



LOOMIS | SAYLES®

Return to:
Loomis Sayles Funds, P.O. Box 219594, Kansas City, MO, 64121-9594
Overnight mail:
Loomis Sayles Funds, 801 Pennsylvania Avenue, Suite 219594,
Kansas City, MO 64105-1307
(800) 633-3330
www.loomissayles.com

LOOMIS SAYLES REDEMPTION REQUEST FORM

Use this form to request a redemption from your Loomis Sayles Fund account(s). This form cannot be used for IRA accounts.

1. Account Ownership

Account Owner's/Entity Name	Address		
Social Security Number or Tax Identification Number	City	State	Zip Code
Date of Birth	Daytime Telephone Number		
Joint Owner's Name			
<input type="checkbox"/> Check this box to permanently change address to the above			

2. Redemption Information

Please list the account information and amount you would like redeemed in the space below.

Fund	Account Number	\$ _____ or # _____ or _____ % Shares <input type="checkbox"/> Check here to redeem all shares
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3. Redemption Instructions

Payment Method

☐ Check
☐ Payable to account owner(s)
☐ Payable to third party (a Medallion Signature Guarantee is required in Section 5)

☐ ACH or ☐ Wire (A \$5.50 will be applied and the receiving bank may charge an additional fee.)
Attach a voided check if bank account not on file (checking account), preprinted deposit slip (savings account).
NOTE: Your bank must be a member of the Automated Clearing House (ACH) system to use any options that require the completion of this section. Please call your bank if you are unsure. If you are including a preprinted deposit slip the bank routing number is usually NOT located on your slip. Please call your bank for the routing number. **A Medallion Signature Guarantee is required in Section 5 if you are adding your bank account for the first time and/or the names on the voided check do not match your account registration with the Funds.**

Bank Account Type: ☐ Checking Account ☐ Savings Account

3. Redemption Instructions (cont'd)

Select mailing method:

Please note if a mailing method is not selected the address on the account will be selected as the default.

- ☐ Send check to address in Part 1 (**Medallion Signature Guarantee is required in Section 5 if updated within last 30 days.**)
- ☐ Regular Mail (7-10 business days) ☐ Overnight Mail (\$36.00 overnight fee will apply)
- ☐ Send check to third party (**Medallion Signature Guarantee is required in Section 5.**)
- ☐ Regular Mail (7-10 business days) ☐ Overnight Mail (\$36.00 overnight fee will apply)
- ☐ Send check to a new address (**Medallion Signature Guarantee is required in Section 5.**)

Name of Third Party

Mailing Address

City

State

Zip Code

4. Cost Basis Method Selection

Note: If you choose Specific Lot Identification (SLID), a secondary reporting method must be selected in the event the lots you have chosen are not available.

Complete this section if you would like to **select a different method** for calculating your cost basis for **this redemption**. **Please be aware that if you choose a different cost basis calculation method than what is currently on your account we will update this account for all future redemptions.**

- ☐ Average Cost (Funds Default Method) ☐ First In First Out (FIFO)
- ☐ Last In First Out (LIFO) ☐ High Cost First Out (HIFO)
- ☐ Low Cost First Out (LOFO) ☐ Loss/Gain Utilization (LGUT)
- ☐ Specific Lot Identification (SLID)**

**Secondary Accounting Method Selection

(Average Cost is NOT a valid secondary method)

Write selection here

If you chose SLID please provide the date(s) of purchase for the lot(s) that you would like to redeem:

Date of purchase

Date of purchase

Date of purchase

5. Signature

Sign exactly as name(s) of registered owner(s) appears in Section 1. **Title must be supplied for all accounts except individual and joint registrations.**

I authorize Loomis Sayles Funds, its affiliates and agents, to act on any instructions believed to be genuine for any transactions or services authorized on this form. By completing Section 3 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, 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. **As required by federal law, I certify under penalties of perjury that (1) the Social Security or Taxpayer Identification Number provided above is correct, (2) the IRS has never notified me that I am subject to backup withholding, or has notified me that I am no longer subject to such backup withholding, and (3) I am a U.S. person (including a U.S. resident alien). (Note: If part (2) of this sentence is not true in your case, please strike out that part before signing.) I am exempt from FATCA reporting (4). The Internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup withholding.**



X

Signature of Account Owner

Date

Title

X

Signature of Owner

Date

Title

A Stamp 2000 Signature Guarantee is designed to protect your account against fraudulent distributions. You can obtain a medallion signature guarantee from most commercial banks, trust companies, savings associations, credit unions and member firms of domestic stock exchanges. **We are unable to accept a guarantee from a notary public.**

Place Medallion Signature Guaranteed Stamp Here: