	Account	Numl	oer			
Trans	saction ID					

Premiere Select® Retirement Plan

One-Time Distribution Request

Use this form to request a single distribution from your Premiere Select Retirement Plan Account or Retirement Plan Beneficiary Distribution Account, referred to as "PSRP Account" or "account," held through National Financial Services LLC ("NFS"). Type on screen or fill in using CAPITAL letters and black ink. Read the attached Customer Instructions and Terms and Conditions before completing this form.

Provide all information requested.	Participant or Beneficiary First Name	Middle Name	Last Name		
	Plan Name				
	Plan Administrator				
	☐ Money Purchase Plan	☐ Profit Sharing Plan			
. Reason for	Distribution				
Check one.	 ☐ Attainment of age 59½ ☐ Plan termination ☐ Death of participant For Premi ☐ Termination of employment or ☐ Disability As defined by the Premi 	service	Plan – Beneficiary Distribution Account ent Plan	's only	
. Distributio	n Instructions				
	Future Process Date Optional				
Refer to instructions for further information.					
further information.	Date MM DD YYYY	your one-time distribut date, your Broker/Deal	on on this specified date. If you do not spe	ecify a future process	
turther information.	Date MM DD YYYY A. Partial Distribution in Cash	your one-time distribut date, your Broker/Deak procedures.	on on this specified date. If you do not spe	ecify a future process	
turther information.	☐ A. Partial Distribution in Cash	your one-time distribut date, your Broker/Deald procedures.	on on this specified date. If you do not spe er will execute your transaction request in a	ecify a future process accordance with standard	
further information.	□ A. Partial Distribution in Cash Be sure to consider the effect □ B. Partial Distribution In-Kind	your one-time distribut, date, your Broker/Deald procedures. It of any fees due that a	on on this specified date. If you do not spectr will execute your transaction request in a Amount \$	ecify a future process accordance with standard	
further information.	□ A. Partial Distribution in Cash Be sure to consider the effect □ B. Partial Distribution In-Kind	your one-time distribut, date, your Broker/Deald procedures. It of any fees due that a	on on this specified date. If you do not spectrum will execute your transaction request in a Amount s	ecify a future process accordance with standard	
further information.	Be sure to consider the effect B. Partial Distribution In-Kind Provide the security name(s)	your one-time distribut, date, your Broker/Deald procedures. It of any fees due that a	on on this specified date. If you do not spectrally will execute your transaction request in a Amount spectrally and the payment method to brokerage account to for the security position(s) to be discount.	ecify a future process accordance with standard decordance with standar	
further information.	Be sure to consider the effect B. Partial Distribution In-Kind Provide the security name(s) Investment Name	your one-time distribut, date, your Broker/Deald procedures. It of any fees due that a	on on this specified date. If you do not spectrally execute your transaction request in a Amount spectrally associated with the payment method the spectral position (s) to be dissection of the security position (s) the secu	ecify a future process accordance with standard decordance dec	

continued on next page

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3. Distribution Instructions continued ☐ **D. Direct Rollover** (Select one option below) In-Kind Direct Rollover of my entire account balance to my Premiere Select IRA (for plan participants or spouse beneficiaries ONLY) or my Premiere Select IRA-BDA as applicable Account Number In-Kind Direct Rollover of my entire account balance to my Premiere Select Retirement Plan Account Number Direct Rollover in Cash of the entire account balance to an outside Custodian/Trustee as follows: ☐ Direct rollover to an IRA (for plan participants or ☐ Direct rollover to an Inherited IRA spouse beneficiaries ONLY) ☐ Direct rollover to an Employer-Sponsored ☐ Qualified rollover contribution to a Roth IRA or Retirement Plan (not available to beneficiaries) Inherited Roth IRA Name of Trustee/Custodian Plan Account Number Attention Street Address Zip/Postal Code Trustee/Custodian Telephone Number **4. Payment Method** Choose one. Refer to instructions for default provisions if choices in this section are left blank.

check one and provide additional details, as applicable, in this section.	☐ A. Check Distribution ☐ B. Electronic Funds Transfer (EFT)	□ C. Bank Wire□ D. Distribution to a Nonretiren	nent Account (via Journal)
	A. Check Distribution Choose 1st Party	Check or 3rd Party Check and provide	additional details as applicable.
	1st Party Check Paid and mailed to n	name and mailing address on record.	
Check one, ▶ if applicable.	☐ Use standing instructions on file	Line Number	If you have multiple standing instructions, obtain the line number
п аррпсавте.	OR		from your investment representative.
	Additional Information Not applic	cable when using standing instructions.	
Information provided in the Memo field will print on the check but will	Memo maximum 30 characters		
not appear visible in the window of the envelope.	Check Stub Information maximum 100 characters		

continued on next page

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	☐ 3rd Party Check Paid and/or mailed	to an alternate	name(s) an	d/or address.			
Check one. ▶	Use standing instructions on file	Line Number				have multiple standing ctions, obtain the line number	
	OR					your investment representative.	
	Alternate Instructions Not application	able when using	g standing	instructions.			
Avoid any account	Payee						
number or SSN that compromises a customer's							
identity. If needed, use the Memo and Check	Attention maximum 32 characters total including "At	tn:"	OB	Care of maximum 32 characters		total including "C/O"	
Stub Information fields.	Attn: C/O						
	Audiess						
	City			State/Province	Ž	Zip/Postal Code	
Optional for One-Time Check Distributions ONLY. Information provided in	Memo maximum 30 characters						
the Memo field will print on the check but will not appear visible in the window of the envelope.	Check Stub Information maximum 100 characters						
imaen er ane enreiepei	Your distribution check will be sent via re	gular mail unle:	ss you che	ck this box an	d provi	de overnight mail instructions.	
	Overnight Mail Optional.						
	Carrier Name					Carrier Account Number	
Specify overnight carrier and billing account							
number.	Carrier Address required for UPS only						
	B. Electronic Funds Transfer (EFT) Cho	ose 1st Party El	T or 3rd P	arty EFT and	provide	e additional details as applicable	
	When using EFT, allow 2-3 business days credit union.	after the date	the distribu	ution is proce	ssed fo	r funds to reach your bank or	
Check one.	1st Party EFT The account owner is a To transfer funds via 1st Party EFT, yo				on you	ur account.	

Line N	umb	er				

If you have multiple standing instructions, obtain the line number from your investment representative.

☐ 3rd Party EFT The account owner is not an owner of the bank account.

Use standing instructions on file	Line Number
S	

If you have multiple standing instructions, obtain the line number from your investment representative.

OR

☐ Alternate Instructions

Not applicable when using standing instructions.

Check one. ▶

Savings ☐ Checking

Obtain the correct ▶ routing number from the bank. Different routing numbers may be used for Bank Wires and EFT transactions.

Bank Routing Number	Bank Name	
Bank Account Number		Payee Name(s) Exactly as on Bank Account

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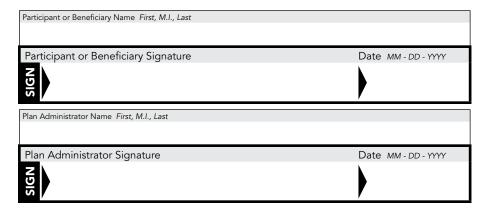
4. Payment Method continued

	C. Bank Wire					
	A wire fee of \$15 will be deducted from instructions for more information.	om your distribution	on amount and will im	npact you	r tax reporting. Refer to the	
Check one.	\square Use standing instructions on file	Line Number			nave multiple standing	
					tions, obtain the line number from vestment representative.	
	OR])		
	☐ Alternate Instructions Not applica	able when using s	tanding instructions.			
Obtain the correct routing	Bank Routing Number	Bank Name				
number from the bank. Different routing numbers						
may be used for Bank Wires	Bank Account Number Final destination		Payee Nam	e(s) Exactly a	as on Bank Account	
and EFT transactions.						
	Payee Address					
	City		State/Provi	nce	Zip/Postal Code	
Use to provide an additional	Details					
message to receiving bank.						
Use for wiring through an	Further Credit Account Number		Further Cre	dit Name		
intermediary bank.						
If account is outside 1	SWIFT Code		Destination	Country		
the U.S., provide this						
information.	D. Distribution to a Nonretirement	Account	L			
	D. Distribution to a Nonrectivement	Account				
		i: Ni i		If vo	ou have multiple standing	
	Use standing instructions on file	Line Number		instr	ructions, obtain the line number	
				from	n your investment representative.	
	OR					
		t: Account Number				
	☐ Distribute to the following accoun	Account Number	er .			
F Tov \\/:+bb.	aldina Elastiana					
5. Tax Within	olding Elections					
Complete this section on	ly if the account owner is a U.S. person	(including a U.S. ı	resident alien). If you	are reque	sting a direct rollover of	
your PSRP account, do no distribution only See the	ot complete this section as withholding Notice of Withholding section in the	will not apply to t attached Custon	his distribution. Your ner Instructions and	withholdir Terms an	ng election will apply to this d Conditions.	
= = = = = = = = = = = = = = = = = = =	age cannot exceed 100%.	actached Gaston	ner motraetions and	icinis an	a contactions.	
·	Federal		State			
Check one in each column.	Do NOT withhold federal taxes			ıld state t	axes unless required by law	
The state of residence	☐ Withhold federal taxes at the rate	of:			, -	
in the legal address on this PSRP Account will	Withinoid lederal taxes at the rate	. 01.	☐ Withhold state taxes at the minimum rate☐ Withhold state taxes at the rate of:			
determine the state income tax withholding	Percentage Minimum 10%, maxi	mum 100% if the	Percentage A	1 Jaximum 1	00%. Whole numbers, no dollar	
requirements for your	distributions are not	rollover eligible.	a	mounts. If	the percentage rate entered is	
distributions.	.0% distributions are rolls Whole numbers, no	over eligible.	.076 re		ur state's minimum withholding ts, your state's minimum will be	
	vviiole numbers, no	aonar amounts.	N	mannela.		

6. Signatures and Dates Form cannot be processed without signatures and dates.

By signing below, you:

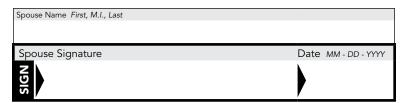
- Certify that you have carefully read, fully understand, and agree to comply with, the Customer Instructions and Terms and Conditions, including the Notice of Withholding attached to this Premiere Select Retirement Plan One-Time Distribution Request.
- Certify that the information supplied on this form is complete and accurate.
- Certify that you understand the reason for distribution options applicable to you (or to the PSRP Account beneficiary or beneficiaries) and you have requested a reason for distribution option that is consistent with your status (or the PSRP Account beneficiary's status, if applicable).
- Confirm, if you are not a U.S. person (including a resident alien individual), you have previously submitted IRS Form W-8BEN.
- Acknowledge receipt of the Special Tax Notice regarding the mandatory 20% federal income tax withholding.
- Acknowledge, if requesting distributions via EFT, that NFS cannot verify the account registration at the receiving institution.
 By signing below, you and the Plan Administrator:
- Certify that this distribution plan is being made pursuant to the Premiere Select Retirement Plan and Trust Agreement.
- Indemnify the Trustee of your PSRP Account and NFS and their agent(s), successors, affiliates, and employees from any liability in the event that you fail to meet the IRS requirements regarding distributions from your Premiere Select Retirement Plan Account or Retirement Plan Beneficiary Distribution Account, as applicable.



7. Spousal Consent For PSRP Participant Accounts ONLY. Notarized signature of spouse is required for ALL married participants.

By signing below, you:

- Consent to the distributions indicated on this form.
- Acknowledge that you are giving up your right to receive a payment benefit that would otherwise be payable to you.



NOTABY STAMB OR SEAL

National Financial Services LLC, Member NYSE, SIPC

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Premiere Select® Retirement Plan One-Time Distribution Request

Customer Instructions and Terms and Conditions

The attached Premiere Select Retirement Plan One-Time Distribution Request form ("form") should be used to request one-time distributions from your Premiere Select Retirement Plan Account ("PSRP Participant Account") or Premiere Select Retirement Plan Beneficiary Distribution Account ("PSRP-BDA" together with PSRP Participant Account, "PSRP Account"), to change an existing one-time distribution plan, or to delete an existing one-time distribution plan. If you wish to request one-time distributions from more than one PSRP Account, you must complete a separate form for each PSRP Account.

Please read these Customer Instructions and Terms and Conditions carefully before completing the attached form. You are responsible for complying with IRS rules governing retirement plan distributions, including required minimum distributions ("RMDs"). If you fail to meet any IRS requirements regulating retirement plan distributions, you may be subject to tax penalties. If you have any questions regarding your specific situation, please consult with your tax advisor.

Please read the attached Special Tax Notice for more information on the tax consequences of certain plan distributions/payments.

In general, distributions to married participants from all Money Purchase Plans and certain Profit Sharing Plans must be made in the form of a Qualified Joint and Survivor Annuity ("QJSA"), or if a participant dies before distributions under the Plan have begun, in the form of a Qualified Pre-Retirement Survivor Annuity ("QPSA"), unless the participant's spouse waives the annuity requirements in writing. Please consult your tax advisor for more information.

If this distribution is being made from an inherited Money Purchase Plan account, then the distribution options outlined below are only available if the participant elected out of the QJSA or QPSA and, if married, obtained written spousal consent to the waiver. Please contact the Plan Administrator to determine if any waivers were made. If the plan participant was unmarried, then the QJSA/QPSA requirements do not apply.

If the distribution is being made from an inherited Profit Sharing Plan account, then the QJSA/QPSA requirements do not apply if both of the following are met: (1) the plan participant elected not to receive distributions in the form of a life annuity, (2) the plan participant's spouse takes the distribution within 90 days following the date of the participant's death.

Upon depletion of all assets in your PSRP Account, a \$125 termination fee and a final year annual maintenance fee, if applicable, as described in your Premiere Select Retirement Plan Account Application or in some other manner acceptable to the Trustee of your PSRP Account, Fidelity Management Trust Company ("Trustee"), if applicable, will be collected from the final distribution amount. If your one-time distribution plan results in an account balance that is less than the amount of any fees due, which include the termination fee and the annual maintenance fee, for a particular year, NFS may instead process a full distribution of your entire account balance and collect the applicable fees at that time. Please note that this could result in a payment amount that is less than the amount requested due to the payment of the applicable fees. In addition, your PSRP Account may be closed.

If you have any questions, please consult your Broker, Financial Advisor, or Investment Professional ("investment representative").

Write your account number in the boxes in the upper right-hand corner of the form.

1. Plan Participant or Beneficiary

Please provide the name and Social Security number of the participant or beneficiary. Please provide the name of the Plan and Plan Administrator and indicate the plan type. If you have both a Money Purchase and a Profit Sharing Plan, you must complete a separate one-time distribution request form for each plan type.

2. Reason for Distribution

Please indicate the reason for this distribution, choosing only one. Distributions from a PSRP Account are only permitted when a participant attains age 59½, if the plan is terminated, due to death of participant if the PRSP Account is a beneficiary distribution account, termination of employment or service, or disability as defined by the Premiere Select Retirement Plan. If one of these distributable events does not occur, then the distribution cannot be processed. Distributions for any other reasons can result in plan disqualification.

If you are a participant and are under age 59½ and you request a distribution, your distribution will be taxed as ordinary income and may also be subject to a 10% early distribution penalty. Please consult your tax advisor for details.

If you wish to take death distributions from inherited Premiere Select Retirement Plan assets, you must first transfer the assets to a PSRP-BDA, and then take the death distributions from the PSRP-BDA. If you wish to request a transfer pursuant to a divorce of the Premiere Select Retirement Plan participant, do not complete this form. Contact your investment representative for additional instructions.

3. Distribution Instructions

Future Process Date - Optional

You may specify a future process date for this distribution request (available for distributions in cash ONLY). For partial distributions, the future process date can be up to six months from the date the request is submitted. Full distributions are limited to seven business days from the date the request is submitted.

Note: The future process date cannot cross years; and for individuals who are under age 59½, it cannot be the date you turn age 59½ or beyond.

Choose one of the 4 options listed.

Option A. Partial Distribution in Cash – The distribution will be paid from the balance in your core account. Please provide a specific gross dollar amount to be distributed and select one payment method in Section 5

Option B. Partial Distribution In-Kind* – Please provide the security name(s) and share/unit amount(s) to be re-registered into your non-retirement brokerage account and provide the account number in Section 5A. If more space for investment information is needed, please list the information requested on the form along with your name, account number and Tax Identification/Social Security number on a separate sheet of paper, sign and date it, and attach it to the form.

Option C. Full Distribution* – (Distribution of your entire PSRP Account balance) Please select the appropriate payment method(s) in Section 5. Distributions made in cash will be made from your core account. It is your responsibility to ensure there are sufficient funds available in the core account to process the distribution. If there are insufficient funds available in the core account, the distribution will not be processed. If you are requesting all or a portion of your full distribution be made in-kind, provide your non-retirement brokerage account number in Section 5A.

Option D. Direct Rollover – Required minimum distributions, after tax contributions and certain substantially equal periodic payments are not eligible for rollover. If the distribution is to be rolled over to a Premiere Select IRA (only if you are the plan participant or if you are a spouse beneficiary) or Premiere Select IRA-BDA, or is for a qualified rollover contribution to a Premiere Select Roth IRA (only if you are the plan participant or if you are a spouse beneficiary) or Roth IRA-BDA, please provide your account number or attach a Premiere Select IRA Application to establish a new account. To roll over assets from your PSRP account to an IRA/Inherited IRA held by another Custodian or to another employer-sponsored retirement plan or for a qualified rollover contribution to a Roth IRA or Inherited Roth IRA held by another Custodian, you must provide the name of the Custodian or Trustee, as applicable.

* Note: Certain securities may only be issued in specified denominations.

4. Payment Method

If no payment method is selected, your cash distributions will be made by check and sent to your mailing address of record (the first option described below).

A. Check Distribution

1st Party Check. Check will be paid and mailed to the name and mailing address of record. If you wish to use previously provided standing instructions, check the appropriate box.

3rd Party Check. If you want a check paid and/or mailed to a payee and/or address other than the mailing address of record, check this box. You may choose to use standing instructions already on file or you may provide Alternate Instructions for just this one distribution or plan. Note that Alternate Instructions will not be added to your account for use in any future distribution requests.

B. Electronic Funds Transfer (EFT)

1st Party EFT. If you would like the distributions to be deposited directly to your individually owned bank account (the account owner is an owner of the bank account), check this box.

3rd Party EFT. If you would like the distributions to be deposited to your joint bank account or a third-party bank account, check this box.

If you would like the distributions to be deposited directly to your bank via EFT, you must have EFT instructions on your account. If the account is not currently set up for standing EFT, a standing instructions form must be completed to establish the EFT instructions. **Note:** EFT instructions may take 4–5 business days to become active. Business days are Monday through Friday. Bank and New York Stock Exchange holidays are not included. If you have multiple sets of standing instructions, provide the line number of the specific set of instructions, as it pertains to this situation. The line number can be obtained from your investment representative.

C. Bank Wire

In order to send a distribution via Bank Wire, the recipient institution must be a member of the Federal Reserve System. A wire processing fee of \$15 will be deducted from the distribution amount indicated on this form, and will affect your reported distribution amount. For example, if you request a distribution of \$1,000, and you do not select the Gross Up option, both the distribution amount wired to your bank account and the distribution amount reported on IRS Form 1099-R will be \$985. The receiving bank may also charge a fee for the receipt of the Bank Wire.

D. Distribution to a Nonretirement Account (via Journal)

If you want cash or securities distributed in-kind to a nonretirement account, provide the nonretirement account number. An application must be completed to establish a new nonretirement brokerage account.

5. Notice of Withholding

Read carefully before completing the Tax Withholding Elections section of the form.

20% Withholding—IRS regulations require federal income tax withholding at the rate of 20% from your Premiere Select Retirement Plan distributions that are eligible to be rolled over if the distributions are not directly rolled over to another eligible retirement plan or to an IRA. Generally, distributions that are not subject to this withholding include: distributions of certain substantially equal one-time payments made over ten or more years and required minimum distributions. Refer to the Special Tax Notice for additional information.

10% Withholding—If the distribution is not considered an eligible rollover distribution, the mandatory 20% withholding does not apply. Instead, your distributions are subject to federal income tax withholding at a rate of 10% unless you elect not to have withholding apply. Withholding will apply to the gross amount of each distribution, even if you have made nondeductible contributions. Moreover, failure to provide a U.S. residential address will result in 10% withholding on the distribution proceeds even if you have elected not to have tax withheld (an IRS requirement). A Post Office Box does not qualify as a residential address.

If federal income tax is withheld from your distribution, state income taxes may also be withheld. Your state of residence will determine your state income tax withholding requirements, if any. Refer to the list below. Your state of residence is determined by your legal address of record provided for your PSRP Account. The information provided is general in nature and should not be considered legal or tax advice.

Whether or not you elect to have federal and, if applicable, state income tax withheld, you are still responsible for the full payment of federal income tax, any state tax or local taxes, and any penalties that may apply to your distribution(s).

Whether or not you elect to have withholding apply (by indicating so on your tax withholding election form), you may be responsible for payment of estimated taxes. You may incur penalties under the IRS and applicable state tax rules if your estimated tax payments are not sufficient.

Withholding Options

Withholding Options	
State of residence	State tax withholding options
AK, FL, HI, NH, NV, SD, TN, TX, WA, WY	No state tax withholding is available (even if your state has income tax).
AR, IA, KS, MA, ME,* NE, OK, PR,† VA, VT	• If you choose federal withholding, you will also get state withholding at your state's minimum withholding rate or an amount greater as specified by you.
	 If you do NOT choose federal withholding, state withholding is voluntary.
	• If you have state withholding, you can request a higher rate than your state's minimum but not a lower rate.
CA, DE, GA, [†] NC, OR	• If you choose federal withholding, you will also get state withholding at your state's minimum withholding rate unless you request otherwise.
	 If you do NOT choose federal withholding, state withholding is voluntary.
	• If you have state withholding, you can request a higher rate than your state's minimum but not a lower rate.
DC Only applicable if taking a full distribution of entire account balance.	• If you are taking distribution of your entire account balance and not directly rolling that amount over to another eligible retirement account, DC requires that a minimum amount be withheld from the taxable portion of the distribution, whether or not federal income tax is withheld. In that case, you must elect to have the minimum DC income tax amount withheld by completing the Tax Withholding section.
	• If your entire distribution amount has already been taxed (for instance, only after-tax or nondeductible contributions were made and you have no pretax earnings), you may be eligible to elect any of the withholding options.
	• If you wish to take a distribution of both taxable and nontaxable amounts, you must complete a separate distribution request form for each and complete the Tax Withholding section of the forms, as appropriate.
ME [†] , MS	• If you choose federal withholding, you will also get state withholding at your state's minimum withholding rate unless you request otherwise.
	• If you do NOT choose federal withholding, state withholding will occur unless you request otherwise.
	• If you have state withholding, you can request a higher rate than your state's minimum but not a lower rate.

Withholding Options

State of residence	State tax withholding options
CT, MI	• CT and MI generally require state income tax of at least your state's minimum requirements regardless of whether or not federal income tax is withheld.
	• Tax withholding is not required if you meet certain requirements governing pension and retirement benefits. Reference the CT or MI W-4P Form for additional information about calculating the amount to withhold from your distribution.
	• If you are subject to state tax withholding, you must elect state tax withholding of at least your state's minimum by completing the Tax Withholding section.
	• Contact your tax advisor or investment representative for additional information about CT or MI requirements.
ОН	• State tax withholding is voluntary. If you choose state withholding, you can choose a higher rate than your state's minimum but not a lower rate.
SC	• SC requires state withholding if you have not provided a Tax ID or if you have been notified of a name/Tax ID mismatch and have not resolved the issue. Otherwise, state tax withholding is voluntary and you can choose the rate you want (any whole number between 1% and 99% for Periodic plans, or up to 100% for One Time Distribution requests).
All other states (and DC if not taking a full distribution)	• State tax withholding is voluntary and you can choose the rate you want (any whole number between 1% and 99% for Periodic plans, or up to 100% for One Time Distribution requests).

^{*} When taking a single distribution

Important: State tax withholding rules can change, and the rules cited above may not reflect the current ruling of your state. Consult with your tax advisor or state taxing authority to obtain the most up-to-date information pertaining to your state.

6. Signatures and Dates

Section 6 must be signed by both the Participant or Beneficiary, as applicable, and the Plan Administrator.

Before signing the Premiere Select Retirement Plan One-Time Distribution Request, please carefully read the Premiere Select Retirement Plan and Trust Agreement, as well as all sections of the Premiere Select Retirement Plan One-Time Distribution Request and attached Customer Instructions and Terms and Conditions. Your one-time distribution request is part of a legal agreement between you, the Plan Administrator, and NFS and by signing in Section 6, as applicable, you are agreeing to be bound by the terms and conditions contained in the above-mentioned documents. Please also print the current date neatly in block letters in the space provided.

This tax information is for informational purposes only, and should not be considered legal or tax advice. Always consult a tax or legal professional before making financial decisions.

7. Spousal Consent

For PSRP Participant Accounts Only: Distributions to married participants from all Money Purchase Pension Plans and certain Profit Sharing Plans must be made in the form of a Qualified Joint and Survivor Annuity unless your spouse waives the right by providing spousal consent in Section 7.

Please note: The spouse's signature must be notarized. Please refer to Article 8 of the Premiere Select Retirement Plan and Trust Agreement for details. A participant may waive a qualified joint and survivor annuity contract, and a spouse may consent to such waiver, provided it is within 90 days before the first plan distribution.

Detach the completed distribution request form and return it to your investment representative.

Keep a copy of this form with the Customer Instructions and Terms and Conditions in your files.

[†] When taking periodic distributions