

INCOME DISTRIBUTION REQUEST FORM Moody National

Please Print or Type IMPORTANT INFORMATION

Each alternative investment has specific rules around income distributions, please review the terms and conditions outlined within the specific product prospectus for details.

This form is not for withdrawal requests.

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

Regular Mail Overnight Delivery
PO Box 219280 Mail Stop: Moody National
Kansas City, MO 64121-9280 430 West 7th Street
855-387-3847 Kansas City, MO 64105-1407

Step 1: IKA OWNER INFORMATION			
IRA Owner Name	Social Security Number	Date of Birth	FTR Account Number (If Applicable)
Address	City/State/Zip	Email	Phone Number
Step 2: PRODUCT SELECTION			
Moody National REIT II*			
Please review their prospectuses for fr	onal are processed in accordance with their re equency and availability details or call Mood ing First Trust Retirement to pay out my inc	ly National at 888-457-2538.	nd are subject to availability. distribution type in step 3 and payment method in
To participate in the Distribution Rein Step 3: INCOME DISTRIBUTION INSTR	nvestment Plan (DRP), it must be indicated of	on the applicable Subscription Ag	greement or product sponsor update form.
☐ Traditional IRA	☐ Roth IRA	SEP IRA	☐ Beneficiary IRA
Premature Distribution (Accoun	nt holder must be under age 59 ½ - IRS penal		
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)			
	Please note that if requesting an IRA Trusto	• •	•
	Medallion Signature Guarantee stamp may l	• •	
Step 4: PAYMENT METHOD			
Taxable Options:		1.5 11 1 1 11 20 1	
Mail check to the address currently on file (Signature Guarantee required if address changed within 30 days.)			
Electronically transfer fund	s by ACH to my bank (Voided check is require	ed for new instructions. Signature	Guarantee required if adding bank within 30 days,
Mail check to a third party	listed below.		
Non-Taxable Options:			
Deposit cash into my Undirected Cash Account			
Transfer my income distrib	utions to the custodian listed below as a Tru	stee to Trustee Transfer	
			todian OR must include the custodian's signed
Letter of Acceptance. This	custodial sign off is only required at time of	distribution establishment. Plea	se note that this form cannot be notarized.
			1
Payee or Account Name			
Account Number			
Street Address			
2227.144.233			
City, State & ZIP		Sig	gnature Guarantee



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Step 5: INCOME TAX WITHHOLDING (THIS SECTION MUST BE COMPLETED*) (Form W-4/OMB No. 1545-0415)

* Except for a distribution from a Roth IRA or for a return of excess contribution.

In compliance with the "Tax Equity and Fiscal Responsibility Act," First Trust Retirement, as custodian, is required to withhold Federal Income Tax from all IRA distributions. You may exercise your right to elect not to have funds withheld. This election will be in effect 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.

Do not withhold taxes.

Withhold ________ % from the amount withdrawn (must be at least 10%).

Step 6: SIGNATURE REQUIRED

By signing below, I certify that the information I have provided is true and correct, and I authorize the Custodian to distribute my IRA as instructed above.

IRA Owner Signature(or other authorized person*)

Date

IRA Owner Signature(or other authorized person*)
* If signing as Power of Attorney, valid POA documents must be included.

6/2019