



For qualified plan and 403(b) contracts

Withdrawal request

Important information

Use this form to request either a full surrender or a partial withdrawal from your annuity contract/certificate. This form is for use with the following lines of business: 403(b) contracts, 403(a) annuity plans, Keogh, 401(k), money purchase, profit-sharing, defined benefit, defined contribution, and 457(b) governmental plans. **This form should not be used for required minimum distributions (RMDs). Use form 130714 to request an RMD.**

Note: These contracts/certificates do not allow for withdrawal requests over the phone.

Impacts of withdrawals:

- We will only make payments to the contract owner. For example, if the contract is held in a plan, we will pay the plan.
- Withdrawals from some of our products may adversely affect underlying guarantees.
- Withdrawals from a variable annuity product with a guaranteed minimum withdrawal benefit may reduce that benefit. Information on your withdrawal benefit can be found online at johnhancock.com/annuities, on your latest statement, or through our service center.
- Withdrawals from a variable annuity product with a lifetime income amount may cause the lifetime income amount to be reduced or eliminated.
- Amounts withdrawn over the free amount may be subject to withdrawal charges.
- Certain annuity contracts with guaranteed rate period accounts may assess a market value adjustment to the withdrawal amount.
- Amounts withdrawn from your contract cannot be reinstated.
- Withdrawals have tax consequences.

Note: Please review your prospectus and/or contract regarding further impacts of withdrawals.

Tax information:

The taxable portion of a withdrawal is considered ordinary income for tax purposes. Unless an exception applies, withdrawals taken before age 59½ may also be subject to an additional 10% early distribution penalty tax under Internal Revenue Code (Code) section 72(t).

The taxable portion of a withdrawal paid to an individual contract owner is generally subject to mandatory 20% federal income tax withholding. Withholding does not apply to a withdrawal that is directly rolled over to an IRA or other eligible retirement plan. Please read the enclosed Special tax notice for annuitants. Because we pay the plan, we do not withhold on plan-owned contracts.

A qualified birth or adoption distribution or a hardship distribution is not subject to 20% withholding when paid to an individual contract owner. You must check the appropriate box in section 3 or 4 of this form to certify that your withdrawal meets the following requirements for one of these exceptions:

- Qualified birth or adoption distributions of up to \$5,000 per child may be taken during the 1-year period beginning on the date on which the contract owner's child is born or on which the contract owner's legal adoption of an eligible adoptee is finalized. An eligible adoptee is a person who has not reached age 18 or is physically or mentally incapable of self-support. A child of the contract owner's spouse is not an eligible adoptee. Qualified birth or adoption distributions are also exempt from the additional 10% penalty tax and may be repaid.
- A hardship distribution is a withdrawal taken for an immediate and heavy financial need when the contract owner has insufficient cash or other liquid assets "reasonably available" to meet the need. A hardship withdrawal cannot exceed the amount of the financial need, plus an amount needed to pay the taxes due on the withdrawal. Hardship distributions may not be rolled over.

403(b) annuities information:

If your contract has an existing loan, please read the following information detailing the criteria that must be met prior to any withdrawal request being processed:

- For a full surrender of a 403(b) contract, your loan obligation must be satisfied prior to the full surrender.
- For a partial withdrawal from a 403(b) with an existing loan, the contract value in the variable subaccounts after the withdrawal must be equal to or greater than the amount of the outstanding loan balance plus (a) the required federal income tax withholding of 20% and (b) \$2,000.

Salary reduction contributions made and interest credited to such amounts prior to 1/1/89 will be used to satisfy a withdrawal request before elective deferral contributions made after 12/31/88 can be withdrawn.

Spousal consent:

For certain 403(b) contracts and contracts held by individual owners, the owner's spouse must provide notarized consent to any request for a withdrawal. A request is not in good order without the spouse's consent, and we cannot process a withdrawal until we receive that consent. Please see section 10 for more information.



Important information (continued)

Some additional requirements may apply to certain withdrawals:

A signed "letter of acceptance" is required when requesting a direct rollover or transfer to an IRA or other eligible retirement plan.


A Medallion Signature Guarantee (MSG) is required when:


- A withdrawal check will be mailed to an address that is not the address on file.
- There was a change of the address on file within the last 15 days.
- The withdrawal request is for the amount of \$250,000 or more.


MSGs are used as an added security measure for your contract and may be obtained at most banks, financial institutions, or credit unions. The MSG we receive must be an original; facsimiles or photocopies will not be accepted.

Note: If you are receiving a series of substantially equal payments in order to avoid the 10% early withdrawal penalty under section 72(t) of the Code, any unscheduled withdrawal from your contract will be considered a modification, and will result in the imposition of the 10% penalty to all previous and possibly subsequent withdrawals. Please consult your own tax professional for additional information.

Contact information

 **Website:** johnhancock.com/annuities

 **Phone:** 800-344-1029
TTY: 800-555-1158

 **Mail:**
See return instructions at end of this form.



1. Contract information

Contract number

Owner information:

Owner name (or custodian name, if applicable) (First)

MI

Last

Social Security number (or TIN)

Default withholding rules will apply in sections 5 and 6 if you do not provide your SSN or TIN.

Date of birth (mm/dd/yyyy)

Phone number

Mobile number See section 2.

Email address

Address (Street)

City

State

Zip code

Country (if outside the U.S.)

Check here if address provided is permanent address change for your annuity contracts.

Financial professional name (if applicable) (First)

MI

Last

Phone number

2. Text message consent



Check the box below if you provided your mobile phone number on this form and wish to receive status updates for claims, account servicing, and payment-related purposes via SMS text messages. If you do not check this box, you will receive updates via U.S. mail.

I authorize and expressly consent to receiving phone calls and SMS/text and voice messages delivered to my phone number placed by John Hancock, its affiliates, associates, and service providers, from an automatic phone dialing system and/or using an artificial or prerecorded voice, for claims, account servicing, and payment-related purposes. I understand that message frequency may vary and that the number of text messages I receive may vary depending upon my claim and account activity and communications with John Hancock. Message and data rates may apply. I confirm that I am the owner and authorized user of the mobile phone number provided on this form and I agree to notify John Hancock immediately if I change or obtain a new phone number, or no longer maintain the phone number provided. I understand that I need not sign this form as a condition to purchase goods or services and that SMS/text messages and voice messages are not inherently secure and carry security risks. For example, messages may be sent in unencrypted form. They could be viewed by others if they have access to my device or if my messages are sent to another device. The privacy of my data cannot be guaranteed while using the service. View our privacy policy at johnhancock.com/privacy.

By checking this box, I understand the risks, and I expressly **consent to receiving** these SMS/text messages and ask John Hancock to communicate with me in this format.



3. Withdrawal instructions

A. Select only one of the following options:

Option 1: **Fully surrender my contract/certificate.**


Option 2: **Withdraw a specific amount:** \$ _____

Select net or gross below:

Net (default)—You will receive a check for the amount indicated above. Any applicable sales charges or federal or state taxes will be deducted **from the value remaining in your contract.**

Note: Any applicable sales charges or federal or state tax withholding deducted from the contract value is treated as part of the total amount withdrawn from the contract.

Gross—You may receive a check for less than the amount indicated above. Any applicable sales charges or federal or state tax withholding will be deducted **from the amount indicated above.**

 Your contract may have a rider that guarantees certain benefits. This request may result in an excess withdrawal that can significantly reduce those benefits. Please refer to your contract or prospectus for more information on the effects of excess withdrawals.

Select to prorate or provide a specific investment option request below:

Prorate (default)—Money is withdrawn from all variable investment options proportionately to the allocations of the contract.

Specific investment option request (available for variable products only)—Indicate below from which portfolios you would like your withdrawal and provide either a specified amount (\$) or percentage (%) next to the portfolio(s) you wish to redeem from.

_____ \$ _____ or _____ %
Portfolio name or number

_____ \$ _____ or _____ %
Portfolio name or number

_____ \$ _____ or _____ %
Portfolio name or number

Option 3: **Calculate and distribute my maximum amount available without reset under my current Guaranteed Minimum Withdrawal Benefit rider.**

Option 4: **Withdraw the free amount as defined by my contract.** This option refers to the free amount as defined by the annuity contract. If your contract is a variable annuity, further information is provided in your prospectus. This amount may differ from the optional withdrawal benefit amount. Information regarding the calculation of these benefits can be found in your prospectus, online at johnhancock.com/annuities, on your contract statement, or by contacting our service center.

Calculate and distribute my free withdrawal amount (default).

Calculate and distribute my maximum amount without surrendering the contract.

Note: Includes the free withdrawal amount plus all payments outside the withdrawal charge schedule. Please refer to your contract/certificate and/or prospectus for details

Option 5: **Withdraw only all of the interest accrued on my contract.** This option applies to fixed annuities and the guaranteed interest account on Revolution Value II and Revolution Extra II products only. If the available interest in your contract/certificate is greater than the contract/certificate free withdrawal amount, surrender charges may apply.

Option 6: **Withdraw my renewal amount plus interest earned on the renewal date.** Renewal amount withdrawals apply to fixed annuities and fixed accounts. If only one payment has been made to the contract, your contract will be fully surrendered. Applicable fees and surrender charges may apply.

Note: For GPA Choice and Performa Plus fixed annuities, 5-year renewal amount withdrawals can be submitted from the day you received your renewal letter processed on your contract anniversary and until 30 days after the renewal has occurred.

B. For individual contract owners other than 403(b) contract owners (403(b) contract owners must complete section 4 instead).

If applicable, please check one of the boxes below.

My withdrawal is a qualified birth or adoption distribution.

My withdrawal is a qualified hardship distribution. I have an immediate and heavy financial need and have insufficient cash or liquid assets reasonably available to satisfy that need.

Note: If a box is not checked, the withdrawal will be subject to mandatory 20% withholding.



4. Additional requirement for 403(b) contracts only

The tax rules governing withdrawals from a 403(b) contract are complex. In general, a distribution cannot be taken before the contract owner attains age 59½, separation from employment, total disability, or death. However, the Code also allows limited withdrawals under certain circumstances. Please consult with your own tax professional and check the appropriate box below to indicate the triggering event that supports your withdrawal request. **You must check a box below in order to obtain a withdrawal.**

I represent that the withdrawal requested in section 3 of this form qualifies for distribution for the following reason:

- I have reached age 59½.
- I have separated from employment—confirmation from your employer may be required.
- I meet the definition of total disability in Code section 72(m)(7)—a physician's statement may be required.
- The contract owner has died—additional paperwork is required. Please contact our service center to request a death benefit package.
- The plan has terminated—documentation is required, signed by the plan administrator, to attest that the plan has terminated.
- My withdrawal is a qualified birth or adoption distribution.
- My withdrawal is a qualified hardship distribution as I have an immediate and heavy financial need and have insufficient cash or liquid assets reasonably available to meet that need—under Code section 403(b)(11), a hardship distribution cannot include the earnings on salary reduction contributions (only the actual contributions can be distributed). As a result, a 403(b) contract generally cannot be fully surrendered in the case of financial hardship.

5. Federal income tax withholding

For 403(b) contracts and contracts held by individual owners:

A. Eligible rollover distributions:

With limited exceptions, a surrender or withdrawal is an eligible rollover distribution. Federal law requires that we withhold 20% from the taxable portion of an eligible rollover distribution. We do not have to withhold on an eligible rollover distribution if you instruct us to process a direct rollover to an IRA or other eligible retirement plan. Please read the enclosed Special tax notice for annuitants.

Note: For qualified birth or adoption distributions or hardship distributions, please complete section 5B instead.

I choose not to do a direct rollover.

I have read the Special tax notice for annuitants and I understand that 20% will be withheld from the taxable portion of my eligible rollover distribution. I waive the 30-day waiting period.

I instruct you to roll my eligible rollover distribution directly to an IRA or other eligible retirement plan with:

I have read the Special tax notice for annuitants. I have enclosed the required forms to process the rollover. I waive the 30-day waiting period.

Note: If you wish to complete a direct rollover, you must provide John Hancock with the proper paperwork from the financial institution that holds your IRA or from the other eligible retirement plan.

B. If in section 3 or 4 of this form you indicated that your withdrawal is a qualified birth or adoption distribution or a hardship distribution, the withdrawal is not treated as an eligible rollover distribution subject to 20% withholding. Instead, the following federal withholding rules apply.

You must provide your U.S. residence address in order to elect no withholding. If you elect not to have income tax withheld from your withdrawal, or you do not have enough 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.

John Hancock will withhold 10% from the taxable portion of your withdrawal unless you elect otherwise below.

Do not withhold federal income tax.

Withhold \$ _____ or _____% for federal income tax.

The dollar amount or percent must equal at least 10% of the taxable portion of your withdrawal. If the amount requested is less than 10% of the taxable portion of your distribution, John Hancock will default to 10%.



In order to elect out of withholding, you must provide your full Social Security number or taxpayer identification number in section 1 of this form or already have a completed IRS Form W-9 on file with us.



6. State income tax withholding**For 403(b) contracts and contracts held by individual owners:**

State income tax withholding may also apply to the taxable portion of any eligible rollover distribution you elect **not** to roll over directly to an IRA or other eligible retirement plan. State withholding may also apply to the taxable portion of any qualified birth or adoption distribution or hardship distribution. The applicable state withholding rules are outlined below. If you reside in a state that gives you withholding options, you must provide the information or forms requested below. If you do not, we will apply state withholding based on your state's default rules.

State income tax applies even if the state allows you to elect out of withholding. Note some states impose different withholding rules depending on the type of distribution you are taking. Refer to your state of residence for its requirements.

A. Alaska, Arizona, Florida, Hawaii, Kentucky, Mississippi, Nevada, New Hampshire, New York, Ohio, Pennsylvania, Rhode Island, South Dakota, Tennessee, Texas, Washington, or Wyoming:

Either your state has no applicable income tax or the state has no provision for withholding on withdrawals from a qualified plan or contract. Therefore, we cannot withhold state tax.

B. California, Georgia, Indiana, Missouri, Montana, New Jersey, New Mexico, or Wisconsin:

You may elect whether or not to have state tax withheld on any distribution. If you elect to have state tax withheld, you must specify an amount to withhold. We will not withhold state tax unless you enter an amount below.

Do not withhold state income tax. **Withhold** \$ _____ for state income tax (whole dollar amount of at least \$10).

C. Iowa, Kansas, Maine, Massachusetts, or Nebraska:

State income tax withholding is required whenever federal income taxes are withheld. We will apply the state's default withholding rate to the taxable portion of your withdrawal. You cannot elect out of state withholding when federal tax is withheld.

D. Oklahoma or Oregon:

You may elect whether or not to have state tax withheld. If you elect to have state income tax withheld we will apply the state's default withholding rate.

Do not withhold state income tax. **Withhold** state income tax.

Oklahoma only (optional): **Withhold an additional** \$ _____ state income tax (whole dollar amount of at least \$10).

E. Arkansas:

State withholding is mandatory for any eligible rollover distribution that is not rolled over directly to an IRA or eligible retirement plan. State withholding is also required on any other withdrawals when federal income tax is withheld. We will apply the appropriate state withholding rate to the taxable portion of your withdrawal. However, you can elect out of Arkansas state withholding on a qualified birth or adoption distribution or hardship distribution by providing us with a completed Form AR4P. The Arkansas form is available in the tax center on our website at johnhancock.com/annuities.

F. Connecticut:

State income tax withholding applies and you must provide a completed Connecticut Form CT-W4P. If you do not provide a properly completed Form CT-W4P, we must withhold 6.99% on any withdrawal. However, if you request a full surrender of your contract, Connecticut withholding is mandatory at the 6.99% rate. The Connecticut form is available in the tax center on our website at johnhancock.com/annuities.

G. District of Columbia:

Withholding is required only if the withdrawal results in the full surrender of your contract.

H. Maryland:

State withholding is mandatory for any eligible rollover distribution that is not rolled over directly to an IRA or other eligible retirement plan. For a qualified birth or adoption distribution or hardship distribution, you may elect below whether or not to have state tax withheld. If you elect to have state tax withheld from such a withdrawal, you must specify an amount to withhold. We will not withhold state tax from a qualified birth or adoption distribution or hardship distribution unless you enter an amount below.

Do not withhold state income tax. **Withhold** \$ _____ for state income tax (whole dollar amount of at least \$10).

I. Michigan:

State tax withholding requirements depend on your age and the amount of the withdrawal; please provide a completed Michigan Form MI W-4P to claim any exemptions. The Michigan form is available in the tax center on our website at johnhancock.com/annuities.

J. Minnesota:

State income tax withholding applies. You must provide a completed Minnesota Form W-4MNP to claim any applicable allowances or to elect out of state withholding. The Minnesota form is available in the tax center on our website at johnhancock.com/annuities.

K. North Carolina:

State withholding is mandatory for any eligible rollover distribution that is not rolled over directly to an IRA or other eligible retirement plan. For a qualified birth or adoption distribution or hardship distribution, you may elect below whether or not to have state tax withheld. If you elect to have state tax withheld from such a distribution, we will apply the state's default withholding rate.

Do not withhold state income tax. **Withhold** state income tax.

L. Puerto Rico:

We must generally withhold 20% on a full withdrawal and 10% on a partial withdrawal.



6. State income tax withholding (continued)

M. Vermont:

State withholding is mandatory for any eligible rollover distribution that is not rolled over directly to an IRA or other eligible retirement plan. For a qualified birth or adoption distribution or hardship distribution, state withholding will apply whenever federal tax is withheld, unless you instruct us otherwise below.

Do not withhold state income tax.

N. Virginia:

State withholding is mandatory for any eligible rollover distribution that is not rolled over directly to an IRA or eligible retirement plan. State withholding is also required on a qualified birth or adoption distribution or hardship distribution when federal income tax is withheld. We will apply the state's default withholding rate to the taxable portion of any withdrawal. If you elect out of federal withholding on a qualified birth or adoption distribution or hardship distribution, you are not subject to state withholding on that distribution. However, state income tax will still apply and you may request that we withhold Virginia income tax on that distribution by providing us a completed Form VA-4P. The Virginia form is available in the tax center on our website at johnhancock.com/annuities.

O. If you reside in a state not listed above:

State tax withholding is completely voluntary. If you would like state taxes withheld, you must specify an amount or a percentage to withhold.

Withhold \$ _____ (whole dollar amount of at least \$10) **or** _____% for state income tax.

7. Tax withholding for non-U.S. persons

If you are not a U.S. person, the above federal and state withholding rules do not apply.

Instead, we are required to withhold 30% of the taxable portion of your payments, unless your tax residence is in a country which has a tax treaty with the United States and that treaty provides an applicable exemption or reduced withholding rate. To claim the benefit of a tax treaty, you must provide a properly completed IRS Form W-8BEN, which must include the foreign tax identifying number issued by your country of tax residence or an explanation of why you do not have one. If you do not have a foreign tax identifying number, you must also include a U.S. taxpayer identification number (TIN) on the Form W-8BEN to claim treaty benefits. If you do not have a U.S. TIN, you may apply for one by submitting Form W-7 to the IRS. IRS Forms W-7 and W-8BEN and their instructions are available on the IRS website at irs.gov.

8. Delivery options

Select one of the following options. Unless otherwise instructed below, or if John Hancock does not have your electronic deposit instructions on file, in good order, your payments will be mailed to your address of record by regular mail.

Option 1: **Electronically deposited into your account**—Select either electronic funds transfer (EFT) or federal fund wire and provide your account information.

EFT—The financial institution (bank, savings and loan, or credit union) you elect to receive electronic deposits must be a member of the automated clearing house (ACH) network. Please contact your financial institution if you are unsure that it is a part of the ACH network. The financial institution account must be registered in the name of the John Hancock contract owner(s). Payments will arrive in your financial institution account within 3–5 business days. However, if your contract is not eligible for EFT, we do not have validated EFT instructions on file, or your financial institution account information cannot be authenticated, your payments will be sent to your address of record by regular mail.

Federal fund wire—The payments will arrive in your financial institution account within 1–2 business days. A fee will be charged for this service. This fee is considered a separate withdrawal from your annuity contract. Fees may also be charged by your financial institution.

Provide your account information below. Attach a voided check here. Deposit slips and starter checks are not accepted. The voided check must be in the name of the owner. If a fiduciary (e.g., power of attorney, guardian, conservator, etc.) is the owner, their fiduciary status must be preprinted on the check (not applicable if the fiduciary is a joint owner).

Example: Jane Smith, POA.

Checking

Savings

Owner's name		
Address		Date _____
City, State, Zip code		
Pay to the order of _____		\$ _____
Financial institution name		
Address		
City, State, Zip code		
For		
⑈ 1 2 3 4 5 6 7 8 9 ⑆ 0 1 2 3 4 5 6 7 8 9 0 1 2 3 ⑆ 0 1 2 3		
Routing number		Account number
		Check number

Financial institution _____

Routing/ABA number _____

Name(s) listed on account _____

Account number _____

Important: If you are unable to provide a voided check, please include either a copy of a recent account statement or a letter from your financial institution (on their letterhead) that indicates the following information: the routing/ABA number, the account number, the account type (checking or savings), and the owner(s) of the financial institution account. If you provide a letter, the letter must be signed by an authorized party at the financial institution along with all contract owner(s) to certify that the information provided is correct.



8. Delivery options (continued)

Option 2: **Send the payments to the address of record.**

- Regular mail (default)—The payments will arrive within 5–7 business days.
- Overnight mail—The payments will arrive within 1–2 business days. A fee will be charged for this service. This fee is considered a separate withdrawal from your annuity contract.

Option 3: **Send the payments to an alternate address.**

- Regular mail—The payments will arrive within 5–7 business days.
- Overnight mail—The payments will arrive within 1–2 business days. A fee will be charged for this service. This fee is considered a separate withdrawal from your annuity contract.

Note: An MSG is required if you choose to have the payments sent to an alternate address. The MSG must be original; facsimiles will not be accepted.

Alternate address (Street) _____

City _____ State _____ Zip code _____ Country (if outside the U.S.) _____

9. Signatures and authorizations

Medallion Signature Guarantee (MSG):

- Yes No Have you changed the mailing address on file with John Hancock within the last 15 days?*
- Yes No Is the amount requested \$250,000 or over?*
- Yes No Have you opted to have your check sent to an alternate address?*

*Not applicable to New Jersey contracts.



If you answered yes to any of the questions above, you must obtain an MSG. MSGs are used as an added security measure for your contract and may be obtained at most banks, financial institutions, or credit unions. The MSG we receive must be an original; facsimiles or photocopies will not be accepted.

EFT authorization:

I hereby authorize John Hancock Life Insurance Company (U.S.A.)/John Hancock Life Insurance Company of New York (John Hancock) to deposit annuity payments directly to my bank, savings and loan, or credit union (financial institution) account, as indicated on this form. I authorize the financial institution identified on this form to accept such credit entries from John Hancock, and to credit my account at that financial institution in accordance with those credit entries. If an amount should be credited to my account in error (including any overpayment to my account), or after my death or ineligibility, I authorize and direct the financial institution designated on this form to debit my account and refund such amount to John Hancock. I agree to direct my joint account owners, executor, administrators, or assignees to refund to John Hancock any payments that are made following my death so that they may be redistributed to my beneficiary(ies) or contingent annuitant(s), if applicable. I agree to hold John Hancock harmless for any failure by my financial institution to credit my account or for any delay by my financial institution in crediting funds to my account.

I agree that this arrangement is made for my convenience, and that any payments directly received by me, rather than credited to my account, as a result of mistake or otherwise, shall not subject John Hancock to any liability in excess of that owed to me under the applicable annuity contract. I understand that John Hancock is relying on the information that I have provided on this form, and further understand that John Hancock will not be liable for any losses or charges due to incorrect, outdated or incomplete information that has been provided on this form.

If the financial institution account identified on this form is jointly owned, this authorization will not be effective without the signature of the joint account owner below.

Joint account owner EFT authorization:

I agree to notify John Hancock upon the death of the contract owner and I agree to refund John Hancock any payments that are made to the financial institution account identified on this form following the contract owner's death or ineligibility. I understand that I may be personally liable, both individually and as a joint owner of the account identified on this form, for the amount of all benefit or survivor benefit payments with due dates after the death of the contract owner. If I am entitled to any benefit from the applicable annuity contract as a beneficiary or contingent annuitant of the contract owner, the amount of my liabilities may be deducted from the amount payable to me.

By signing this form, I am providing written permission for John Hancock to obtain a consumer report about me as part of its process to authenticate my identity and to protect against fraud. This consumer report will be used solely to validate that I am an authorized holder, user or signatory of the account used or to be used in connection with the current or future transfer of funds. John Hancock will notify me if any adverse action is taken on the basis of such report.

- I have read and understand the entirety of this form, including the important information included on pages 1 and 2.

I hereby certify the information on this form is complete and accurate and I understand that this request is subject to all the terms and conditions of the contract/certificate and prospectus. I also understand that once this distribution is made and released by John Hancock, it will not be reinstated to this contract/certificate. I direct John Hancock to make the disbursement in accordance with the designation on this form. I acknowledge that any withdrawal or full surrender of my annuity contract/certificate may result in a surrender charge and may also be subject to taxation and an additional 10% penalty tax if I am under 59½. I am also aware that I may lose certain benefits if I surrender my contract.



9. Signatures and authorizations (continued)

Certification required of U.S. persons only (including U.S. citizens, U.S. resident aliens, or other U.S. persons).

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number,
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 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
3. I am a U.S. citizen or other U.S. person, including a U.S. resident alien (as defined in the IRS Form W-9 instructions).

Certification instructions: You must check the box below 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 am subject to backup withholding as a result of a failure to report all interest and dividends.



If you are signing on behalf of an entity or other individual (e.g., Trustee, Power of Attorney, Guardian), please indicate your title by checking the appropriate box below your signature. If a title is not indicated or the owner's full Social Security number or taxpayer identification number is not included in section 1 of this form, mandatory tax withholding rules will apply unless we already have a completed IRS Form W-9 or applicable substitute on file with us.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to prevent backup withholding.

SIGN HERE

Signature of owner (or fiduciary) _____ Date signed (mm/dd/yyyy)

Title (please check appropriate box, if applicable):

Trustee Power of Attorney Guardian Other _____

Place Medallion Signature Guarantee stamp in below box
(if applicable). Must be original and cannot be faxed.

Medallion Signature Guarantee



FOR JOHN HANCOCK VERIFICATION USE ONLY.

Additional signatures (if applicable):

SIGN HERE

Signature of collateral assignee (if any) _____ Date signed (mm/dd/yyyy)

Title (please check appropriate box, if applicable):

Trustee Power of Attorney Guardian Other _____

SIGN HERE

Signature of custodian (if applicable) _____ Date signed (mm/dd/yyyy)

Title (please check appropriate box, if applicable):

Trustee Power of Attorney Guardian Other _____



Contract number: _____

9. Signatures and authorizations (continued)

EFT authorization for joint financial institution account owner:

SIGN HERE _____
Signature of joint financial institution account owner (if any) Date signed (mm/dd/yyyy)

403(b) business only—employer signature:

SIGN HERE _____
Signature of employer Date signed (mm/dd/yyyy)

Print name (First) MI Last

Title of employer TIN of employer Employer phone number

10. Spouse consent

Spousal consent for certain 403(b) contracts and contracts held by individual owners:

If you are married, federal law requires that your spouse provide notarized consent not more than 90 days prior to the date a withdrawal or surrender is paid. This requirement does not apply to non-ERISA 403(b) contracts.

John Hancock will review standard contract information such as beneficiaries, co-annuitants, and covered persons under certain riders to determine if there is a spouse listed on the contract that would need to provide consent on this request. If this section is left blank and there is reason to believe a spousal consent signature is required based on standard contract information, this request will not be considered in good order and will not be processed. In that case, you will need either to resubmit your request with the missing signature or provide us with confirmation that there is no spouse to sign the request.

By signing below, I confirm I am the spouse of the above-named contract owner. I acknowledge that, in accordance with federal law, I have a right to receive either a preretirement survivor annuity, if my spouse should die before the otherwise applicable retirement date, or a joint and survivor annuity payment option when my spouse retires, either of which survivor annuity must be at least 50% of the annuity payable to my spouse. I have reviewed this request either to withdraw funds from or to surrender this contract in full. By signing this form, I acknowledge and consent to the distribution of the withdrawal or surrender elected on this form. I understand that a withdrawal may affect the amount available for a preretirement survivor annuity benefit or a joint and survivor annuity benefit under the contract. In addition, I understand that a full surrender will terminate any survivor benefits that might otherwise have been payable to me under this contract. I also consent to my spouse's waiver of the 30-day waiting period in section 5.

SIGN HERE _____
Signature of spouse Date signed (mm/dd/yyyy)

Notarization:

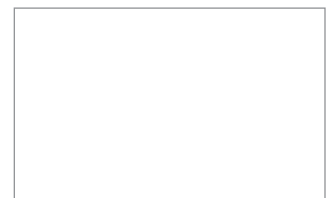
On this _____ day of _____, _____, before me, _____ the undersigned
Day Month Year Notary name

Notary Public, personally appeared _____, and proved to me through satisfactory evidence of identity,
Spouse name

which was _____, to be the person whose name was signed above in my presence.

SIGN HERE _____
Signature of notary public


My commission expires (mm/dd/yyyy) State County



Return instructions

Please submit your completed and signed form via one of the following:

✉ **National contracts:** John Hancock Annuities Service Center
PO Box 55444, Boston, MA 02205-5444

 **Fax:** 617-663-3160

New York contracts: John Hancock Annuities Service Center
PO Box 55445, Boston, MA 02205-5445

All overnight mail: Annuities Service Center
John Hancock Insurance
410 University Avenue, Suite 55444, Westwood, MA 02090



Register online:

Go to johnhancock.com/annuities to create an online account and gain access to contract-specific details and self-service tools. Once registered, select to receive your contract documents electronically under your Paperless settings.

