

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 **1-800-242-7248**. 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 **0 0 0** _____ - **7** _____

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 _____ %
			Total \$ _____		or 100 %

4 Banking Information Complete this section if you hereby request and authorize the proceeds of this disbursement transferred to the bank account electronically. The transfer will be generally within 3 business days after the request has been processed. If this section is left blank or the information is rejected, the proceeds of your disbursement will be issued in the form of a check. A check will generally be issued within seven days of receipt of this form in good order.

Bank Name _____
 Street _____ Branch Telephone Number _____
 City _____ State _____ ZIP code _____ Country **U S A**
 Bank Transit Routing Number _____ Bank Account Number _____
 Savings
 Checking

6b Withholding Elections

Prudential will withhold default 10% federal income taxes and any mandatory state income taxes, if applicable. You may choose to elect out of withholding below. Otherwise, for any other federal tax withholding election, you must submit IRS Form W-4R with this form. If you are not a U.S. person, you must submit the applicable IRS Form W-8 series. These forms can be located by searching Forms, Instructions and Publications at <https://www.irs.gov/forms-instructions>.

- Withhold federal and state income taxes on the taxable portion of distributions from the Group Variable Universal Life Plan. (The federal withholding amount will be equal to 10 percent of the taxable portion of your distributions. Your State withholding will be at the State’s designated rate.)
- Do not withhold federal and state income taxes on distributions from the Group Variable Universal Life Plan. (Connecticut residents must submit a form CT W 4P)

If no election is made, Prudential will withhold federal and state income taxes. In addition, withholding will also apply, regardless of any election made, if the distribution 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.

Withholding is a method of paying tax. 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.

7 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. I have read and understand the loan request information as stated above.

Participant’s signature **X** _____

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month day year

Assignee’s signature **X** _____

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(if applicable) month day year

Group Variable Universal Life is issued by The Prudential Insurance Company of America and distributed through Prudential Investment Management Services LLC (“PIMS”). The Prudential Insurance Company of America is located at 751 Broad St., Newark, NJ 07102, and PIMS is located at 655 Broad Street, Newark, NJ 07102. Both are Prudential Financial companies. Contract series: 89759. Group Variable Universal Life is offered and administered through Aon Securities LLC Member FINRA/SIPC, 1100 Virginia Drive, Suite 250, Fort Washington, PA 19034-3278, 1-800-223-7473. The Plan Agent of the AICPA Insurance Trust is Aon Insurance Services. Aon Securities and Aon Insurance Services are not affiliated with either Prudential or PIMS.

Aon Insurance Services is the brand name for the brokerage and program administration operations of Affinity Insurance Services, Inc.; (TX 13695); (AR 100106022); in CA & MN, AIS Affinity Insurance Agency, Inc. (CA 0795465); in OK, AIS Affinity Insurance Services, Inc.; in CA, Aon Affinity Insurance Services, Inc., (CA 0G94493), Aon Direct Insurance Administrators and Berkely Insurance Agency and in NY, AIS Affinity Insurance Agency.