IRA Required Minimum Distribution Request

Use this form to request a required minimum distribution (RMD) from your DWS retirement account. Please note that no distribution is needed if you have already taken your RMD from another financial institution. If you are requesting a non-mandatory distribution, please complete the IRA distribution request form.

Contact Shareholder Services at (800) 728-3337 or e-mail: service@dws.com

Step 1 Account information (*Indicates required fields)

* Account number(s). We will base your RMD on all funds listed under the account number(s) you provide.

☐ Please check here if the address listed below is a new address, and you would like your account(s) updated.

* Name

* Social Security Number

Date of Birth – MM/DD/YYYY

* Mailing address

* City

* State

* Zip

* Daytime Phone Number Extension

Evening Phone Number Extension

Step 2 Calculating your RMD

Unless you request otherwise, the beneficiary information currently on file with us will be used to make the calculation. To use different information and to update the beneficiary file(s) on your account(s), please submit an IRA Beneficiary Designation form (Form-11) in addition to this form. The uniform method of calculation will be used in most cases.
The joint method will be used if your spouse is listed as your sole primary beneficiary, and he/she is more than 10 years younger than you. If no election is made below, DWS will use only its 12/31 account values in calculating your RMD.

☐ I elect to have DWS use only its 12/31 account value(s) in calculating my RMD. If you transferred retirement money to us from another institution during the year, or currently have retirement accounts with another institution, please check the appropriate box below.

☐ I elect to have DWS use the combined value of my DWS Fund retirement account(s), and the 12/31 value of retirement funds I transferred to you during the year. I understand it is my responsibility to contact DWS each year to calculate my RMD if I am taking into consideration my non-DWS Fund retirement account(s). The 12/31 value of funds previously held at another institution was $.

☐ I elect to have DWS use the combined value of all my retirement accounts in calculating my RMD. I understand it is my responsibility to contact DWS each year to calculate my RMD if I am taking into consideration my non-DWS Fund retirement account(s). The 12/31 value of my non-DWS Fund retirement account(s) was $.

The information provided by DWS should not be considered tax or legal advice. The rules affecting distributions from these accounts are complex and subject to change. Please consult your own tax or legal professional regarding your particular tax or legal situation before requesting a distribution.

Step 3 One-time distribution request(s) (please select only those boxes that apply)

By selecting any of the options in this Step, it is your responsibility to contact DWS each year to request a required minimum distribution.

☐ Distribute my first-year RMD immediately. (This option is for Traditional IRA holders who are taking their first RMD distribution by April 1 of the year following the year they reach the age set forth in Internal Revenue Code. If this option is chosen, we must receive your request between January 1 and April 1.) When you choose to delay your first payment, the IRS requires you to take two taxable distributions the following year—one by April 1 and the other by December 31. If you have any questions, please feel free to contact Shareholder Services for assistance.

☐ Distribute my prior year RMD immediately. For any year in which you do not take the entire required minimum distribution amount, you will be subject to the IRS penalty on the RMD amount that you did not remove by the required deadline.

☐ Distribute my current year RMD upon receipt of this form.

☐ I authorize DWS to immediately distribute a total of $ _____ this year based on my RMD calculation. (Note: DWS is not responsible for the accuracy of an RMD calculation that you provide to us).

Your RMD will be taken proportionately from each fund under the account number(s) listed in Step 1 unless otherwise indicated below.

Percentages must equal 100%

Fund Name, Number, or NASDAQ Symbol	Percentage
	%
	%
	%

Step 4 Automatic withdrawal plan request (periodic distributions)

When making a request for this feature, you need to take into consideration that an account cannot have both an automatic withdrawal plan and cash dividends. As a result, if your dividend option is cash, it will be changed to reinvest when the automatic withdrawal plan is added.

Please set up an automatic withdrawal plan based on:

☐ DWS calculations (only the value(s) of your DWS Fund account(s) will be used).

☐ My RMD calculation of $ _____. (I understand it is my responsibility to contact DWS each year to request future RMD's).

A) Indicate the month and year you want your distributions to begin[1] _____ MM/YYYY

B) Select the frequency of your withdrawal: (If no frequency is indicated, distributions will be monthly.)

☐ Monthly (12 times a year) ☐ Semi-monthly (2 times a month) ☐ Bi-monthly (6 times a year)

☐ Quarterly (4 times a year) ☐ Semi-annually (2 times a year) ☐ Annually (1 time a year)

C) Day(s) of the month[1] _____

[1] Note: We must receive this form seven days prior to the day you wish your distributions to begin. Otherwise, your automatic withdrawal plan will begin the following month. If you do not select a day, we will automatically process your distribution on the 25th day of the month. If that day falls on a weekend or holiday, your distribution will be made on the next business day.

continued on next page

Step 4 Automatic withdrawal plan request (periodic distributions) (continued)

Your RMD will be taken proportionately from each fund under the account number(s) listed in Step 1 unless you indicate otherwise below.

Percentages must equal 100%

Fund Name, Number, or NASDAQ Symbol	Partial distribution percentage
	%
	%
	%

Step 5 Tax withholding information

Distributions from your IRA are generally subject to Federal (and possibly state) income tax. Even if you elect not to have Federal income tax withheld, you are liable for the full payment of Federal income tax, any state or local taxes, and any penalties that may apply to the distribution. You also may be subject to tax penalties under the estimated tax payment rules if your payments of estimated tax and withholding, if any, are not adequate.

If you choose to withhold Federal taxes, DWS will withhold any mandatory state taxes as well. If you would like to provide for any other state withholding, including for states where withholding is voluntary, you must complete the state withholding section below.

Before selecting a withholding option, please consult your legal or tax counsel for advice and information concerning your particular situation. Neither DWS nor any of its representatives may give tax or legal advice. Withholding requirements, exclusions and withholding tax rates are subject to change at any time. For the most up-to-date information on your state's tax withholding requirements, visit your state's website.

Federal withholding

The default withholding rate for your RMD is 10%. 10% of your distribution will be withheld and forwarded to the IRS unless you elect for a different rate to be withheld by completing Form W-4R. As indicated on Form W-4R, you can choose a rate between 0% (no Federal withholding) and 100%. If we do not receive a completed Form W-4R from you, we must withhold the default rate of 10% and you will be deemed to have elected this default rate. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its possessions. If you elect not to have withholding apply to 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.

For automatic withdrawal plans: If you selected to take distributions as part of an automatic withdrawal plan in Step 4 above, your Federal withholding election will remain in effect until you change it. You may change or revoke your election at any time by sending a completed Form W-4R to the address provided in this form. Please allow adequate time for us to process your request before the next scheduled distribution.

A copy of Form W-4R may be included with this distribution request form, or can be accessed at https://www.irs.gov/forms-instructions.

State withholding

For states and the District of Columbia that mandate withholding on distributions, DWS will automatically withhold the minimum required amount and forward it to the appropriate revenue service only if you have also elected for Federal withholding above. If you would like to specify an amount greater than the minimum, or if you would like voluntary state withholding taken, please indicate below. If the state withholding option is selected and your state does not accept withholding, DWS will not take state withholding from your distributions.

☐ Withhold a total of $ _____ and forward to my state revenue service. (If the dollar amount provided is less than the state minimum, DWS will withhold the minimum amount required by your state.) In addition, if there are multiple funds and/or accounts, the total withholding amount will be divided equally.

Step 6 | Payment method

Tell us how you would like to receive your RMD by selecting option A, B, C or D below and providing any additional information requested.* If no payment method is selected, the check will be sent to the address listed in Step 1.

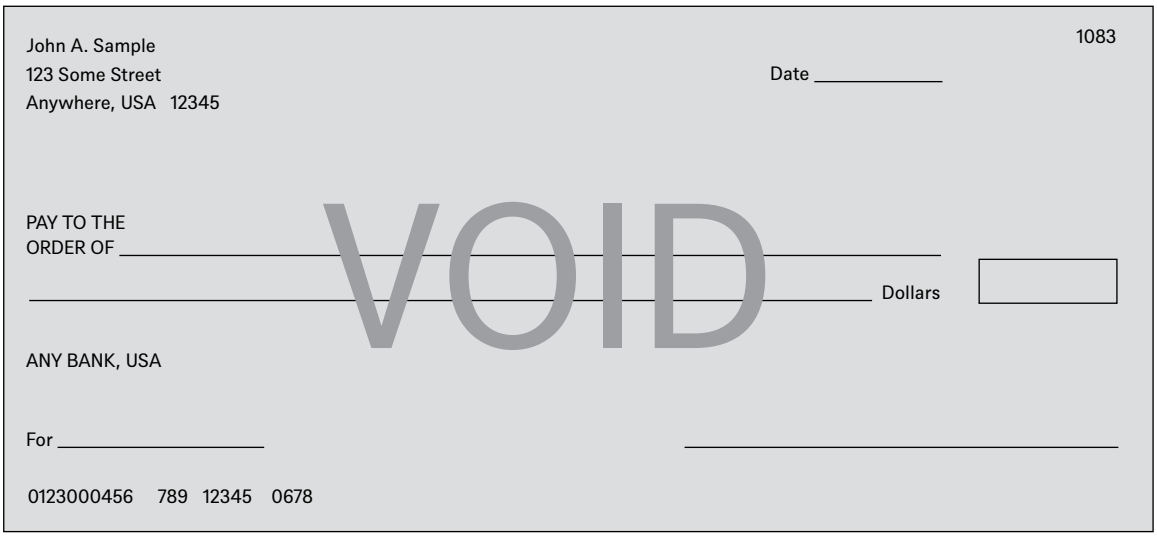
Please select only one box:

☐ A) Make check(s) payable to me and mail to the address shown on my account.

☐ B) Send the distribution(s) to my existing bank account on file.

☐ C) Send my distribution(s) to the new bank account indicated below.

Tape your voided check (for a checking account) or deposit slip (for a savings account without check writing) here to transfer money from your DWS Fund account to your bank. Your name and address must be preprinted on the check or deposit slip. Please write "VOID" on your check before sending.



Please indicate the type of account at your financial institution. Only one type should be selected. If no selection is made, checking will be the default. We cannot establish banking services from cash management, brokerage or mutual fund checks.

☐ Checking OR ☐ Savings

If the bank account registration does not match your DWS fund account registration, a Medallion Signature Guarantee is required for the DWS fund account owner(s) and the additional bank account owners.

In the instance you cannot provide a voided check or deposit slip, you may provide the information separately on the specific bank's letterhead.

☐ D) Invest my distribution(s) in a non-IRA fund account as indicated below. (If your distribution is more than $100,000 or you are investing in a DWS Fund account with an additional owner, we require a signature guarantee. See Step 7 for details.)

Fund name

Account Number

☐ Open a new non-IRA account for me in the same fund. (Please complete a new non-IRA account application and submit it with this form. You may download the form from our web site or contact Shareholder Services).

☐ E) Make check(s) payable to me, or someone other than me (payee identified below), and mail to the following address (which is different than the address shown on my account). (A signature guarantee is required for this option. See Step 7 for details).

Name of payee

Address

City

State

Zip

* Please see Step 7 to determine if a signature guarantee is required.

Step 7 | Signature

Please provide your signature and if necessary, obtain a Medallion Signature Guarantee.

I request the above required minimum distribution(s), and I am aware that I am liable for the payment of federal income tax and possibly state and local taxes on the taxable portion of my distribution(s). I also understand that I may be subject to tax penalties if I do not withdraw the entire required minimum distribution amount by the applicable due date. I certify that I have the authority and legal capacity to request the above distribution. I acknowledge that I am responsible for ensuring that my RMD is correct and timely distributed.

You must have your Medallion Signature Guarantee if your distribution will be:

- mailed to an address other than the address listed on your account or to an address that has changed in the past 15 days;
- invested in a DWS Fund account with a different registration;
- a check greater than $100,000 being mailed to your address of record; or
- sent electronically to a new bank account or you are changing existing bank information

Print Name

Signature (If acting on behalf of the account owner you must sign in capacity†)

Date – MM/DD/YYYY

Affix Medallion Signature Guarantee or Guarantee stamp
(a notary seal is not acceptable)

Bank Account Owner if Difference from Account Owner (if applicable)

Print Name

Signature of Bank Account Owner

Date – MM/DD/YYYY

Affix Medallion Signature Guarantee or Guarantee stamp
(a notary seal is not acceptable)

Special note to Medallion Signature Guarantee guarantors: By affixing the Medallion Signature Guarantee, you are verifying the identity of the individuals and entities assigned to this account and are accepting liability for any misrepresentation as it applies to this registration and any accompanying documentation.

Medallion Signature Guarantee

A Medallion Signature Guarantee is issued by a bank, savings and loan, trust company, credit union, broker/dealer, or any member or participant of an approved signature guarantee program. Please note that a notary public is not an acceptable guarantor. An officer of the institution will ask for identification to be sure that you are, in fact, the person identified on this form and the person signing it. Once the guarantor has reviewed your request, verified your identity and your authority to act on the account presented to them, they will affix a Medallion Signature Guarantee stamp to your form.

DWS prefers Medallion Signature Guarantee stamps. We must receive an original stamp. If more than one signature is required on this form, we will need separate stamps for each signature. If you are obtaining a non-Medallion Signature Guarantee, please contact us. We may require additional documentation to complete your request.

† If acting on behalf of the account owner, or an entity such as a Trust, a Company, or an Estate, you must sign in the capacity of your title as it relates to this account, i.e., Joe Smith, Trustee; John Brown, President; Pat Jones, Executor; etc. The institution providing the Medallion Signature Guarantee for these types of accounts will require additional documentation. You may wish to contact the institution to confirm the documentation they require to provide you with a Medallion Signature Guarantee.

Please mail completed form to:

DWS Service Company
P.O. Box 219151
Kansas City, MO 64121-9151

Overnight Address:

DWS Service Company
801 Pennsylvania Ave
Suite 219151
Kansas City, MO 64105-1307

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Form **W-4R**

Department of the Treasury
Internal Revenue Service

Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions

Give Form W-4R to the payer of your retirement payments.

OMB No. 1545-0074

2026

1a First name and middle initial	Last name	1b Social security number

Address

City or town, state, and ZIP code

Your withholding rate is determined by the type of payment you will receive.

- For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100% on line 2. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its territories.
- For an eligible rollover distribution, the default withholding rate is 20%. You can choose a rate greater than 20% by entering the rate on line 2. You may not choose a rate less than 20%.

See page 2 for more information.

2	Complete this line if you would like a rate of withholding that is different from the default withholding rate. See the instructions on page 2 and the Marginal Rate Tables below for additional information. Enter the rate as a whole number (no decimals)	**2**	%

Sign Here

Your signature (This form is not valid unless you sign it.) **Date**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about any future developments related to Form W-4R, such as legislation enacted after it was published, go to *www.irs.gov/FormW4R*.

Purpose of form. Complete Form W-4R to have payers withhold the correct amount of federal income tax from your nonperiodic payment or eligible rollover distribution from an employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See page 2 for the rules and options that are available for each type of payment. Don't use Form W-4R for periodic payments (payments made in installments at regular intervals over a period of more than 1 year) from these plans or arrangements. Instead, use Form W-4P, Withholding Certificate for Periodic Pension or Annuity Payments. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

Caution: If you have too little tax withheld, you will generally owe tax when you file your tax return and may owe a penalty unless you make timely payments of estimated tax. If too much tax is withheld, you will generally be due a refund when you file your tax return. Your withholding choice (or an election not to have withholding on a nonperiodic payment) will generally apply to any future payment from the same plan or IRA. Submit a new Form W-4R if you want to change your election.

2026 Marginal Rate Tables

You may use these tables to help you select the appropriate withholding rate for this payment or distribution. Add your income from all sources and use the column that matches your filing status to find the corresponding rate of withholding. See page 2 for more information on how to use this table.

Single or Married filing separately		**Married filing jointly or Qualifying surviving spouse**		**Head of household**	
Total income over—	**Tax rate for every dollar more**	*Total income over—*	**Tax rate for every dollar more**	*Total income over—*	**Tax rate for every dollar more**
$0	**0%**	$0	**0%**	$0	**0%**
16,100	**10%**	32,200	**10%**	24,150	**10%**
28,500	**12%**	57,000	**12%**	41,850	**12%**
66,500	**22%**	133,000	**22%**	91,600	**22%**
121,800	**24%**	243,600	**24%**	129,850	**24%**
217,875	**32%**	435,750	**32%**	225,900	**32%**
272,325	**35%**	544,650	**35%**	280,350	**35%**
656,700*	**37%**	800,900	**37%**	664,750	**37%**

*If married filing separately, use $400,450 instead for this 37% rate.

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

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.