

# Systematic Withdrawal

**The Allianz Connections<sup>SM</sup> or Allianz Vision<sup>SM</sup> Variable Annuity products will end the systematic withdrawal program once Lifetime Plus Payments have begun.**

- Withdrawals will be processed on the 9<sup>th</sup> of each month, or previous business day if the 9<sup>th</sup> is not a business day. The form must be received in good order no later than 3:00 p.m. Central time on the Business Day prior to the processing date to begin withdrawals in the same month.
- Systematic withdrawal will continue until the Allianz Life Insurance Company of North America (Allianz) receives written authorization to discontinue.
- \$25,000 minimum contract value required.
- Do not use this form for 403(b) contracts.

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### Maximum free withdrawal amount per year:

Allianz Alterity<sup>®</sup> Variable Annuity – 10 or 12% of purchase payments, cumulative

Allianz Charter II<sup>®</sup> Variable Annuity – 7% of purchase payments, noncumulative

Allianz Connections<sup>SM</sup>, Allianz Elite<sup>SM</sup>, High Five Bonus<sup>®</sup>, High Five L<sup>®</sup>, and Rewards<sup>®</sup> Variable Annuities – 10% of purchase payments per year, noncumulative

Allianz Vision<sup>SM</sup> and High Five<sup>®</sup> Variable Annuities – 12% of purchase payments, noncumulative

Allianz Valuemark IV<sup>®</sup> Variable Annuity – 15% of contract value, noncumulative

Allianz Valuemark II/III<sup>®</sup> Variable Annuity – 15% of purchase payments, cumulative

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1)  New contract  Contract number DA \_\_\_\_\_

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2) **Systematic withdrawal program (SWD)**  Payment to begin: (month/year) \_\_\_\_ / \_\_\_\_

**Withdrawals will decrease the Contract Value, death benefit, future income and any other guarantee values under your Contract. We recommend that you review your prospectus and speak with your Registered Representative for further details regarding the impact of withdrawals on your Contract.**

Systematic withdrawal amount \$\_\_\_\_\_ Withdrawal should be:  Quarterly  Monthly  Semiannual  Annual

SWD can be modified once each contract year and may be terminated by Allianz at any time. Funds will be removed prorated unless instructed differently. Allianz will not be held liable for any losses or tax liability incurred as a result of systematic withdrawals.

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### 3) Tax section – Complete for all disbursement requests

All, or part, of the payment you receive in connection with the surrender, withdrawal, or loan of a life insurance, endowment, or annuity contract, including the values used to cancel any outstanding loan indebtedness, may be includable in your gross income for tax purposes.

The taxable portion of the distribution is subject to federal (and potentially state) withholding unless you elect not to have withholding apply. You may elect not to have withholding apply by marking the appropriate box below. **If an election is not made, federal income tax will be withheld from the taxable portion at the rate of 10%.** Once the funds are distributed to you, Allianz will *not* reverse federal or state withholding.

If you elect not to have withholding apply or if you do not have enough federal income tax withheld, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient. You may wish to contact your Registered Representative regarding any questions you may have about taxes.

I have read the above information and **I DO NOT** want to have federal income tax withheld from my payment.

I have read the above information and **I DO** want to have federal income tax withheld at the rate of \_\_\_\_\_% (10% is the minimum allowed if withholding is elected.) I realize I will be subject to state income tax withholding if I elect federal withholding and reside in a state where state tax withholding is mandatory.

**Fax to:** 800.721.2708 **Mail to:** Allianz, PO Box 561, Minneapolis, MN 55440-0561

**Questions:** Call Allianz at 800.624.0197, Monday-Friday between 7:00 a.m. and 6:00 p.m. Central time

# Systematic Withdrawal



## 4) Payment instructions

- Send check(s) to my address of record
- Special mailing instructions: send check(s) to \_\_\_\_\_
- Automatic Clearing House (ACH) to my:
  - Bank checking<sup>1</sup> (must attach voided check)     Bank savings (must attach deposit slip)

Name on account<sup>3</sup> \_\_\_\_\_ Account number \_\_\_\_\_

Financial institution's name \_\_\_\_\_ City/State \_\_\_\_\_

Transit/Routing number<sup>2</sup> \_\_\_\_\_

<sup>1</sup> Bank must be a member of ACH.    <sup>2</sup> Nine-digit number on lower-left-hand corner of check.    <sup>3</sup> Bank account owner must be the same as contract owner.

I authorize Allianz to process the requested distribution. I am aware that this transaction is **NOT** reversible. Once the distribution is processed, the taxable event and any federal or state withholding that occurred cannot be reversed. I am aware that surrender charges may apply and understand the tax consequences of such distribution.

Owner or Authorized Signer's name (print) (Trustee, Power of Attorney, Custodian, or Guardian, if applicable)	Owner or Authorized Signer's signature	Date
Joint owner's name (print)	Joint owner's signature	Date
Owner or Authorized Signer's day telephone (      )	Owner or Authorized Signer's evening telephone (      )	

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