GUARANTY
INCOME LIFE INSURANCE COMPANY

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ANNUITY PARTIAL WITHDRAWAL REQUEST

Request Periodic Withdrawals by completing Sections 1, 3 and 4.
Request a One-Time Partial Withdrawal by completing Sections 2, 3 and 4.

Annuity Number	Annuitant	Owner

1. Periodic Withdrawals

(Sections 3 & 4 must also be completed.)

I wish to begin receiving periodic withdrawals from my annuity.

☐ Monthly ☐ Quarterly ☐ Semi-annually ☐ Annually

☐ Interest Only *or* ☐ Specific amount of $_____

2. One-Time Partial Withdrawal

(Sections 3 & 4 must also be completed.)

I request a one–time ☐ gross *or* ☐ net partial withdrawal of $_____.

I understand that an early withdrawal penalty will apply if this withdrawal is more than the penalty-free amount allowed by my policy.

3. Election for Withholding

If you elect not to have Federal Income Tax withheld, you are liable for payment of Federal Income Tax on the taxable portion of your withdrawal. You also may be subject to a 10% "Premature Distribution Penalty" if you are not yet 59½ and other tax penalties under the estimated tax payment rules if your payment of estimated tax and withholding, if any, are not adequate. Your election will remain in effect until you revoke it. You may revoke your election at any time by sending a completed, signed and dated revocation to this office.

I ☐ **DO** *or* ☐ **DO NOT** want to have Federal Income Tax withheld from my withdrawal.

I ☐ **DO** *or* ☐ **DO NOT** want to have State Income Tax withheld from my withdrawal.

4. Electronic Funds Transfer

Please deposit my withdrawal(s) by Electronic Funds Transfer into my

☐ Checking Account No._____

☐ Savings Account No._____

With_____ _____
Name of Financial Institution Routing Number

PLEASE SIGN BELOW

Dated at _____ this _____ day of _____, _____.
City/State

_____
Signature of Owner

Social Security No. _____ - _____ - _____