

Annuitant: \_\_\_\_\_ Contract/Certificate Number: \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_

Note: If you borrow, surrender, or withdraw any funds from your contract, the guaranteed elements, non guaranteed elements, face amount, or surrender value of your existing contract may be affected.

<p style="text-align: center;"><b>SECTION I</b></p> <p style="text-align: center;"><b>MINIMUM DISTRIBUTION ELECTION</b></p> <p style="color: red; font-weight: bold;">Constellation Annuity Policy Owners Only:</p> <p style="color: red; font-size: small;">Since earnings are calculated and credited at the end of the term, any amounts withdrawn, including withdrawals to satisfy IRS minimum distribution requirements, will not earn equity-linked or declared rate interest for the entire seven-year term. For this reason, it may not be in your best interest to take yearly withdrawals from the Constellation Annuity in order to satisfy IRS minimum distribution requirements. We recommend that you take these distributions from another source if possible.</p>	<p><b>Select only one option:</b></p> <p><input type="checkbox"/> A. I elect to withdraw my required minimum distribution from my Western National Life Insurance Company (“WNLIC”) annuity based on the entire account balance of my policy. <span style="color: red;">(Please complete ALL sections.)</span></p> <hr/> <p><input type="checkbox"/> B. 403(b) TSA Policy Owners Only: I elect to withdraw my required distribution from my WNLIC annuity based on the accrued benefits since December 31, 1986. <span style="color: red;">(Please complete ALL sections.)</span></p> <hr/> <p><input type="checkbox"/> C. I elect to withdraw my required minimum distribution from another institution. <span style="color: red;">(Please sign below.)</span></p> <p style="font-size: small;">WNLIC is entitled to rely on my election to take my annual required minimum distributions from another institution. I assume all responsibility for any tax consequences that may result from aggregating my accounts. I agree to supply the other institution(s) with the account balance of my WNLIC annuity. I understand my election will remain in effect until I notify WNLIC of my intent to begin taking distributions from my WNLIC annuity.</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Signature <span style="margin-left: 200px;">Date</span></p> <hr/> <p><input type="checkbox"/> D. I elect to defer taking my required minimum distribution from my WNLIC annuity until I retire. I will be responsible for notifying WNLIC when I retire. (This option is not available to 5% owners or IRA owners.)</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Signature <span style="margin-left: 200px;">Date</span></p>
<p style="text-align: center;"><b>SECTION II</b></p> <p style="text-align: center;"><b>METHOD OF CALCULATION</b></p>	<p><b>Select only one option:</b></p> <p><input type="checkbox"/> A. Uniform Lifetime Method (This option is available to all annuitants).</p> <p><input type="checkbox"/> B. Joint Life Recalculated Method (This option is available only if your sole beneficiary is your spouse AND he/she is more than 10 years younger than you.)</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Name of Spouse <span style="margin-left: 200px;">Date of Birth of Spouse</span></p>
<p style="text-align: center;"><b>SECTION III</b></p> <p style="text-align: center;"><b>PAYMENT DATE AND FREQUENCY</b></p>	<p>I would like to begin receiving my payment _____, _____.</p> <p style="text-align: center; font-size: small;">Month <span style="margin-left: 100px;">Year</span></p> <p>I would like my payment on the ____ 10<sup>th</sup> ____ 25<sup>th</sup> ____ or the last day of the month.</p> <p>I would like my payment to be made ____ monthly ____ quarterly ____ semi-annually ____ or annually.</p> <p style="font-size: small;">(For monthly, quarterly, and semi-annual payments, the minimum payment amount is \$50.00. If your payment is less than \$50.00, we will process the payment when the minimum amount is accumulated and adjust the frequency accordingly.) <b>If the frequency or month of the first installment is not indicated, payments will be made annually.</b></p>

Please complete Page 2 of this form. Failure to do so may delay your request.

