

## IRA WITHDRAWAL/RMD FORM

**NexPoint** 

## **Please Print or Type**

This form should be used by the IRA owner or owner of a Beneficiary IRA to request distributions from the account.

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 
PO Box 219630 

First Trust Retirement, c/o SS&C

Overnight Delivery

Mail Stop: NexPoint Advisors

Kansas City, MO 64121-9630 855-387-3847 430 West 7th Street Kansas City, MO 64105-1407

Step 1: IRA OWNER INFORMATION				
		5 - 6 - 1 - 1 - 1		
IRA Owner Name/Beneficiary Name*	Social Security Number*	Date of Birth*	FTR Account Number (If Applicable)	
Address*	City/State/Zip*	Email	Phone Number*	
*If completing for a death distribution, please provide the				
Step 2: PRODUCT SELECTION	beneficiary injormation in the	s section. A certifica copy of	the Beath certificate is required.	
☐ NexPoint Real Estate Strategies * ☐	NexPoint Homes Trust, Inc.*		Undirected Cash Account**	
Nexpolit Real Estate Strategies	i Nexpoint Homes Trust, inc.		Ondirected Cash Account	
*Redemntions for NexPoint are processed in accordance wi	th their respective Share Reden	antion Programs and are sub	iect the availability. Please review the	
*Redemptions for NexPoint are processed in accordance with their respective Share Redemption Programs and are subject the availability. Please review the prospectuses for details or call NexPoint at 844-485-9167.				
prospectaces for actions or can recommend at a re-rest size.				
**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: ONE TIME WITHDRAWAL INSTRUCTIONS				
☐ Traditional IRA ☐ Roth IRA	☐ SEP IRA	□ Ве	neficiary IRA	
			omplete Designated Beneficiary Election Form)	
☐ Redeem ENTIRE account				
☐ Redeem PARTIAL amount of \$	or	shares from account		
Step 4: ONE TIME WITHDRAWAL DISTRIBUTION REASON				
Premature Distribution (Account holder must be under	er age 59 ½ - IRS penalty applie	s unless rollover occurs withi	in 60 days)	
Premature Exempt Distribution (Including Permanent Disability, SEPP, and other identified 72 (t) qualified exceptions.)				
☐ 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 Deat	h Certificate)	
Return of Excess Contribution Amount \$	*			
☐ Current Year ☐ Prior Year				
Recharacterization Amount \$	*			
Direct Roth IRA Conversion Amount \$				
☐ IRA Trustee to Trustee Transfer Liquidate and move p	roceeds to Undirected Cash acc	count (Proceeds will be depo	sited in Undirected Cash account until the	
TOA paperwork is received) Please note that if reque	esting an IRA Trustee transfer y	ou need to contact the acce	pting custodian and complete their	
transfer (TOA) paperwork. A Medallion Signature G	uarantee stamp may be requir	ed on their transfer form.		
*Deadline to recharacterize a contribution or remove an ex			the tax year of the contribution), plus any	
extensions including an automatic 6-month extension for t	hose who file by the tax deadlir	ne.		
Step 5: RMD INSTRUCTIONS				
☐ Traditional IRA	SEP IRA	☐ Beneficiary II		
		(Must Complete De	signated Beneficiary Election Form)	
☐ One-time (year) RMD for \$				
Custodian Calculated (year	) RMD (Not available for Benefi	iciary IRA)		
·	, into a analogic for Delicji			
Step 6: PAYMENT METHOD				
Non-Taxable Options:				
Deposit cash into my Undirected Cash Account				
☐ Transfer in Kind my IRA; Existing Account Number				
☐ Create New Account (Must complete an IRA Application to create a new account for Recharacterization or Roth Conversions)				



## IRA WITHDRAWAL/RMD FORM NexPoint

Taxable Options:	
Transfer in Kind my shares to my non-qualified account; Existing Account Nur  Create New Account (Submit new subscription document if non-qualified)	d account does not exist. See product prospectus for requirements.)
Mail check to the address currently on file (Signature Guarantee required if a	ddress changed within 30 days.)
	new instructions. Signature Guarantee required if adding bank within 30 days)
	Guaranteed for this payment method. Please note that this form cannot be
notarized.	
Payee or Account Name	
Account Number	
Street Address	
City, State & ZIP	Signature Guarantee
City, State & ZIP  Step 7: INCOME TAX WITHHOLDING (THIS SECTION MUST BE COMPLETED*) (Form	<u> </u>
	m W-4/OMB No. 1545-0415)  ment, as custodian, is required to withhold Federal Income Tax from all IRA election will be in effect until you change it. You may change or revoke this g by checking the appropriate box below. Please note that penalties may be
* 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 Retire distributions. You may exercise your right to elect not to have funds withheld. This election at any time and as often as you wish. You may elect out of this withholding	m W-4/OMB No. 1545-0415)  ment, as custodian, is required to withhold Federal Income Tax from all IRA election will be in effect until you change it. You may change or revoke this g by checking the appropriate box below. Please note that penalties may be ayments are not sufficient.
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