guarantee in Section 10.
the estat	te TIN, executor name, estate name, and	ed in the estate's name in order to redeem the assets. Provide address in Section C below. The estate executor must provide a nature guarantee in Section 10. Go to Section 7C.
establish You mus	ned in your name in order to redeem the a	neneficiary must complete one form. A conduit account will be assets. Provide your SSN, name, and address in Section C below. obtain a medallion signature guarantee in Section 10. Provide the u know are deceased:
N	ame of Beneficiary	Date of Death (MM/DD/YYYY)
N	ame of Beneficiary	Date of Death (MM/DD/YYYY)
C. Recipie	nt Information	
C. Recipie	nt Information	
	nt Information  nt Owner or Beneficiary (including Trusts o	or Charities) Social Security Number/Tax Identification Number
		or Charities) Social Security Number/Tax Identification Number
Name of Join		or Charities) Social Security Number/Tax Identification Number
Name of Join	nt Owner or Beneficiary (including Trusts o	or Charities) Social Security Number/Tax Identification Number
Name of Join	nt Owner or Beneficiary (including Trusts o	
Name of Join	nt Owner or Beneficiary (including Trusts of the control of the estate	, , , , , , , , , , , , , , , , , , ,
Name of Join Name of Esta	nt Owner or Beneficiary (including Trusts of ate If distributing to the estate	, , , , , , , , , , , , , , , , , , ,
Name of Join Name of Esta	nt Owner or Beneficiary (including Trusts of ate If distributing to the estate	, , , , , , , , , , , , , , , , , , ,
Name of Join	nt Owner or Beneficiary (including Trusts of ate If distributing to the estate stee/Authorized Party (First, Middle Initial ress	

## 6. Redemption Amount

* A Medallion Sig-
nature Guarantee
stamp is required
in Section 10 if
the redemption
amount is more
than \$100,000.

Redeem the following amounts from the Funds	s listed below:		
Fund Name	Share Class	Redemption Amount *	Dollars, Shares or Percent

## 7. Delivery Instructions

#### Minimum Amounts:

Investor: \$0 Advisor: \$100,000 Instl: \$250,000 R6: \$1,000,000

The accounts from which you are redeeming, and into which you are purchasing, must have the same account owner and SSN/TIN (e.g., individual to IRA). For all other exchanges/transfers, please use the Change of Registration Form.

If you are exchanging to an IRA or Coverdell ESA, the contribution will be coded as current year, unless you instruct otherwise.

Exchange to a new account:

Exchange to new or existing Fund(s) unde	r my account number listed ii	Section 2:	
Fund Name	Share Class	Dollar Ar	nount or Percent
			%
			<u></u> <u>%</u>
	_	_	%
			%
	rk Account Number –		
select one:	rk Account Number –		
B. Exchange to Another Oakma Select one:  Exchange to an existing account:  Fund Name	rk Account Number – Share Class	Account Number	Dollar Amount or Perce

Complete and attach the Oakmark New Account Registration Form, IRA Application & Adoption Agreement or Coverdell ESA Application & Adoption Agreement.

## 7. Delivery Instructions continued

Via Regular Mail. Proceeds should be re	ceived 7-10 business days at	fter receipt of your request in good order.
Via Overnight Mail. A \$25.70 overnight	fee will be deducted from v	<b>rour account.</b> Proceeds should be received
2-3 business days after receipt of your re		
elect one:		
Make check payable to current name an signature guarantee in Section 10 if the		ark account owners must obtain a medallion within the last 15 days.
Make check payable to name and addre tee in Section 10.	ss provided in Section 5. You	u must obtain a medallion signature guaran
• • •		another name and address. All Oakmark ction 10. Please provide the payee and mail
Payee Name		
Address	City	State Zip Code
	- 4	p
Mailing Recipient (if different)		
Mailing Address (if different)	City	State Zip Code
Sand Proceeds Flactronically		
. Send Proceeds Electronically		
•		
elect one:	roceeds should be received	2-3 business days after receipt of your
elect one:  Via Automated Clearing House (ACH). Pr	ill be deducted from your ac	
Plect one:  Via Automated Clearing House (ACH). Properties of the request in good order.  Via Federal Funds Wire. A \$5 wire fee word business days after receipt of your requestions.	ill be deducted from your ac	
elect one:  Via Automated Clearing House (ACH). Properties of the request in good order.  Via Federal Funds Wire. A \$5 wire fee we business days after receipt of your requestions.	ill be deducted from your ac est in good order.	
Pelect one:  Via Automated Clearing House (ACH). Proceeds in good order.  Via Federal Funds Wire. A \$5 wire fee we business days after receipt of your requested.  Pelect one:  Send the proceeds to my bank account of the proceeds in my bank account of the proceeds.	ill be deducted from your ac est in good order. on file. vish to add on file. All Oakm	ark account owners must obtain a medallio
Policy of the proceeds to a bank account I wisignature guarantee in Section 10. Pleas	ill be deducted from your actest in good order.  on file.  vish to add on file. All Oakm se see Section 8 for addition at I do NOT wish to add on f	ark account owners must obtain a medallio al requirements.
Via Federal Funds Wire. A \$5 wire fee w business days after receipt of your requested.  Send the proceeds to my bank account I w signature guarantee in Section 10. Pleas  Send the proceeds to a bank account the	ill be deducted from your actest in good order.  on file.  vish to add on file. All Oakm se see Section 8 for addition at I do NOT wish to add on f	ark account owners must obtain a medallio al requirements.  ile. All Oakmark account owners must obhe bank information:

#### 8. Bank Information

You **must** attach a voided check with pre-printed routing and account numbers.

Complete this section if you would like to establish banking information and electronic transfers to and from your bank account or change your banking information. We will not accept starter checks or mutual fund money market checks.

- · All Oakmark account owners must sign this form in Section 9 and obtain a Medallion Signature Guarantee (MSG) stamp in Section 10.
- If there is no name in common between the Oakmark account owners and the bank account owners, ALL Oakmark account owners and bank account owners must sign this form in Section 9 and obtain a Medallion Signature Guarantee (MSG) stamp in Section 10.
- For custodial accounts, including UGMA/UTMA and ESAs, only the custodian or responsible individual is considered the Oakmark account owner.

Please note that this banking information will be added to all accounts under the SSN/TIN.	
Select one:	
Add this new/additional bank information to my account(s).	
Replace the existing bank information on my account(s).	

#### 9. Account Owner Signature(s) Required

I authorize the Oakmark Funds, its affiliates and agents, to act on any instructions believed to be genuine for any transactions or services authorized on this form

If this is a distribution due to death, I certify there are no known disputes or claims that would affect my right to inherit assets as a beneficiary of the deceased shareholder. I agree to hold harmless and indemnify the Oakmark Funds, it affiliates and agents with respect to any direct liabilities, losses, or reasonable expenses arising from compliance with this request.

By completing Section 8 and supplying my banking information, I understand that telephone and internet transaction privileges will apply to my account, including electronic transfers to and from my bank account. I agree that the Funds, Harris Associates L.P., their transfer agent, or their respective agents, officers, trustees, directors or employees will not be liable for any loss, liability or expense for acting, or refusing to act, on any instructions, including any given under the telephone and internet transaction privileges, that are reasonably believed to be genuine, placing the risk of loss on me. See the discussion of these privileges in the Funds' Prospectus.

#### TAXPAYER IDENTIFICATION NUMBER CERTIFICATION:

Under penalty of perjury, I hereby certify that the Social Security or other Tax Identification Number (TIN) in Section 2 or 5 is correct, that I am a U.S. person (U.S. person includes a resident alien) and that I am NOT currently subject to IRS backup withholding (cross out "NOT" if you are currently subject to withholding). The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Sign below exactly as your name(s) appears in Section 2 or 5. All owners, including joint owners and trustees, excluding minors must sign. If acting in a special capacity, such as trustee, custodian, beneficiary or executor, the capacity must be indicated after your signature.

X Signature	Name	Capacity	Date
X Signature	Name	Capacity	Date
X Signature	Name	Capacity	 Date
X Signature	Name	Capacity	Date

## 10. Medallion Signature Guarantee If required

A STAMP2000 Medallion Signature Guarantee (MSG) is required if redemption proceeds are greater than \$100,000, to be sent to a bank account that is not on file or was added online within the last 60 days, to be sent to the address on file that has changed within the last 15 days, or to be made payable or mailed to someone other than the account owner(s). You can obtain an MSG stamp from most commercial banks, trust companies, savings associations, credit unions and member firms of domestic stock exchanges. A notary public cannot provide an MSG.

MSG Stamp	MSG Stamp
MSG Stamp	MSG Stamp

RETAIN A COPY OF THIS COMPLETED FORM FOR YOUR RECORDS

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