



Loan Request

Please print using blue or black ink.

1 Instructions

Complete all sections of this form. To request a loan, indicate the amount you wish to borrow, specify the investment options from which the loan will be processed, sign and date the form and return to the address above. Generally, a check will be issued within seven days of receipt of this form in good order, if your loan is approved. You may send it by fax to **1-800-AICPAIT**. You may call toll free **1-800-223-7473** with any questions, Monday - Friday, 8:30 a.m. - 6:00 p.m., Eastern time.

2 Participant Information

First name of participant _____ MI _____ Last name _____
 Street _____ Apt. _____
 City _____ State _____ ZIP code _____
 Group control number _____ Social Security number _____ Daytime telephone number _____
1 4 2 7 3 _____ - _____ - _____
 Has insurance been assigned? Yes No Account number _____ - _____

3 Loan Request and Investment Option Instructions

Maximum amount that can be borrowed: Generally, 90% of the Certificate Fund, less any existing loan with accrued interest, any outstanding charges, and the amount of next month's cost of insurance charges.

Loan request dollar amount: \$ _____

Specify the investment option(s) from which you would like the loan processed. If you do not specify any investment option(s), the loan will be deducted proportionately according to current allocations.

Investment option	Dollar amount	Percent	Investment option	Dollar amount	Percent
_____	\$ _____	or _____ %	_____	\$ _____	or _____ %
_____	\$ _____	or _____ %	_____	\$ _____	or _____ %
_____	\$ _____	or _____ %	_____	\$ _____	or _____ %
_____	\$ _____	or _____ %	_____	\$ _____	or _____ %
_____	\$ _____	or _____ %	_____	\$ _____	or _____ %
_____	\$ _____	or _____ %	_____	\$ _____	or _____ %
_____	\$ _____	or _____ %	_____	\$ _____	or _____ %
_____	\$ _____	or _____ %	_____	\$ _____	or _____ %
_____	\$ _____	or _____ %	_____	\$ _____	or _____ %
			Total \$ _____ or 100 %		

5b Withholding Elections

Prudential is required to withhold federal income tax on the taxable portion of distributions from the Group Variable Universal Life plan unless the participant elects not to have withholding apply. Depending on your state of residence, state income tax withholding also may be required, if federal income tax is withheld. Withholding is a method of paying taxes. It does not increase or decrease the total amount of taxes you may pay. Penalties may be incurred under the estimated tax payment rules if sufficient tax is not paid either through withholding, estimated taxes, or both. Any withholding election you make with respect to your distribution will be effective until revoked.

If you are a resident of AR, CA, DE, IA, KS, LA, ME, MA, NC, OK, OR, VT, or VA and have federal income tax withheld, state income tax withholding also is required from the taxable portion of your distribution. We will withhold at the designated state rate. Please note: If you are a resident of AR, CA, LA, KA, NC, OK, OR or VT and do not want to have state income tax withheld, you may elect out of state withholding by completing item C below.

Please choose either **A**, **B** or **C** below. If this section is not properly completed, Prudential will withhold tax as described in B below.

- A. Do not withhold federal or state income tax. Please note: If the payment is (i) being sent outside the United States or its possessions, or (ii) if the IRS has notified us that your Social Security number is incorrect, or (iii) you have not completed the Taxpayer Identification Number Certification above, this election is not available.
- B. Withhold federal and state income tax. (The federal withholding amount will be equal to 10 percent of the taxable portion of your distribution).
- C. Withhold federal income tax only; do not withhold state income tax. This option only applies if you are a resident in one of the following states: AR, CA, LA, KA, NC, OK, OR or VT.

6 Signature

I understand the above transactions will be processed in accordance with the group contract, with the rules and restrictions described in the Group Variable Universal Life Prospectus. Generally, a check will be issued within seven days of receipt of this form in good order by Aon Benfield Securities, Inc. I have read and understand the loan request information as stated above.

Participant's signature **X** _____

month	day	year	

Assignee's signature **X** _____

month	day	year	

(if applicable)

Group Variable Universal Life Insurance (contract series 89759) is issued by The Prudential Insurance Company of America, 751 Broad Street, Newark, NJ 07102 and is distributed by Prudential Investment Management Services LLC (PIMS) located at Three Gateway Center 14th Floor, Newark, NJ 07102-4077, and is offered and administered through Aon Benfield Securities, Inc., Member FINRA/SIPC, 159 East County Line Road, Hatboro, PA 19040-1218, 1-800-223-7473. The Plan Agent of the AICPA Insurance Trust is Aon Insurance Services. Aon Benfield Securities and Aon Insurance Services are not affiliated with either Prudential or PIMS.

Aon Insurance Services is a division of Affinity Insurance Services, Inc.: in CA, MN & OK, (CA Insurance License #0795465) Aon Insurance Services is a Division of AIS Affinity Insurance Agency, Inc.; and in NY is a Division of AIS Affinity Insurance Agency.