




NON-QUALIFIED ANNUITY/DEPOSIT AGREEMENT DISTRIBUTION REQUEST

This form is used to request a distribution from your PRCUA Non-Qualified Annuity or Deposit Agreement account. If you would like to transfer funds to another Non-Qualified Annuity or Deposit Agreement, please obtain the correct asset transfer form from your new custodian or trustee (do not use this form). For additional information, please contact us at ☎ 1-800-772-8632 or visit our website at 🌐 www.prcua.org.

 *Periodic distributions are processed within the first seven (7) business days of each month. One-time distributions will be processed within seven (7) business days of receipt of this completed form, and any required supporting documentation, at the PRCUA Home Office. This form can be used for only one (1) annuity.*

1. ACCOUNT INFORMATION

CERTIFICATE (POLICY) / ACCOUNT NUMBER

PLEASE PRINT IN THE BLOCKS WITH CAPITAL LETTERS

2. ANNUITANT / DEPOSITOR INFORMATION

FIRST (MI) LAST NAME / DEPOSITOR NAME

STREET ADDRESS / CITY, STATE ZIP CODE

HOME PHONE NUMBER

WORK PHONE NUMBER

SOCIAL SECURITY NUMBER / TIN

DATE OF BIRTH

(MONTH/DAY/YEAR)

3. DISTRIBUTION INSTRUCTIONS Choose only one

- Lump Sum Distribution
- Interest → Specific Amount: \$, , .
- For the first distribution, please include interest applied during the following period:
FROM / THRU / (MONTH/YEAR)

4. FREQUENCY OF DISTRIBUTION

- Monthly
- Quarterly
- Semi-Annually
- Annually
- One-Time
- Beginning month and year for the distribution(s): / (MONTH/YEAR)

5. TAX WITHHOLDING ELECTION Choose only one

- If you do not select a box below, you are deemed to elect 10% tax withholding.**
- I elect NOT to have federal income tax withholding. I understand that I am still liable for payment for federal income tax on the amount received. I also understand that I may be subject to federal income tax penalties under the estimated tax payment rules if my payments of the estimated tax and withholding are insufficient.
 - Withhold federal income tax rate of % from distributions.
 - Withhold federal income tax amount of \$, , .

6. PAYMENT INFORMATION Choose only one

- By check to the mailing address currently on file for this account.
By ACH/EFT (Complete Form ACH1)
By check to a third party address (Payable to the owner(s) or FBO the owner(s)):

Grid for entering name of financial institution, FBO, street address, city, state, and zip code.

NAME OF FINANCIAL INSTITUTION / FBO (ACCOUNT NUMBER) / STREET ADDRESS / CITY, STATE ZIP CODE

- Apply proceeds into my existing PRCUA mortgage account:
Deposit proceeds into my existing PRCUA annuity:
Deposit proceeds into a new PRCUA annuity account (please include a completed Annuity Application which is available for download at http://www.prcua.org/products/annuities.htm).

PLEASE PRINT IN THE BLOCKS WITH CAPITAL LETTERS

7. SIGNATURES

This form must be signed by the owner(s) of the annuity or deposit agreement.

By signing below, you hereby affirm that the information you have provided is true and correct and that you are aware of all the consequences affecting the distribution requested by this form.

Signature of Owner (with red X icon)

Signature Date (with red X icon)

Signature of Owner (with red X icon)

Signature Date (with red X icon)

WITNESS

This form requires a witness ONLY if your distribution is to be sent to a third party or to an address different from what we currently have on file for your annuity.

Grid for entering witness name.

WITNESS NAME

Witness Signature (with green X icon)

Witness Signature Date (with green X icon)

8. ADDITIONAL INFORMATION

Please mail this completed form to:

Annuity Processing
Polish Roman Catholic Union of America
984 N Milwaukee Ave
Chicago, IL 60642-4101

INTERNAL OFFICE USE ONLY

(PLACE DEPARTMENT RECEIVED STAMP BELOW)