

For IRA Shareholders

If you have any questions about completing this Form, please call Neuberger Berman Shareholder Services at 800.877.9700, Monday-Friday, from 9AM to 5PM Eastern Time.

Make sure that you have signed and dated this Systematic Withdrawal Form

Please return this Form to:**Regular Mail**

Neuberger Berman Funds
PO Box 219189
Kansas City, MO 64121-9189

Overnight Mail

Neuberger Berman Funds
801 Pennsylvania Ave, Suite 219189
Kansas City, MO 64105-1307

Email

nbfundsCS@sscinc.com

1 HOW TO USE THE SYSTEMATIC WITHDRAWAL PLAN

A Systematic Withdrawal Plan may be established when you wish to begin taking withdrawals from your IRA in the Neuberger Berman Funds. Simply complete this Form indicating your withdrawal instructions and the Fund(s) from which periodic payments will be made. The program is particularly convenient for an IRA holder who has reached age 73 and must take required minimum distributions.

To determine your life expectancy, either call Neuberger Berman Retail Services at **800.877.9700**, or refer to IRS Publication 590(b) (Individual Retirement Arrangements).

In order to make payments, the Fund's Transfer Agent will liquidate Fund shares from your account on or about the 10th day of the month. If you want to change your withdrawal instructions, or make an additional withdrawal at any time, please call our toll-free number or write to us at the above address.

If you own more than one Neuberger Berman Fund, Required Minimum Distribution will be redeemed for each fund unless you specify otherwise.

2 ACCOUNT INFORMATION

ACCOUNT NUMBER

Registered exactly as shown below:

Name: First	Middle	Last
Date of Birth (Required)		
Street or P.O. Box		Apt. Number
City	State	Zip Code
Daytime Telephone Number		Cell/Evening Telephone Number
E-Mail		

3 DISTRIBUTION INSTRUCTIONS

This section is to designate which Fund(s) and amounts the requested distribution will be processed from.

Fund	\$	or	%
Fund	\$	or	%
Fund	\$	or	%
Fund	\$	or	%
Fund	\$	or	%

4 METHOD OF DISTRIBUTION

Please make distributions from my IRA Account as follows:

Complete One Section Only

Calculate my Required Minimum Distribution based on the Uniform Life Expectancy Table.

My spouse is my sole primary beneficiary and is more than ten years younger than I am. Calculate my Required Minimum Distribution based on the Joint Life Expectancy Table. Spouse's Date of Birth:

Regular payments to deplete my account over a fixed number of years: Yrs. **

Fixed dollar amount: \$. **

Substantially Equal Periodic Payments

** Note: If you select the fixed number of years option or the fixed dollar amount option, please be aware that the distributions made from your account may not satisfy minimum distribution requirements.

Please note that it is you, the account holder, who is solely responsible for making sure that the IRS minimum distribution requirements are met — not the Fund, the Custodian/Trustee (UMB Bank, n.a.) or the Distributor (Neuberger Berman BD LLC).

FREQUENCY OF DISTRIBUTIONS. PLEASE SELECT ONE ONLY.

Monthly

Quarterly

Semi-Annually

Annually

Starting Month/Day: Year:

Note: If no date is selected, the Systematic Withdrawal will occur on or about the tenth day of every month.

5 PAYMENT INSTRUCTIONS

A medallion signature guarantee is required if checks are to be sent to a name and address other than the name and address of record, or if payments are to be invested in a Fund account for other than the name and address of record.

Check One

Please send checks directly to the name and address of record on this account.

Please send checks to the following name and address: **(Medallion Signature Guarantee required).**

Alternate Payee		
Address		
City	State	Zip Code

Please invest the withdrawals in a non-retirement account in the following Neuberger Berman Fund(s)

If this is an existing account, please enter account number:

Fund Name
Account Number

If you would like to open a non-retirement account, please contact a Retail Services Representative at 800.877.9700.

Please transfer the proceeds of the withdrawals to the Bank instructions already on file or as shown below (A medallion signature is required for all bank account owners when adding a bank):

Name of Bank	Account Number
Branch Address	Name(s) on Account
ABA Routing Number (9 Digit Routing Number)	

CHECKING ACCOUNT

SAVINGS ACCOUNT

Note: For the purpose of establishing bank transactions, please attach a voided, unsigned check to this Form. **(We cannot accept money market fund or starter checks.)** For transactions to and from a savings bank account, please attach a letter on your financial institution's letterhead with the information.

6 NOTICE OF FEDERAL AND STATE WITHHOLDING ON DISTRIBUTION

Federal Income Tax

Your withholding rate is determined by the payment you will receive. For nonperiodic payments, the default withholding rate is 10%. If you would like to elect an amount other than 10%, a copy of the attached IRS Form W-4R must be submitted with this request form. Generally, you can not choose less than 10% for payments to be delivered outside the United States and its possessions.

Please select one:

Withhold 10%

Withhold % (Select a percentage between 0% and 100%) from this distribution. If you elect this option, please review and complete the information on the attached Form W-4R and return with this request form.

If you fail to make an election on the Form W-4R, the IRA custodian is required to withhold the default rate of 10%.

A W-4R Form may also be found online at irs.gov/pub/irs-pdf/fw4r.pdf

State Tax Withholding

If you reside in a state that requires withholding, the IRA custodian is required to withhold state income taxes from your distribution regardless of your election. The following states require state income tax withholding from IRA distributions:

AR, CA, CT*, DE, DC, IA, KS, ME, MD, MA, MI*, MN*, MS, NE, NC, OK, OR, VT and VA

*Note: For CT and MI, state withholding is mandatory regardless whether federal applies unless a CT-W4P or MI-W-4P is submitted to waive state withholding. For MN, state withholding is mandatory unless a W-4MNP is submitted.

Please consult your tax or financial advisor for the state income tax withholding requirements for your specific situation. Income and filing status may affect the required withholding.

If state withholding applies, it will be calculated based on your state's applicable minimum withholding requirements. Select one.

Withhold %

Withhold \$

Do Not Withhold State Income Tax unless required

7 SIGNATURE

Account Owner(s)

Please read the following carefully. Sign and date where indicated.

I hereby authorize and request the IRA/Roth IRA Custodian, UMB Bank, n.a. to make the above distribution. If I am under age 59½ and have indicated that I am taking Substantially Equal Periodic Payments, I accept full responsibility for complying with the IRS requirements under §72(t)(2)(A)(iv) of the Internal Revenue Code (the Code) as amended. If I am age 73 or older, I accept full responsibility for withdrawing the minimum distribution required by §408(d)(6) and §401(a)(9) of the Code. I hereby certify that the number shown on this form is my correct Social Security or Taxpayer Identification Number.

In order to protect the security of your account, a Medallion Signature Guarantee is required in order to add banking instructions. All bank account owners of the bank account added need to obtain a Medallion Signature Guarantee.

Signature (Owner, Trustee, Custodian, etc. exactly as it appears in Section 1)	Date
Signature (Trustee, POA, etc. exactly as it appears in Section 1)	Date

You can obtain a Stamp 2000/Medallion Signature Guarantee from most banks, stockbrokers and dealers, credit unions and other financial institutions. The level of coverage provided by the Medallion Signature Guarantee must cover the dollar amount of the transaction or it may be rejected.

STAMP 2000/MEDALLION SIGNATURE GUARANTEE: (if necessary)

Bank Account Owner(s) (Sign Below)

All owners of the bank account in Section 5 who are not owners in Section 1 must sign below.

Bank Account Owner	Date
Bank Account Owner	Date

Please attach your voided unsigned check.

We are unable to establish
Bank Transaction Services without it.

Note: We are unable to accept
money market fund or starter checks.

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 2026, 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;
- Distributions from a pension-linked emergency savings account;
- Eligible distributions to a domestic abuse victim;
- Qualified disaster recovery distributions;
- Qualified birth or adoption distributions;
- Qualified long-term care 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.

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 \$70,000 without the payment. Step 1: Because your total income without the payment, \$70,000, is greater than \$66,500 but less than \$121,800, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$90,000, is greater than \$66,500 but less than \$121,800, 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 \$60,000 without the payment. Step 1: Because your total income without the payment, \$60,000, is greater than \$28,500 but less than \$66,500, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$80,000, is greater than \$66,500 but less than \$121,800, the

corresponding rate is 22%. The two rates differ. \$6,500 of the \$20,000 payment is in the lower bracket (\$66,500 less your total income of \$60,000 without the payment), and \$13,500 is in the higher bracket (\$20,000 less the \$6,500 that is in the lower bracket). Multiply \$6,500 by 12% to get \$780. Multiply \$13,500 by 22% to get \$2,970. The sum of these two amounts is \$3,750. This is the estimated tax on your payment. This amount corresponds to 19% of the \$20,000 payment (\$3,750 divided by \$20,000). Enter "19" on line 2.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request additional federal income tax withholding from your nonperiodic payment(s) or eligible rollover distribution(s); (b) choose not to have federal income tax withheld from your nonperiodic payment(s), when permitted; or (c) change a previous Form W-4R (or a previous Form W-4P that you completed with respect to your nonperiodic payments or eligible rollover distributions). To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s).

Failure to provide a properly completed form will result in your payment(s) being subject to the default rate; providing fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.