

## Important information

- This form should be used to transfer Account Value between Separate Account Divisions and the Guaranteed Principal Account (GPA).
- The requested transaction will take effect as of the Valuation Date we receive this form in **good order** at our Administrative Office.
- Transfers must be indicated in Dollar Amounts or Whole Percentages, but not both.
- Transfers from the GPA are limited to one per policy year and may not exceed the lesser of 25% of the non-loaned GPA Value at the time of the transfer; however, if in each of the previous three policy years 25% of the GPA Value has been transferred and there have been no premium payments or transfers to the GPA (except as the result of a loan), 100% of the GPA Value may be transferred to the Separate Account.
- All transfer requests are subject to the limitations on frequent transfers and excessive trading imposed by us and by the funds underlying the Separate Account Divisions. We reserve the right to restrict or reject any transfers. Refer to your Policy and Prospectus for further details. MassMutual reserves the right to charge a fee not to exceed \$10.00 per transfer if there are more than six transfers in a policy year.
- If the Fund Transfer request is for a subset of Insureds under the Contract, please attach a census with the Insureds and Policy Numbers listed.

## Instructions to complete this Form

1. Print the Contract Number, Policy Number, the Insured's Name(s), the Owner's Name, the Owner's Taxpayer Identification Number, the Owner's Daytime Telephone Number and Email address in the spaces provided at the top of the form.
2. Enter the amount being deducted in the "Transfer **FROM** Dollar (\$) or Percent (%)" field then enter the division name(s) or fund abbreviation(s). Each division should only be listed once. Use either whole percentages or dollars.
3. Enter the amount being transferred in the "Transfer **TO** Dollar (\$) or Percent (%)" field then enter the division name(s) or fund abbreviation(s). Each division should only be listed once. Use either whole percentages or dollars.
  - ♦ The total of the "Transfer To" column must equal either 100% if percentages were used or the total dollars from the "Transfer From" column.
4. The Policy Owner must sign the form. If more than one Owner exists, then all Owners must sign the form. If the Owner is a Corporation, refer to the Corporate Signature Requirements below. If the Policy is assigned, the Assignee must sign the form.
5. Fax, email or mail page two of this form per the instructions listed below under "Customer Service."

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## Corporate Signature Requirements – For Policies owned by or assigned to a Corporation


If the Owner or Assignee is a Corporation, Partnership or Trust, then the title of the Owner(s) or Assignee must be included and the Name of the Corporation, Partnership or Trust must be printed in the space provided.

- Sole Corporate Officer:** If the insured or family member is the sole officer, his/her signature is acceptable if accompanied by a notarized statement indicating that the corporation has a sole officer, or if the corporate seal is affixed.
- Two Corporate Officers:** We require the signature of two different corporate officers. Their corporate titles must be included. One signature will be accepted only if the officer is not the insured or a family member of the insured.


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## Customer Service

**To submit your request, use one of the following:**


 **Fax this form to:**  
1-860-562-6154  
*Retain this original and the fax machine's confirmation statement for your files.*

 **Email this form to:**  
lcmclientservices@massmutual.com

 **Mail this form to:**  
Massachusetts Mutual Life Insurance Company  
LCM Document Management Hub  
1295 State Street  
PO BOX 2488  
Springfield MA 01101-2488

**For additional information regarding your policy, please use any of the following resources:**

 Internet Service Connection  
www.massmutual.com

 MassMutual Customer Service Center  
1-800-665-2654  
Monday - Friday, 8:00 a.m. - 5:00 p.m. ET

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**We will only accept responsibility for forms that are faxed or mailed in accordance with the above instructions.**

