

SYSTEMATIC WITHDRAWAL REQUEST FORM

Guggenheim Investments

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
PO Box 219383 Mail Stop: Guggenheim
Kansas City, MO 64121-9383 430 West 7th Street
855-387-3847 Kansas City, MO 64105-1407

Step 1: IRA OWNER INFORMATION			
IRA Owner Name	Social Security Number	Account Number	
	,		
Address	City / State / Zip	Phone Number	
Step 2: SYSTEMATIC WITHDRAWAL INSTRUCTIONS	City / State / Zip	Filotie Number	
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		quency Withdrawal Date(s)	
Undirected Cash** \$	OR 🗆 M 🗆 Q	□ 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 defaul	t to the 15 th of designated frequency.		
*The interest rate and annual percentage yield may change at a	any time. Interest will be compounded and credited on the last do	ay 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		□ p (; , ,p,	
☐ Traditional IRA ☐ Roth		☐ 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)	24		
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	☐ Beneficiary IRA	
☐ Traditional IRA Step 5: BENEFICIARY IRA RMD OPTIONS (CONTINU	☐ SEP IRA ED ON PAGE 2)	☐ Beneficiary IRA	
		er	
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			



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Step 5: BENEFICIARY IRA RMD OPTIONS (CONTINU	ED FROM PAGE 1)		
Required information for Beneficiary RMD Calculati	<u>on:</u>		
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	.		
Date of Birth of Oldest Beneficiary:			
Step 6: PAYMENT METHOD			
Mail check to the address currently on file. Electronically transfer funds by ACH:			
· Cull	ent Banking Instructions on file	New bank instructions. (Complete below section)	
New Bank Instructions Checking (Voided 0	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 • 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 holder	. ,	head signed by a branch manager outlining all above information.	
Step 7: INCOME TAX WITHHOLDING (THIS SECTION M	• • • • • • • • • • • • • • • • • • • •	•	
In compliance with the "Tax Equity and Fiscal Responsi		unred to withhold Federal income Tax from all IKA until you change it. You may change or revoke this election	
, , ,		below. Please note that penalties may be incurred under	
the estimated tax rules if your withholding and/or estimated tax rules if your withholding and your wi	mated tax payments are not sufficient.	·	
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If no election is made, First Trust Retirement is requir	ed to withhold 10% Federal Income Tax. State Incom	le Taxes cannot be withheld from your distribution.	
Do not withhold taxes.			
Withhold % from	m 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	