

LIQUIDATION REQUEST FORM Monogram Residential Trust, Inc.

Please Print or Type

IMPORTANT INFORMATION:

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

Forward To: First Trust Retirement, c/o DST Systems, Inc.

<u>Regular Mail</u> <u>Overnight Delivery</u>

PO Box 219722 Kansas City, MO 64121- 9722 855-387-3847 Mail Stop: Monogram 430 West 7th Street Ste 219722 Kansas City, MO 64105-1407

| Ste | p 1: IRA OWNER INFORMATION | | | | | | |
|--|---|-------------------------------|---------------|-----|--------------------------------|--|--|
| | | | | | | | |
| | Name | Social Security Number | Date of Birth | | Account Number (if applicable) | | |
| | Street Address | City | State | Zip | Phone Number | | |
| Ste | p 2: IRA BENEFICIARY INFORMATION (Complete ON | ILY for a death distribution) | | | | | |
| | | | | | | | |
| | Name | Social Security Number | Date of Birth | _ | Account Number (if applicable) | | |
| | Street Address | City | State | Zip | Phone Number | | |
| | Step 3: DISTRIBUTION INSTRUCTIONS | | | , | | | |
| | ☐ Monogram Residential Trust, Inc.* ☐ Undirected Cash Account ** | | | | | | |
| | If your shares of Monogram Residential Trust, Inc. have already been sold over the phone or in writing, and you wish to redeem the cash proceeds of that transaction, please select the "Morrill & Janes Bank and Trust NOW Account (Undirected Cash)" on this form to redeem the cash proceeds. Option 1. Please indicate one of the following options (Select payment method in Step 5): I wish to liquidate my entire account. I wish to make a liquidation of | | | | | | |
| | ** 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 4: REASON FOR DISTRIBUTION | | | | | | | |
| □ Do Not Distribute from IRA. Place proceeds into Undirected Cash Account (Proceed to Step 8) Withdrawal from a TRADITIONAL or SEP IRA □ Premature Distribution (Account holder must be under age 59 1/2 - 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 is required.) □ Normal Distribution (Account holder age 59 1/2 or over; includes Required Minimum Distributions) □ Death (If not already in a Beneficiary IRA: Must provide a certified copy of the account holder's Death Certificate; W-9 required) □ Return of Excess Contribution: For what year was the contribution made? □ Current Year □ Prior Year* | | | | | | | |
| | Excess Contribution Amount \$ Recharacterization: For what year was the contribution made? | | | | | | |

*Deadline to recharacterize a contribution or remove an excess contribution is the IRA Owner's tax filing deadline (for the tax year of the contribution), plus any

extensions including an automatic 6-month extension for those who file by the tax deadline.





LIQUIDATION REQUEST FORM Monogram Residential Trust, Inc.

| Withdrawal from a ROTH IRA Premature Distribution (Account holder must be under age 59 1/2 - IRS penalt Premature Exempt Distribution (Including Permanent Disability, SEPP, and oth Normal Distribution (Account holder age 59 1/2 or over) Death (If not already in a Beneficiary IRA: Must provide a certified copy of th Return of Excess Contribution: For what year was the contribution made? Excess Contribution Amount \$ Recharacterization: For what year was the contribution made? Current Ye Recharacterization Amount \$ IRA Trustee to Trustee transfer- Liquidate and move proceeds to NOW accoureceived). Please note that if requesting an IRA Trustee to Trustee transfer your paperwork. A Medallion Signature Guarantee stamp may be required on their to *Deadline to recharacterize a contribution or remove an excess contribution is the IRA of the state o | ther identified 72 (t) qualified exceptions. Documentary evidence is required.) the account holder's Death Certificate; W-9 required) Current Year Prior Year* that (Proceeds will remain in NOW account unless TOA paperwork is seed to contact the accepting custodian and complete their transfer (TOA) transfer form. |
|--|---|
| extensions including an automatic 6-month extension for those who file by the tax dead | |
| Step 5: PAYMENT METHOD | |
| Deposit cash into my Undirected Cash Account (Not a taxable distribution) Mail check to the address currently on file (Signature Guarantee required if a Electronically transfer funds by ACH to my bank ((Voided check is required. S Transfer in Kind my shares to my non-qualified account held outside of FTR; Transfer in Kind my shares to my IRA; Existing Account Number Create New Account (Must complete an IRA Application to create a new Mail check to a third party listed below (This will be coded a taxable distribution for this payment method, the form must be signed and Signature Guarant Please note that this form cannot be notarized. | Signature Guarantee required if adding bank within 30 days) must include DTC delivery instructions. v account for Recharacterization or Roth Conversions) |
| Payee or Account Name | Account Number |
| Address | |
| Step 6: INCOME TAX WITHHOLDING (THIS SECTION MUST BE COMPLETED*) (Form W-4P/ON | MB 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 distributions. You may exercise your right to elect not to have funds withheld. This elect at any time and as often as you wish. You may elect out of this withholding by checking required to withhold 10% Federal Income Tax. State Income Taxes cannot be withhele estimated tax rules if your withholding and/or estimated tax payments are not sufficient transfers to non-qualified accounts. | ction will be in effect until you change it. You may change or revoke this election g the appropriate box below. If no election is made, First Trust Retirement is Id from your distribution. Please note that penalties may be incurred under the |
| \square Withhold% from the amount withdrawn (must be at least 10%). | |
| Step 7: SUBSTITUTE W-9: I HEREBY CERTIFY under penalty of perjury (i) that the taxpayer identification number sh subject to backup withholding either because I have not been notified that I am subject or the Internal Revenue Service has notified me that I am no longer subject to backup w Step 8: SIGNATURE | to backup withholding as a result of a failure to report all interest or distributions, |
| By signing below, I certify that the information I have provided is true and correct, and | I I authorize the Custodian to distribute my IRA as instructed above. |
| IRA Owner's Signature (or other authorized person) | Date |