

Withdrawal Request instructions

Instructions

- Complete all applicable sections.
 - Please note: For 403(b) contracts, you must complete the applicable form. 403(b) withdrawals cannot be processed without a qualifying event.
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Information

- When you make a withdrawal request, we will process the request based on the contract value next determined after receipt of the request, in Good Order, at Allianz Life Insurance Company of North America (Allianz). The contract value is determined at the end of each Business Day.
 - Any withdrawal request received at or after the end of the current Business Day will receive the next Business Day's contract value. Our Business Day closes when the New York Stock Exchange closes.
 - This withdrawal may be a taxable event. The IRS 10% premature distribution penalty tax may apply to the taxable portion of the withdrawal if you are under age 59½. Please consult your tax advisor before requesting the withdrawal.
 - In order for this withdrawal to be treated as a direct exchange, transfer, or rollover, you must submit the receiving company's Letter of Acceptance and required transfer paperwork with this form. Without this paperwork, we will process the withdrawal as a taxable distribution, report it to the IRS, make the disbursement payable to the financial institution and send the disbursement to the owner's address of record.
 - Multiple nonqualified annuity contracts issued within the same calendar year to the same owner by Allianz Life Insurance Company of North America or Allianz Life Insurance Company of New York may be treated as one annuity contract for purposes of determining a distribution's tax consequences. You should consult a tax advisor before requesting a distribution from any of these contracts.
 - Withdrawals can only be made payable and sent to the contract owner or financial institution for benefit of the contract owner.
 - A new withdrawal form is required with each request. Original forms cannot be modified and resubmitted.
 - Withdrawal charges may be applied to a withdrawal.
 - Withdrawal charges will not be deducted from the partial withdrawal amount, but will be deducted from the remaining contract value.
 - Your contract may include a lifetime withdrawal benefit or Guaranteed Partial Withdrawal Benefit. If so, once benefit payments have begun then the free withdrawal privilege is not available.
 - For Allianz Index Advantage ADVSM, we do not assess or deduct withdrawal charges for amounts withdrawn from the Variable Options.
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Free withdrawal privilege (Partial Withdrawal Privilege)

Allianz Alterity[®] Variable Annuity – 10 or 12% of purchase payments¹

Allianz Charter[®] II Variable Annuity – 7% of purchase payments

Allianz ConnectionsSM, Allianz EliteSM, High Five[®] Bonus, High Five[®] L, Allianz Index Advantage[®], Allianz Index Advantage IncomeSM, Index Advantage NFSM and Rewards[®] Variable Annuities – 10% of purchase payments per year

Allianz Index Advantage ADVSM – 10% of purchase payments per year from Index Options

Allianz Index Advantage IncomeSM Variable Annuity - 10% of purchase payments

Allianz VisionSM and High Five[®] Variable Annuities – 12% of purchase payments

Allianz Valuemark[®] IV Variable Annuity – 15% of contract value

Allianz Valuemark[®] II/III Variable Annuity – 15% of purchase payments¹

¹Any unused free withdrawal privilege is carried over to the next year.

Withdrawal Request All sections must be filled out before a partial or full withdrawal is processed.
This form is for one time disbursements only (e.g., not available for enrollment in: systematic withdrawal, Required Minimum Distribution (RMD), etc).

- Withdrawals will reduce the Contract Value and may reduce the value of any protection benefits by more than the amount withdrawn. We recommend that you review your prospectus and speak with your Financial Professional for further details regarding the impact of withdrawals on your Contract.
- Questions: Call Allianz Life Insurance Company of North America (Allianz) at 800.624.0197, Monday - Thursday 7 a.m. - 6 p.m., Friday 7 a.m. - 5 p.m. Central time

1) Contract number _____

- Please check this box if you purchased multiple nonqualified annuity contracts from Allianz Life Insurance Company of North America or Allianz Life Insurance Company of New York. Review the tax section of this form carefully.
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2) Withdrawal selection

Partial withdrawal:

- \$ _____ Free withdrawal amount available¹ _____ % of contract value

¹For Allianz Index Advantage ADVSM only, this includes amounts in Variable Options.

- Full withdrawal:** The undersigned hereby surrenders the contract with Allianz and acknowledges that all rights, claims, benefits, and demands under the contract are fully settled and satisfied. Allianz is hereby released from any and all liability thereunder.
- Contract is attached as required.
- Lost contract certification—I declare that the contract has been lost or destroyed and will not claim any right if found in the future.
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Cumulative Withdrawal (Vision and Connections only):

This is only available if there is a balance in your Cumulative Withdrawal Value.

- Full Cumulative Withdrawal Value available. \$ _____
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3) Tax section – Complete for all disbursement requests

If multiple nonqualified annuity contracts from Allianz Life Insurance Company of North America or Allianz Life Insurance Company of New York were issued to the same owner within the same calendar year, the contracts may be treated as one annuity contract for income tax purposes. If you take a distribution from any of these contracts, the taxable amount reported to you and the IRS will be based on earnings of all such contracts.

Even if you fail to check the box above and you purchased multiple nonqualified Annuity contracts from Allianz Life Insurance Company of North America or Allianz Life Insurance Company of New York within the same calendar year, you will be required to properly report the amount of gain from all contracts that apply to your distribution on your income tax return. Please see your tax professional for additional questions regarding your income tax reporting obligation.

Withholding Notice and Election for Distribution

All, or part of the payment you receive in connection with the surrender, withdrawal, or loan of 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 tax advisor 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.
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3) Tax section (continued)

For State Withholding options, you should consult your State's applicable website, you can review the State Withholding Guide available at www.allianzlife.com or contact your tax professional.

Please note that, effective January 1, 2015, if you make a tax-free IRA to IRA rollover, you cannot, within a one-year period, make another tax-free rollover of a distribution from any of your IRAs to another IRA. Please consult your tax advisor for any questions.

4) Certification of Taxpayer Identification Number

If you are requesting payments as a U.S. Person, the IRS requires you to agree to the following statements. If you are not a U.S. Person, please complete Form W-8BEN.

Under penalties of perjury, I certify that:

1. The Taxpayer Identification Number shown on this form is correct or I am waiting for a number to be issued to me.
2. I am not subject to backup withholding because:
 - a. I am exempt from backup withholding, or
 - b. I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report all interest or dividends, or
 - c. The IRS has notified me that I am no longer subject to backup withholding.
3. I am a U.S. person, and
4. The Foreign Account Tax Compliance Act (FATCA) code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

- Check the box if the IRS has notified you that you are currently subject to backup withholding because you failed to report interest and dividends on your tax return.

5) Payment instructions (Withdrawals can only be made payable and sent to the contract owner or financial institution for the benefit of the contract owner.)

- Send disbursement check to owner at address on record**
- Send disbursement to financial institution/Brokerage Account**

Financial institution's name _____

Account number _____

Financial institution's phone number _____

(In order for this withdrawal to be treated as a direct exchange, transfer, or rollover, you must submit the receiving company's Letter of Acceptance and required transfer paperwork with this form. Without this paperwork, we will process the withdrawal as a taxable distribution, report it to the IRS, make the disbursement payable to the financial institution and send the disbursement to the owner's address of record.)

- Automatic Clearing House (ACH)** (Bank must be a member of ACH. Bank account owner must be the same as contract owner.)
- Please note:** If voided check or deposit slip is not sent or already on file with Allianz, a check will be sent to your address of record in place of the ACH transfer.
- Checking, I have enclosed a **VOIDED CHECK**.
- Savings, I have enclosed a **DEPOSIT SLIP** with a valid ACH routing number.

Attach a voided check for a checking account, or a deposit slip for savings account.

Your Name	No. 1000
Address	Date
City, State, ZIP code	
Pay to the order of	\$
	Dollars
Your Bank	
Bank Address	
Bank City, State, ZIP code	
Memo	
⑆ 32181613 ⑆ 4436712143 ⑆ 1000	
Routing Number	Account Number

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6) Signatures (Signature section must be completed. All owner's signatures are required.)

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 withdrawal charges may apply and understand the tax consequences of such distribution.

This form must be received within 30 days of signing.

Contract Owner or Authorized Signer's name (print)	Contract Owner or Authorized Signer's signature	Signed date
Joint contract owner's name (print)	Joint contract owner's signature	Signed date
Contract Owner's Tax ID/SSN ()	Joint contract owner's Tax ID/SSN ()	
Contract Owner or Authorized Signer's day telephone	Contract Owner or Authorized Signer's evening telephone	

(ADDITIONAL SIGNATURES REQUIRED, IF APPLICABLE)

¹**Trust:** _____ **as trustee of the:** _____

Trustee's signature	Trust name (printed)	Signed date
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¹**Power-of-Attorney:** _____ **By:** _____

Contract owner's name	Attorney-in-fact signature	Signed date
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Collateral assignment: _____

Collateral Assignee signature	Signed date
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¹ Submit legal documents such as trust papers and power-of-attorney paperwork.
Trust papers required include: 1) trust name 2) trust date 3) names of trustee and successor 4) signature page

Please submit your form through one of the options below:

Email completed forms to:
variableannuity@send.allianzlife.com

OR

Web Upload:
You can scan and upload your signed and completed form by logging in to your account at Allianzlife.com

OR

<p>Mail: Regular mail Allianz Life Insurance Company of North America PO Box 561 Minneapolis, MN 55440-0561</p>	<p>Overnight mail Allianz Life Insurance Company of North America 5701 Golden Hills Drive Minneapolis, MN 55416-1297</p>
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OR

Fax: 800.721.2708

Any questions? Call us at 800.624.0197