

Instructions

To request a loan, complete all applicable sections of this form, obtain any required signatures, and return the form to Transamerica at 4333 Edgewood Road NE, Mail Drop 0001, Cedar Rapids, IA 52499.

Section A. Employer Information

Company/Employer Name

Contract/Account No. Affiliate No. Division No.

Section B. Personal Information

Social Security No. Date of Birth
(mm/dd/yyyy)

First Name/Middle Initial Last Name

Mailing Address

City State Zip Code

Phone No. Ext.

E-mail Address

Marital Status: Married Single/Divorced

Section C. Loan Information

Requested Loan Amount \$

FOR INTERNAL USE ONLY

Loan Number

Requested Loan Period years *(loan period cannot exceed 5 years - one year increments only)*

Section D. Terms and Conditions

1. The loan amount must meet the minimum permitted by the plan. The loan amount, when added to the outstanding balance of any other loans from all plans of the employer, may not exceed the lesser of (1) \$50,000 reduced by an amount equal to the highest outstanding loan balance (if any) during the previous 12 months, or (2) 50% of the value of the vested interest in the participant's account. If the amount requested is more than the amount available, the maximum loan amount available will be processed.
2. The loan will be withdrawn based on the plan's provisions and administrative procedures. (Please refer to your Summary Plan Description or contact your Plan Administrator for additional information.) Any amount so withdrawn will not share in investment gains or losses until repaid.
3. A non-refundable loan set-up charge may be deducted from the participant's account.
4. The term of the loan will be between 1 and 5 years, as selected in Section C of this Loan Application. Partial-year loan periods are not permitted. Please refer to your Summary Plan Description or contact your Plan Administrator for more information.
5. Loan repayments are due on the dates, and based on the repayment frequency, as prescribed by the employer. Each payment shall be equal to the sum of (1) the prorated equivalent of the annual loan interest payable on the remaining principal and (2) an installment payment of the loan principal. Each repayment will be credited back to the account in accordance with the investment allocation in effect at the time of repayment. A repayment may not be treated as a new contribution.
6. If the plan provides, loan repayments will be suspended while the participant is (1) performing service in the uniformed services as provided under Internal Revenue Code Section 414(u)(4), or (2) on authorized non-military leave (suspension not longer than one year) with reduced or insufficient pay to cover the loan repayment. The suspension of payments because of non-military leave cannot extend the term of the loan beyond the original maturity date of the loan.
7. The loan interest rate will be determined according to plan provisions. Please contact your Plan Administrator for specific details.
8. The loan may be prepaid in full with advance notice to Transamerica and the employer. No prepayment penalty applies.
9. If the loan is declared in default, a taxable distribution will be reported to the Internal Revenue Service. Please refer to your Summary Plan Description or contact your Plan Administrator for additional information.
10. This Loan Application must be submitted without modification or alteration and all applicable sections must be completed.

Section E. Participant Signature

Please note: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim from a group annuity contract issued in New York, containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed \$5,000 and the stated value of the claim for each such violation. States other than New York also have insurance fraud statutes, which impose penalties for any violation thereof.

For Married Participants: I elect to waive qualified joint and survivor benefits (if applicable) with respect to the loan amount I have requested to be withdrawn from the plan. I understand that such waiver is not effective unless I obtain the written consent (if applicable) of my spouse, witnessed by my Plan Administrator or a Notary Public.

For All Participants: I hereby apply for a cash loan from the vested funds in my account. I have read, understand and agree to the terms and conditions of this Loan Application and the loan provisions in my employer’s program. I accept full responsibility for adherence to the requirements of the loan to avoid realization of taxable income. I agree that Transamerica may deduct a \$35 fee from my plan account in the event a loan payment check is returned by Transamerica’s bank for insufficient or uncollected funds, or any other reason attributable to the borrower.

X _____
Participant Signature

X _____
Date

X _____
Print Name

X _____
Social Security Number

Section F. Spousal Consent (if applicable)

I consent to my spouse’s request for a cash loan from the vested funds in his/her account. I understand that such consent means that any benefits which may be payable from such account under the plan at my spouse’s death or retirement, will be reduced by the balance of any unpaid loan principal and interest and any loan charges.

Notice regarding faxed Notarized Documents for Married Participants: Transamerica will accept faxed documents for gross distribution requests of less than \$50,000, provided that where spousal consent is also required, the spouse’s signature must be duly witnessed by a notary using his/her notarial stamp. (A “gross distribution” is the amount of the requested withdrawal prior to deduction of any tax withholding.)

For gross distribution requests: (a) of \$50,000 or more or (b) involving notarized spousal consents that do not show the notary’s stamp - either because the notary’s state/district does not permit use of a notarial stamp (e.g., Alabama, Washington, DC) or for any other reason permissible by the notary’s state - original documents must be mailed, not faxed.

X _____
Spouse Signature

X _____
Date

WITNESSED

X _____
Plan Administrator or Notary Public Signature and Stamp/Seal

X _____
Date

Section G. Plan Administrator Information and Signature

Vested %: _____ (Note: This loan request cannot be processed unless all applicable sections of this form have been completed.)

Loan Interest Rate: _____% Loan repayment frequency weekly bi-weekly semi-monthly monthly.

I certify that this form is correct and complete, this transaction is permissible under the provisions of the plan, and that any required consents and waivers have been obtained.

X _____
Plan Administrator Signature

X _____
Date

Note: Any loan which is subsequently discovered to be in excess of the maximum IRS limit when made, is subject to immediate taxation in the year the loan was issued. Therefore, it is very important to determine if the participant has a plan loan (with another service provider) that (1) was in existence within the last 12 months and (2) was issued by a plan of the Employer (including any affiliate of the Employer).

If you have questions regarding the completion of this form, please call us at 800-755-5801.

Return your completed form(s) to:

Transamerica
4333 Edgewood Road NE
Mail Drop 0001
Cedar Rapids, IA 52499

Or, you may fax your completed form to 866-835-8863. If you are currently married, please see Section F. for any restrictions on faxing in notarized forms.

This information only applies to defined contribution retirement plans that are not subject to the joint and survivor annuity requirements. To confirm if your plan is not subject to these requirements, please refer to your Summary Plan Description or contact your Plan Administrator.

General

As a plan participant, you generally may elect to receive benefits when you reach your normal retirement age under the plan or terminate employment, provided your plan account has monies in it available for your withdrawal. If your plan allows in-service withdrawals for hardship or upon your attainment of age 59 1/2 or for any other reasons, you may also elect to receive benefit payments if you have satisfied the applicable plan requirements.

Please note, the plan may provide that if the cash value of your benefit is less than a specified amount (generally \$5,000 or less, if any), your benefit will be paid to you in a single sum, or automatically rolled over to an IRA (if required by federal law) unless you elect otherwise.

Under the provisions of the plan, you may request that your benefit be paid under the optional form of benefit which is best suited to your particular needs and circumstances. The amount of monthly income payable will depend upon the form of payment elected, your age (and your designated beneficiary's age) as well as your vested account balance as of your retirement date, or, if earlier, date of this election.

Summary of Forms of Benefit (Availability of the following options will depend upon plan provisions)

Single Sum Payment: The vested balance in your account will be paid in a single sum.

Installment Payment: The vested balance in your account will be paid in monthly, quarterly, semi-annual or annual installment payments.

Partial Payment: The vested balance in your account will be paid in partial payments.

Fixed Period Certain Annuity - No "Life" Guarantee: A monthly income is payable to you beginning on your benefit starting date, in equal installments over a specified period of not less than 12 nor more than 240 months. If you die during the specified period elected, the income will be continued for the remainder of the specified period to your designated beneficiary. You may elect that such payment to your beneficiary is to be made in a single sum.

Straight Life Annuity - No "Years" Certain: A lifetime monthly income is payable to you, beginning on your benefit starting date and continuing until the last payment due before your death. If you die after your benefit starting date, there will be no death benefit payable. If you are married, you may elect this form of payment only with your spouse's consent.

Life Annuity with Period Certain: A lifetime monthly income is payable to you, beginning on your benefit starting date and continuing until the last payment due before your death. If you die during the period certain which begins on your benefit starting date, the monthly income will be continued to your designated beneficiary for the remainder of the period certain. The beneficiary may elect that such payment be made in a lump sum.

Joint and Survivor Annuity: A lifetime monthly income is payable to you, beginning on your benefit starting date and continuing until the last payment due before your death. Upon your death, your joint annuitant will receive a monthly income for life equal to, depending on the provisions of your employer's plan, at least one-half (and not more than 100%) of the amount of monthly income you were receiving. If you are married, your joint annuitant must be your spouse unless your spouse consents to another annuitant on a form provided by the Plan Administrator.

Election of Annuity Benefit

If you are married (and your plan provides annuities as a form of benefit) and you wish to elect an annuity form of benefit, other than a Joint and Survivor Annuity with your spouse as your joint annuitant, your spouse must consent to your election, in writing, witnessed by your Plan Administrator or a Notary Public, during the 180 day period before your benefit starting date. If you are married and wish to designate a person other than your spouse as your joint annuitant, you must obtain your spouse's written consent to your beneficiary designation. (If established to the satisfaction of your Plan Administrator that your spouse cannot be located, spousal consent is not required.) Your spouse's consent must be made on a special form available from your Plan Administrator.

Comparison of Forms of Benefit

These examples compare benefits under forms of payment available under the plan. These examples are based on specific assumptions and certain interest rates and mortality rates. The amounts shown are estimates, provided to illustrate the differences among the various options and are not intended to represent the actual amount payable to you. Upon your request, a more precise calculation will be provided. Your request should be sent to the address below if in writing. If you wish to call your request, see the number provided below for you to call.

Assume a participant retiring at age 65 has a beneficiary of the same age and a \$200,000 account balance.

Age 65 Commencement

Form of Benefit	Benefit to Participant	Benefit to Spouse/Beneficiary After Participant's Death
Single Sum Payment	\$200,000	\$0
Fixed Period Annuity- No Life (60 months).....	\$3,484.59 per month	\$3,484.59 per month. If participant dies before receiving 60 monthly payments, remaining payments continue to beneficiary.
Fixed Period Annuity- No Life (120 months).....	\$1,776.94 per month	\$1,776.94 per month. If participant dies before receiving 120 monthly payments, remaining payments continue to beneficiary.
Life Annuity with 10 Years Certain (120 months).....	\$1,130.53 per month	\$1,130.53 per month. If participant dies before receiving 120 monthly payments, remaining payments continue to beneficiary.
Straight Life Annuity	\$1,183.61 per month	\$0
Qualified Joint and Survivor Annuity with 100% Continuing to Spouse	\$ 996.94 per month	\$ 996.94 per month
Qualified Joint and Survivor Annuity with 75% Continuing to Spouse	\$1,037.85 per month	\$ 778.39 per month
Qualified Joint and Survivor Annuity with 66 2/3% Continuing to Spouse	\$1,052.25 per month	\$ 701.50 per month
Qualified Joint and Survivor Annuity with 50% Continuing to Spouse	\$1,082.27 per month	\$ 541.14 per month

Any annuity elected will be provided by purchasing an annuity contract from an insurance company with your vested account balance under the plan. Dollar amounts shown do not reflect any required tax withholding, ongoing account expenses, or possible fees charged by the annuity provider.

Election Rights

You have at least 30 days to consider which form of benefit payment you want to elect. If, after receiving this Explanation, you affirmatively elect a distribution, your distribution may be made less than 30 days from the date this Explanation was given to you. If you elect an annuity form of payment:

- Your distribution election is revocable until the later of (a) your benefit starting date, or (b) prior to the expiration of the 7-day period that begins the date after you receive this Explanation;
- Your benefit starting date is a date after the date you received this Explanation;
- Distribution in accordance with your benefit election is paid more than 7 days after the date this Explanation was provided.

Consequences of Your Taking the Distribution Instead of Deferring Receipt of the Distribution

If you are eligible to receive a distribution from the plan, but also have the right to defer receipt of such distribution because, e.g., the value of your nonforfeitable account balance exceeds \$5,000 (or such lower automatic cash-out limit set by the plan), your decision not to defer receipt of your distribution includes the following consequences if you do not directly (or indirectly within 60 days of receipt of the distribution) roll over your distribution to an IRA or another employer's eligible retirement plan: (1) you will be taxed on the taxable amount of the distribution in the year the distribution is made and will no longer be able to defer the taxation of the distribution, (2) an IRS early distribution 10% penalty tax may apply to the taxable portion of your distribution if you receive the distribution either before attaining age 59 ½ or after separating from service before the year in which you attain age 55, and (3) you will lose the opportunity to defer the taxation of future earnings on your distribution.

Please note that some currently available investment options may not be generally available on similar terms outside the Plan. In addition, fees and expenses (including administrative or investment-related fees) outside the Plan may be different from fees and expenses that apply to the Plan's accounts. Please contact your financial advisor for additional information.

Your plan may include other provisions that might affect your decision whether to defer receipt of a distribution. You should review the plan's summary plan description before deciding to elect a distribution, and discuss this issue with your tax advisor. A copy of the plan's summary plan description is available from the Plan Administrator.

Right to Request Participant-Specific Information

You have the right to request specific information with respect to each form of benefit available to you under the plan, including a description of the financial effect of electing each form of benefit available to you under the plan. Written requests should be sent to Transamerica, 4333 Edgewood Road NE, Cedar Rapids, IA 52499, (Attn: Retirement Analysis Department) or call 800-755-5803 x1203434.