

FORM Publicly Traded Products

Please Print or Type

This form should be used to establish and modify Systematic Withdrawals.

This form should be reviewed and completed with the assistance of a financial or tax advisor.

Forward To: First Trust Retirement, c/o SS&C

Regular Mail Overnight Delivery

ATTN: FTR – Public Traded Mail Stop: FTR – Public Traded

PO Box 219261 430 West 7th Street Kansas City, MO 64121-9261 Suite 219261

855-387-3847 Kansas City, MO 64105-1407

Step 1: IKA OWNER INFORMATION			
IRA Owner Name	Social Security Number	Account Number	
	2222. 2000		
Address	City / State / Zip	Phone Number	
Step 2: SYSTEMATIC WITHDRAWAL INSTRUCTIONS			
Establish New Systematic Withdrawal	☐ Modify Existing Systematic Withdrawal	☐ Discontinue Existing Systematic Withdrawal	
I direct First Trust Retirement, Custodian, to set up my Systematic Withdrawal as follows: Withdrawal Option Amount Start Month Frequency Withdrawal Date(s)			
Undirected Cash** \$	OR	□ sa □ a	
☐ Custodian Calc	ulated RMD		
Amount – Specify a designated amount or request custodian to calculate RMD amount Start Month – Month in which Systematic Withdrawal will begin (Must be at least one month past date form is delivered)			
Frequency – Monthly (Jan, Feb, Mar, etc.), Quarterly (Mar, Jun, Sept, Dec), Semi –Annually (Jun, Dec), Annually (Once per year)			
Withdrawal Date(s) – Select a date between 1-28. (If 29, 30, or 31 are chosen, 28 will be used.) Any withdrawals that occur over a weekend or non-business day will be processed the following business day. If Withdrawal Date is not provided, it will default to the 15 th of designated frequency.			
*The interest rate and annual percentage yield may change at any time. Interest will be compounded and credited on the last day of each calendar month. The daily balance method is used to calculate the interest on cash in the account. The bank deposit is insured up to applicable FDIC limits.			
Step 3: REASON FOR WITHDRAWAL INSTRUCTIONS			
☐ Traditional IRA ☐ Roth	IRA SEP IRA	☐ Beneficiary IRA	
Premature Distribution (Account holder must be under age 59 ½ - IRS penalty applies unless rollover occurs within 60 days)			
Premature Exempt Distribution (Including Permanent Disability, SEPP, and other identified 72 (t) qualified exceptions. Documentary evidence			
required)			
Normal Distribution (Account holder age 59 ½ or over)			
Death Distribution (If not already in a Beneficiary IRA; Must provide a certified copy of the account holder's Death Certificate)			
Step 4: RMD INSTRUCTIONS	CED IDA	D. Barraffelarra IBA	
☐ Traditional IRA Step 5: BENEFICIARY IRA RMD OPTIONS (CONTINU	☐ SEP IRA	□ Beneficiary IRA	
Required minimum distributions (RMDs) HAD NOT started for the original/deceased account holder.			
Please select one of the following options:			
Lump Sum (I wish to receive the distribution in a single lump-sum payment)			
+5 years (I wish to take distributions over a five-year period)			
☐ Life (I wish to take distributions based on my life expectancy)			
If you are the spouse of the original account owner, you may elect to have your life expectancy recalculated each year. Please select one:			
Recalculated each year			
☐ Not recalculated each year			
Required minimum distributions (RMDs) HAD started for the original/deceased account holder.			
Please select one of the following options:			
I wish to take distributions based on the oldest beneficiary's life expectancy. (If you are the oldest beneficiary, your LE will be used)			
☐ I wish to continue taking distributions in the manner elected by the original account owner			



SYSTEMATIC WITHDRAWAL REQUEST FORM

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Step 5: BENEFICIARY IRA RMD OPTIONS (CONTINU	ED FROM PAGE 1)		
Required information for Beneficiary RMD Calculati	on:		
Name of prior participant/account owner:			
Date of death of prior participant/account own	ner:		
Date of birth of prior participant/account own	er:		
Surviving spouse. If a surviving spouse, register my	IRA:		
As a Beneficiary IRA			
☐ In my name (not a Beneficiary IRA)			
A non-spousal beneficiary (for non-spousal benefici	ary, account will be registered as a Beneficiary IRA	<u>).</u>	
I am the oldest beneficiary of this IRA.			
☐ I am not the oldest beneficiary of this IRA	١.		
Date of Birth of Oldest Beneficiary:			
Story C. DAVINGENIA NACTILION			
Step 6: PAYMENT METHOD			
Mail check to the address currently on file. Electronically transfer funds by ACH:	ant Bardina lastrustiana an fila	Navy hards in the street of Consulate halous actions	
Now Book Instructions		New bank instructions. (Complete below section)	
Checking (Voided of	Check Required) Savings (Letter	on Bank Letterhead Required)	
Bank Name	Routing ABA Number (9-digits)	Bank Account Number	
Bank Account Registration (Include all registration nam	nes)		
Only one bank account may be on file.	• Temporary and Starter checks are not acceptable.		
 Signature of bank account owner must be same as IRA holde. Step 7: INCOME TAX WITHHOLDING (THIS SECTION M 		head signed by a branch manager outlining all above information.	
In compliance with the "Tax Equity and Fiscal Responsi	· · · · · · · · · · · · · · · · · · ·	•	
distributions. You may exercise your right to elect not	to have funds withheld. This election will be in effect ι	until you change it. You may change or revoke this election	
at any time and as often as you wish. You may elect out of this withholding by checking the appropriate box below. Please note that penalties may be incurred under			
the estimated tax rules if your withholding and/or estimated tax payments are not sufficient.			
If no election is made, First Trust Retirement is required to withhold 10% Federal Income Tax. State Income Taxes cannot be withheld from your distribution.			
П s			
Do not withhold taxes.			
Withhold % from	n the amount withdrawn (must be at least 10%).		
Step 8: SIGNATURE REQUIRED			
I hereby acknowledge that this agreement is between the IRA Owner named in Step 1 and the Custodian and that Product and its affiliates (i) shall have no obligations or liability under this agreement or for any transactions executed in connection herewith; (ii) shall have no responsibility, discretion or involvement in evaluating or selecting assets or investments; and (iii) shall not be deemed to be a "fiduciary" as defined in the Employee			
Retirement Income Security Act of 1974, as amended, and/or Section 4975 of the Internal Revenue Code of 1986, as amended, with respect to any assets or property of the IRA account.			
IRA O	wner Signature	Date	
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