

**BRIDGEWAY FUNDS REQUIRED MINIMUM DISTRIBUTION ELECTION FORM**

P.O. BOX 534435  
Pittsburgh, PA 15253-4435  
1-800-661-3550

**Note:** Failure to withdraw your Required Minimum Distribution (RMD) amount by the applicable deadline could result in a 25% penalty tax. The penalty tax would be assessed on the difference between the amount that you were required to take and the amount that was distributed, if any. Additionally, the 25% penalty tax may be reduced within a 2-year correction window beginning on the date the distribution was originally due. Before making any decision regarding your RMD, we urge you to consult your tax advisor or tax attorney.

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YY  
Type of Account:  
 Traditional IRA  
 SEP IRA  
 SIMPLE IRA

**DISTRIBUTION ELECTION** – (RMD amounts are calculated on the entire account balance including all of the underlying investments in your IRA.)

Account Number: \_\_\_\_\_  New RMD election (If new account, prior year end balance \$ \_\_\_\_\_)  
 Change an existing RMD election

Distribute my RMD from:  Across all funds proportionately (rounding may occur), or  
 Distribute from fund(s): \_\_\_\_\_

**CALCULATION METHOD**

Your RMD amount is calculated in accordance with Internal Revenue Service (“IRS”) regulations. The regulations are explained in IRS Publication 590-B, Distributions from Individual Retirement Arrangements (IRAs), which includes the life expectancy tables used to calculate RMD amounts.

**Note:** Your RMD will be calculated based on the Uniform Lifetime Table unless the following exception applies to you, and you have indicated so by checking the box below.

My sole primary beneficiary is my spouse who is more than 10 years younger than I am. I elect to calculate my RMD based on the Joint and Last Survivor Expectancy Table. Spouse’s Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YY

**TYPE OF DISTRIBUTION**

**SINGLE SUM / ONE-TIME DISTRIBUTION (OPTIONS):**

- Calculate RMD Amount:** Calculate and distribute immediately upon receipt of this form **my current year RMD**. I understand that I am responsible for ensuring any future year RMD amounts are satisfied by contacting the Custodian to request subsequent distributions.
- Calculate and distribute my prior year deferred RMD Amount** (Only applicable if your first RMD year was the previous year, and you are electing to distribute last year’s RMD. This request will be processed immediately upon receipt and must be received between January 1<sup>st</sup> and April 1<sup>st</sup>.)
- Distribute a fixed amount of \$ \_\_\_\_\_** immediately upon receipt of this form. I understand that I am responsible for ensuring my RMD amounts are satisfied each year and for contacting the Custodian to request any subsequent distributions.
- Qualified Charitable Distribution (“QCD”)** - mark this box if the amount indicated above is a QCD distribution (not applicable to SEP and SIMPLE IRAs). You must attach a letter of instruction providing the name of the charity(ies), specific allocation(s) and provide the mailing instructions. Note, a QCD is not subject to tax withholding up to the current annual maximum. QCDs are indexed to inflation and the maximum may increase each year. Please speak with a qualified tax professional to confirm the amount you are requesting is not over the amount eligible for a QCD. Any portion you elect to distribute that exceeds the maximum QCD limit for the current year will be processed separately and will not be treated as QCD by the custodian. Please review the sections titled Payment Method and Tax Withholding Election which may apply to any amount not treated as a QCD.

**SYSTEMATIC DISTRIBUTIONS (OPTIONS):**

- Calculate and distribute **my current year RMD amount for this year and all subsequent years**. I understand that the Custodian will continue to calculate and distribute my RMD amount for all subsequent years until I notify them to discontinue the payments.
- Distribute a **fixed amount of \$ \_\_\_\_\_** for this year and all subsequent years until I notify you to discontinue payments. I understand that I am responsible for ensuring my RMD amounts are satisfied each year. I also understand that I am responsible for contacting the Custodian to request any adjustments to the fixed dollar amount or frequency.

**SYSTEMATIC DISTRIBUTION CYCLE**

Begin systematic distributions on<sup>1</sup>: \_\_\_\_/\_\_\_\_/\_\_\_\_ **Frequency** (choose one)<sup>2</sup>:  Monthly  Quarterly  Semi-Annually  Annually  
MM DD YY

<sup>1</sup> If this form is received after the date selected it will be processed immediately upon receipt. Future RMD’s will be established with date listed.

<sup>2</sup> If a frequency is not selected, your RMD will be distributed annually on the 20<sup>th</sup> of the next available month.

**PAYMENT METHOD**

Based on your selected distribution method, a Medallion Signature Guarantee Stamp may be required. Please refer to your prospectus or call us at the number listed on this form for specific requirements. If a payment method is not selected, your RMD will be issued as a check payable to you and mailed to your address of record. Your payout method will remain in effect until we receive notice from you requesting a change.

- Mail check to my address of record currently on file.
- Purchase into my non-retirement account:
  - Application attached with investment instructions **(or)**
  - Existing Account Number: \_\_\_\_\_ Investment Fund(s): \_\_\_\_\_
- \*Transfer funds electronically via ACH (voided check required) **(or)**  \*Mail check to:
  - Name of Institution: \_\_\_\_\_
  - Address: \_\_\_\_\_
  - \_\_\_\_\_
  - Routing and Account Number: \_\_\_\_\_

\*Medallion Signature Guarantee is required and may be obtained at your local bank or trust company, securities broker/dealer, clearing agency or savings association.

\*The receiving bank account must include your name in the account registration.

**TAX WITHHOLDING ELECTION (required)**

**A. Federal Withholding:** Federal income tax will be withheld at the rate of 10% from any distribution, subject to the IRS withholding rules, unless you elect a withholding rate of 0% below or have previously elected out of withholding. Tax will be withheld on the gross amount of the payment even though you may be receiving amounts that are not subject to withholding because they are excluded from gross income. This withholding procedure may result in excess withholding on the payments. If you elect to have no federal taxes withheld from your distribution, 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 if your withholding and estimated tax payments are not sufficient. You understand that your below election will remain in effect until such time as you make a different election with the Custodian.

- I elect federal income tax withholding of 0%, do not withhold federal income tax from my distributions.\*
- I elect federal income tax withholding of \_\_\_\_\_% must be a whole percent, you may elect any rate from 1% to 100%.\*

See the attached Form W-4R Withholding Certificate for Nonperiodic Payments which has the **Marginal Rate Tables** and **“Suggestion for determining withholding”** instructions. You may use these tables and instructions to help you select the appropriate withholding rate.

\*Generally, you can’t elect less than 10% federal income tax withholding for payments to be delivered outside the United States and its possessions.

**B. STATE INCOME TAX WITHHOLDING ELECTION:** Your state of residence will determine your state income tax withholding requirements, if any. Those states with mandatory withholding may require state income tax to be withheld from payments if federal taxes are withheld or may mandate a fixed amount regardless of your federal tax election. Voluntary states let individuals determine whether they want state taxes withheld. Some states have no income tax on retirement payments. You may wish to consult with a tax advisor or your state’s tax authority for additional information on your state requirements. If you are completing this form, your below election will remain in effect until such time as you make a different election in writing to the Custodian.

Please select one:

- I elect **NOTTO** have state income tax withheld from my retirement account distributions (only for residents of states that do not require mandatory state tax withholding).
- I elect **TO** have the following dollar amount or percentage withheld from my retirement account distribution for state income taxes (for residents of states that allow voluntary state tax withholding). \$ \_\_\_\_\_ or \_\_\_\_\_%

**AUTHORIZATION**

I certify that I am the Participant authorized to make these elections and that all information provided is true and accurate. I further certify that the Custodian, the Sponsor, or the agent of either of them has given no tax or legal advice to me and shall be indemnified and held harmless, for any tax, legal or other consequences resulting from my election(s). I expressly assume responsibility for any adverse consequences which may arise from the election(s). The Custodian is hereby authorized and directed to distribute funds from my account in the manner requested. I have read and understand and agree to be legally bound by the terms of this form.

**X**

**Participant's Signature (required)**

**Date**

\*Medallion Signature Guarantee Stamp and Signature: An eligible guarantor is a domestic bank or trust company, securities broker/dealer, clearing agency or savings association that participates in a medallion program recognized by the Securities Transfer Agents Association. The three recognized medallion programs are the Securities Transfer Agents Medallion Program (known as STAMP), Stock Exchanges Medallion Program (SEMP), and the Medallion Signature Program (MSP). A notarization from a notary public is NOT an acceptable substitute for a signature guarantee.

Medallion Signature Guarantee Stamp