

1. PARTICIPANT INFORMATION

Please print clearly.

SSN: _____

Name (first, middle, last): _____

Date of Separation from Service (MMDDYY): _____

Phone Numbers: (1) _____

(2) _____

2. ALTERNATE PAYEE/BENEFICIARY INFORMATION

Complete if Payee is a beneficiary or former spouse.

SSN: _____

Name (first, middle, last): _____

Date of Birth (MMDDYY): _____

Relationship: _____

Street Address: _____

City: _____ State: _____ ZIP: _____

3. DISTRIBUTION REASON

Choose one option only.

Termination of Employment

Retirement

Permanent and Total Disability of Participant

Death of Participant

Attach an original or certified copy of the Participant's death certificate.

Qualified Domestic Relations Order (if applicable)

Attach an original or certified copy of the Order.

In-Service Withdrawal (if applicable)

59½

4. DISTRIBUTION METHOD

Choose one option only. Please review the enclosed "SPECIAL TAX NOTICE" carefully.

Option 1: Full or partial distribution to you (Check the appropriate box below to indicate full or partial distribution, then proceed to Section 5.)

If you elect a full or partial distribution of your benefit, the requested withdrawal will be paid directly to you. The amount of your benefit is the vested portion of your account balance as of the close of the market the day before your distribution is processed.

Pay me my entire vested account balance.

Pay me \$ _____ / _____ %
(fill in dollar amount OR percentage) of my **vested** account balance.

Option 2: Installments (Check the appropriate boxes below to indicate the installment payment frequency, then proceed to Section 5.)

If you elect to receive your benefit in installments, you must specify the dollar amount or percentage of your account to be paid in each installment as well as the frequency of your payments. The period of time over which you receive these payments cannot be greater than your life expectancy. Other IRS rules exist that may further limit the time period over which you receive payments.

Payment Start Date _____ / _____ */_____

*Date must be between the 5th and 24th day of the month.

Electronic Funds Transfer

Bank Name _____

Bank Account Number _____

Bank Phone Number _____

ABA Routing Number (Obtain from Bank) _____

Type of Bank Account

Savings Checking*

*Attach a blank "voided" check

Frequency

Monthly Quarterly Semi-annually Annually

Method of Payment

Fixed Dollar Amount \$ _____ (until account is exhausted)

Percentage of Account Balance _____% (until account is exhausted)

Option 3: Annuity if available under the Plan
(Please complete VALIC's Annuity Benefits Form.)

5. WITHHOLDING INSTRUCTIONS

- Any amount that you could withdraw without requesting a hardship withdrawal may be eligible for rollover to a like plan or IRA, and will be subject to mandatory 20% withholding.
- Any amounts that are not eligible for rollover will be subject to 10% federal tax withholding of any taxable amount by VALIC Retirement Services Company unless you request otherwise below. In addition, any distribution to you will be taxable in the year received and may be subject to an additional 10% tax penalty if you are under age 59½. If you choose not to have taxes withheld, interest and penalties may be imposed by the IRS for any under-withholding.
- Notice to non-residents: A payment to an address outside of the United States may be withheld at a 30% rate unless the payee submits a completed IRS Form W-8BEN and the amount is eligible for reduced withholding.
- For any 457 plan except Governmental 457(b) plans, where consistent with your employer's plan, VALIC will apply wage bracket withholding based on the information you provide on your IRS Form W-4. A current IRS Form W-4 must be attached to this request. Wage bracket withholding does not apply to beneficiary accounts.

Federal Withholding

- DO NOT withhold any federal income taxes unless mandated by law.
- DO withhold federal income taxes in the amount of _____% or \$_____ (cannot be less than mandatory withholding).

State Withholding

- DO NOT withhold any state taxes unless mandated by law.
- DO withhold state taxes in the amount of _____% or \$_____ (cannot be less than any mandatory or employer-imposed withholding).

6. MAILING INSTRUCTIONS

Complete if any portion of your distribution is to be paid directly to you. Choose one option only. If you have changed your address of record within the past 15 business days or if your check is to be mailed to a third party's address, please provide a Signature Guarantee from a financial institution.

- Mail the distribution to my permanent address as indicated on my quarterly statement.
- Mail the distribution to the address indicated below. The address below is my new permanent address (check one):
 Yes No

Street Address: _____

City: _____ State: _____ ZIP: _____

- Send check by overnight delivery.** I understand, by providing my credit card number below, that there will be a charge billed to my credit card for this service and that a street address is required. If the credit card charge is not approved, the check will be sent by regular mail.

MasterCard Visa American Express

Card # _____

Expiration Date: _____

7. SPOUSAL CONSENT

ERISA-covered and certain other employer plans require the client to state his/her marital status and the spouse to consent to this distribution. Please check the appropriate box below:

REQUIRED FOR CLIENT: Client Marital Status

- Not Married Married
- Legally Separated: Attach Court Order of Legal Separation (petition not acceptable)
- Missing Spouse: I hereby affirm that I have made reasonable attempts to locate my spouse and have not been able to do so.

REQUIRED FOR SPOUSE: Spousal Consent

Under federal law, you have the right to receive a survivor benefit of at least 50% of the amount in this account if your spouse dies before you. As a result, your spouse must have written consent before making withdrawals from his or her retirement account. If you consent to the withdrawal, you will not receive a survivor benefit from the amount withdrawn. If you agree to the withdrawal, please read and sign the statement below and have your signature witnessed.

- I have read and understand the "Joint and Survivor Annuity and Qualified Annuity Benefit" section of the Information pages and I agree to the payment of funds from my spouse's retirement account.
- I understand and agree that I am giving up my right to receive a survivor benefit payment from VALIC Retirement Services Company for the amount being paid and I release VALIC Retirement Services Company from all liability for making this payment.

Spouse's signature must be witnessed by Plan Administrator or Notary Public.

Spouse's Signature Date

WITNESS BY NOTARY PUBLIC

STATE OF _____

COUNTY OF _____

BEFORE ME, the undersigned, a Notary Public, personally appeared

_____ who executed the above Spousal Consent as a free and voluntary act.

IN WITNESS THEREOF, I have signed my name and affixed my official

notarial seal/stamp this _____ day of _____, 20_____.

(SEAL/STAMP)

Notary Public

My commission expires: _____

8. PARTICIPANT/ALTERNATE PAYEE/BENEFICIARY SIGNATURE

- I authorize the above distribution and certify that all statements, including marital statements, are complete and accurate to the best of my knowledge and belief.
- I have read and understand the information provided in the Special Tax Notice in the Information pages of this form.
- I have read and understood the "Joint and Survivor Annuity and Qualified Annuity Benefit" section of the Information pages. By signing below I am agreeing to waive any benefit or right described in that section that would have been provided with respect to the amount that I am withdrawing. I also understand that I have the right to revoke any waiver if a distribution has not already been made.

Please fax this form to 1-877-202-0187 or mail to the address below for processing:

AIG VALIC Document Control
P.O. Box 15648
Amarillo, TX 79105-5648

Overnight delivery:

VALIC Retirement Services Company, Inc.
2261 S.E. 27th Avenue
Amarillo, TX 79103

Questions about this form may be directed to 1-888-568-2542, Monday through Friday, 7 a.m. - 8 p.m. Central Time.

Participant Signature

Date

9. PLAN ADMINISTRATOR'S APPROVAL — IF APPLICABLE

I approve this distribution in accordance with the current plan provisions and all applicable laws and regulations. I verify that the information provided on this form for purposes of this distribution is correct to the best of my knowledge.

UNLESS OTHERWISE SPECIFIED in the plan document, the Plan Administrator authorizes a participant who has terminated employment to leave his or her vested portion of the account(s) listed on this form under the Plan as a deferred benefit, and to receive a distribution or make a qualified rollover from these account(s) at any time in the future.

Check One

- The Plan Administrator's signature serves as witness of the Participant's Spouse's waiver under the SPOUSAL CONSENT section of this form (unless spouse's signature is notarized on page 2).
- The Plan Administrator's signature does NOT serve as witness of the Participant's Spouse's waiver under the SPOUSAL CONSENT section of the form.

Plan Administrator or
Authorized Representative Signature

Date

QUALIFIED JOINT AND SURVIVOR ANNUITY AND QUALIFIED ANNUITY BENEFIT: FOR ERISA PLANS ONLY

This notice should be provided to you at least 30 days, but no more than 90 days, before your proposed distribution date.

If you are married, your retirement plan distributions will be paid to you in the form of a Qualified Joint and Survivor Annuity ("QJSA") unless you elect a different form of distribution. Under your QJSA, if your spouse survives you, the plan will pay him or her at least 50% of the amount the plan had been paying to you, on the same frequency as the payments to you. If you are not married, your benefit will be paid monthly over your life and will end upon your death unless you elect a different form of distribution. This benefit is referred to as a Qualified Annuity Benefit ("QAB").

The plan may satisfy the QJSA or QAB by using your vested account balance to purchase an annuity contract from an insurance company. The actual monthly payments made under the annuity contract will depend on the value of your account balance, annuity purchase rates used by the insurance company, your age, and if you are married, your spouse's age at the time the distribution begins.

The following table reflects the relative values of monthly payments from a Joint and Survivor Annuity and a Life Annuity, assuming a vested account balance of \$5,000 and an interest rate of 6%. This table is based on the UP-1984 Mortality tables. **The table is hypothetical and does not reflect the value of your individual benefit or the actual payments you or your beneficiaries would receive.** Please note that as the ages change, the payment amount will change. If none of the examples closely approximates your situation, you may obtain a more accurate value specific to your situation from your plan administrator or from your AIG VALIC financial advisor.

Age at Benefit Starting Date									
Annuitant		70	65	60	55	50	45	40	35
Spouse		65	70	55	60	45	50	35	40
Monthly Payment									
Annuitant Life Only		51.71	44.59	39.32	35.48	32.65	30.53	28.95	27.78
Joint and 50% Survivor		44.08	41.27	35.11	33.49	30.28	29.33	27.61	27.06

This QJSA or QAB requirement may not apply to smaller account balances (generally below \$5,000) and will not apply if you have elected another form of benefit. A partial withdrawal would be considered another form of benefit for this purpose. Other alternate forms of benefits that may be available under your employer's plan and under your plan investments may include:

Annuity

An annuity can provide you with payments for your life or for your life and that of your beneficiary; payments for a specified period; payments for your lifetime with a minimum guaranteed period; or a continuation of payments to your surviving spouse that is different from the plan's percentage of the payments made to you. Generally, the more that the form of payment guarantees, such as a minimum period of payments, or payments to your surviving spouse or to another beneficiary, the more that specified benefit amount will cost. There are IRS rules that may limit the period during which payments may be made.

Lump Sum Distribution

If you elect a lump sum distribution, your benefit will be paid to you in one payment. The amount of your benefit is the vested portion of your account balance as of the valuation date used to calculate your distribution.

Installments

If you elect to receive your benefits in installments, you may specify the dollar amount and frequency of your payments. The period of time over which you receive these installments cannot be greater than your life expectancy or the joint life and last survivor expectancy of you and your designated beneficiary. There are other IRS rules that may further limit the period over which you receive payments.

In order to elect one of these alternative forms of benefits you must waive your right to the QJSA or QAB, and if you are married, your spouse must also consent in writing. In addition, this written consent must be witnessed by a Notary Public or by your Plan Administrator. You are entitled to 30 days (but no more than 90 days) within which to make this decision. Although you have at least 30 days to make this decision, under some circumstances, you may waive this minimum 30-day period, and if you submit a waiver of the QJSA or QAB less than 30 days after it is signed we will assume that you are waiving this notice period. Unless a waiver of the QJSA or QAB is made irrevocably, you have the right to revoke the waiver and execute another waiver at a later time, up to the time when the benefit payments have started. You also have the right to defer receiving a distribution, subject to the terms of your employer's plan as well as legal requirements that generally require distributions to commence upon the later of attainment of age 70½ or retirement.

SPECIAL TAX NOTICE

You have the right to at least 30 days to consider your alternatives after receiving this notice. You may waive this review period. Your signature on this form will indicate that either you have had this 30-day review or that you have chosen to waive it, and you are requesting an immediate distribution.

ELIGIBLE ROLLOVER DISTRIBUTIONS

The information in this notice applies to qualified plans, tax-deferred annuity arrangements, IRAs, and governmental 457(b) deferred compensation plans. Generally, the rules below that apply to payments to employees also apply to surviving spouses and alternate payees.

Most withdrawals from tax-favored retirement plans are eligible for rollover either to an IRA or to another plan if the receiving plan accepts such rollovers. Some plans do not accept rollovers of certain types of distributions. Check with the administrator of that plan about whether the plan accepts rollovers and, if so, the types of rollover distributions it accepts. Roth accounts may only be rolled over to another Roth account or to a Roth IRA.

ROLLOVERS OF BENEFICIARY ACCOUNTS

Only spousal beneficiaries are allowed to roll over distributions to an IRA or another plan. The receiving plan must accept such rollovers. Non-spousal beneficiaries are not allowed to roll over distributions.

DISTRIBUTABLE EVENT

Generally a distributable event includes attainment of age 59½ (age 70½ for 457(b) plans), separation from service, disability or death. However, the employer's plan may place additional restrictions that must also be met prior to a distribution. If you have met a distributable event, you may request a rollover of funds to any eligible plan type or a transfer to a like plan type. If you wish to move funds from your VALIC 403(b) account to another 403(b) account via a rollover distribution, and have made contributions prior to 01-01-87, those amounts may lose a grandfathered status that can impact future required distributions. However, movement of funds from your VALIC 403(b) account to another 403(b) account via a transfer distribution may retain the status. For more information, please call 1-888-568-2542.

ROLLOVER/TRANSFER

Rollover Distributions: If you have met a distributable event on your eligible account(s) or plan you may roll directly to an eligible retirement plan with another carrier. The distribution will not be taxed but will be reported to the IRS. Rollover amounts due to a distributable event generally can remain free of withdrawal restrictions after moving to the receiving plan, unless the receiving plan applies restrictions to rollover amounts.

Transfers: Transfers to a like plan will not be taxed or reported to the IRS. Generally, transfers are allowed regardless of employment status. However, your employer's plan may restrict you to authorized carriers. Transferred amounts generally become subject to the requirements of the plan receiving the transfer as though originally contributed to that plan. Exchanges of Non-Qualified Deferred Annuities are not taxed but will be reported to the IRS.

EXAMPLES OF SOME POSSIBLE DIFFERENCES IN PLAN RESTRICTIONS

- The new plan may require spousal consent or plan administrator approval for distributions.
- The new plan may restrict distributions.
- Distributions from a governmental 457(b) deferred compensation plan are generally not subject to the 10% premature withdrawal penalty regardless of your age at the time of the distribution. If you roll your governmental 457(b) deferred compensation plan to another plan that is not a governmental 457(b) deferred compensation plan, or into an IRA, any subsequent distributions may be subject to a 10% premature withdrawal penalty.
- Eligible rollovers into a governmental 457(b) deferred compensation plan that were previously subject to a 10% premature withdrawal penalty will continue to be subject to that penalty at the time of withdrawal unless you are over age 59½ or some other exception applies.
- Amounts rolled over to a governmental 457(b) plan generally cannot be withdrawn prior to separation from service or attainment of age 70½.

ELIGIBLE ROLLOVER DISTRIBUTIONS PAID DIRECTLY TO YOU

You can request that we pay you directly. Except for IRA distributions, when we pay you directly, federal law requires us to withhold 20% for federal income taxes.

If a distribution is paid directly to you, you may subsequently roll over any pre-tax contributions to another employer-sponsored plan or to an IRA within 60 days. Any distributions of after-tax contributions paid directly to you may not be rolled over to another employer-sponsored plan. However, they may subsequently be rolled over to an IRA within 60 days.

If your eligible rollover distribution is paid directly to you and not rolled over (including any amount withheld), the distribution will be taxable to you in the year you receive it. The distribution will not be taxable to the extent you roll other funds to replace the amount distributed and the amount withheld.

AMOUNTS NOT ELIGIBLE FOR ROLLOVER

Some amounts not eligible for rollover include these: amounts paid to non-spousal beneficiaries, amounts paid from a non-qualified (after-tax) annuity that is not part of your employer's plan, financial hardship withdrawals, required minimum distributions, deemed distributions due to loan default, and amounts paid from certain deferred compensation plans. If you direct us to pay the distribution to you, and it is not an eligible rollover distribution, we will apply a 10% federal income tax withholding unless you indicate differently.

LOANS

If your plan specifies and you request a 100% withdrawal, the account balance will be reduced by the outstanding loan balance. The offset loan amount will be reported as a taxable distribution to you and will be taxable to you unless you roll over an amount equal to the outstanding loan balance to an employer-sponsored plan or IRA. An amount equal to 20% of the outstanding loan balance will be withheld from your distribution for federal taxes. You may choose to pay off the outstanding loan balance prior to the 100% withdrawal.

10% PENALTY

Unless an exception applies, the IRS may also assess a 10% federal tax penalty for early distributions if you are younger than 59½.

SPECIAL TAX TREATMENT FOR CERTAIN LUMP-SUM DISTRIBUTIONS

If you were born before January 1, 1936, and if your qualified plan distribution qualified as a "lump-sum distribution," you may be entitled to special tax treatment regarding your payment.

TAXATION OF ROTH IRAS AND ROTH ACCOUNTS

Contributions to Roth IRAs and Roth accounts are not deductible and therefore are distributed tax-free at any time. Rollovers or conversions from a traditional IRA to a Roth IRA are taxable in the year of the distribution from the traditional IRA. Earnings which accumulate in a Roth IRA or Roth Account are not taxed currently and are not taxed upon a "qualified" distribution (1) made after the end of the five year period beginning with the tax year in which the first contribution or conversion to a Roth IRA was made, and (2) made after the date you attain age 59½, upon your death or disability, or as a qualified first time home buyer distribution (not applicable to Roth accounts). Distributions of earnings that do not meet the requirements above are taxable, and are generally subject to the 10% penalty tax.

PRIVATE TAX-EXEMPT EMPLOYER DEFERRED COMPENSATION PLANS

Section 457(b) deferred compensation plans sponsored by private tax-exempt employers require participants to make an irrevocable election regarding the distribution of benefits. Commencement of payments cannot be later than April 1st of the year following the year you attain age 70½ unless you are still working for the plan's sponsor. Please contact your plan administrator for more information.

Please send completed forms to:

AIG VALIC Document Control
P.O. Box 15648
Amarillo, TX 79105-5648

Overnight delivery:

Valic Retirement Services Company, Inc.
2261 S.E. 27th Avenue
Amarillo, TX 79103

Fax: 1-877-202-0187

Call 1-888-568-2542 for assistance.

AIG VALIC is the marketing name for the group of companies comprising VALIC Financial Advisors, Inc.; VALIC Retirement Services Company; and The Variable Annuity Life Insurance Company (VALIC); each of which is a member company of American International Group, Inc.