

Request for Loan, Partial Withdrawal or Cash Surrender Value

Modern Woodmen of America
1701 1st Avenue
Rock Island, Illinois 61201
1.800.447.9811
www.modernwoodmen.org

Modern Woodmen 
FRATERNAL FINANCIAL

INSURED OR ANNUITANT'S NAME	APPLICANT'S NAME/OWNER (If other than Insured or Annuitant)	CERTIFICATE NO. <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Permanent Address: _____		DAYTIME PHONE NO. <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
City _____ State _____ Zip _____		
Complete only if check is to be mailed to a different address than noted above:		
Address: _____ City _____ State _____ Zip _____		

LOAN REQUEST: Amount of loan desired: \$ _____ or check box if Maximum Loan desired.
I hereby assign to Modern Woodmen of America all sums of money now due or hereafter to become due under the certificate described above to secure repayment of the loan requested herein, together with interest, at the rate specified in the certificate or on the loan draft endorsement.
IMPORTANT: The Notice of Withholding & Election section must also be completed.

APPLICATION FOR PARTIAL WITHDRAWAL (See instructions on reverse side)
I hereby request payment of a partial withdrawal under the provisions of the above-numbered certificate for the amount specified below:

<input type="checkbox"/> Maximum partial withdrawal value	<input type="checkbox"/> Partial withdrawal to pay off loan (if available)
<input type="checkbox"/> \$ _____ (Specify an amount)	<input type="checkbox"/> Maximum partial withdrawal without MWA penalties (annuities)
<i>Amounts withdrawn cannot be restored or reinstated.</i>	
<input type="checkbox"/> Partial withdrawal of interest only (annuities)	

IMPORTANT: The Notice of Withholding & Election section must also be completed.

APPLICATION FOR CASH SURRENDER VALUE (*Terminate Certificate*)
I hereby surrender the above-numbered certificate for cancellation and request payment of the cash surrender value. It is understood that the liability of Modern Woodmen of America is limited to the payment of the cash surrender value of said certificate and all other rights, claims, or interests are hereby terminated. If the certificate is in my control, I agree to destroy it.
IMPORTANT: The Notice of Withholding & Election section must also be completed.

NOTICE OF WITHHOLDING & ELECTION

The payment(s) you are about to receive from Modern Woodmen of America may be subject to federal and state (if applicable) income tax withholding, unless you elect not to have withholding apply. You may make the election not to have withholding apply by completing the election form below. If you do not complete the election form, federal and state (if applicable) income tax may be withheld from your payment.

If you choose not to have withholding apply to your payment, 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 insufficient. The Society cannot provide individual tax advice. Please see your attorney or tax advisor if you have any questions about your individual tax situation.

Check One: I do not want to have income tax withheld from my payment.
 I want to have income tax withheld from my payment.
State income tax withholding, if applicable, will be at the rate specified by the state.

CERTIFIED SOCIAL SECURITY NUMBER

Under penalty of perjury, I certify my taxpayer identification number is _____.

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 a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and I am a U.S. person (including a U.S. Resident alien).

Check here if you have been notified by the IRS that you ARE currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

I certify that I have not assigned or pledged said certificate for any purpose whatsoever and that no bankruptcy proceedings are pending against me.

Date	<div style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></div> - <div style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></div> - <div style="border: 1px solid black; display: inline-block; width: 50px; height: 20px;"></div>	X		(Signature of Certificate Holder/Owner)
		X		(Signature of 2 nd Assignee, if any)

Failure of the Agent to complete and sign this portion will result in a delay of any payment.

Agent Signature: X _____ Agent No. - -



Form Instructions

- Use separate form for each certificate.
- **Certificate Holder** – The person having control of the certificate. (May be verified through the Resource Center or by calling the Home Office at 1-800-447-9811.)
- **Tax-Sheltered (TSA 403(b) or Roth 403(b)) or HR-10** Annuity certificate: Contact the Home Office to send the proper Partial Withdrawal or Cash Surrender forms.
- **MWA Representative** must complete Agent Section of form.