

Please enter the following Owner info:

Account No: \_\_\_\_\_

Tax ID (SSN/TIN): \_\_\_\_\_



## Annual Confirm/Update Beneficiary Designation Form

I designate that upon my death, the assets in this account be paid to the beneficiaries named below. The interest of any beneficiary that predeceases me terminates completely, and the percentage share of any remaining beneficiaries will be increased on a pro rata basis. If no beneficiaries are named, my estate will be my beneficiary.

I elect not to designate beneficiaries at this time and understand that I may designate beneficiaries at a later date. **Primary Beneficiaries** *(The total percentage designated must equal 100%)*

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Relationship: \_\_\_\_\_

Tax ID (SSN/TIN) \_\_\_\_\_ Percent Designated: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Relationship: \_\_\_\_\_

Tax ID (SSN/TIN) \_\_\_\_\_ Percent Designated: \_\_\_\_\_

**Contingent Beneficiaries** *(The total percentage designated must equal 100%)(The balance in the account will be payable to these beneficiaries if all primary beneficiaries have predeceased the IRA owner)*

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Relationship: \_\_\_\_\_

Tax ID (SSN/TIN) \_\_\_\_\_ Percent Designated: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Relationship: \_\_\_\_\_

Tax ID (SSN/TIN) \_\_\_\_\_ Percent Designated: \_\_\_\_\_

### Signature

X \_\_\_\_\_  
Signature of IRA Owner Date (MM/DD/YYYY)

### Spousal Consent

*Spousal consent should be considered if either the trust or the residence of the IRA owner is located in a community or marital property state.*

### **Current Marital Status**

**I Am Not Married** – I understand that if I become married in the future, I should review the requirements for spousal consent.

**I Am Married** – I understand that if I choose to designate a primary beneficiary other than or in addition to my spouse, my spouse should sign below.

### Consent of Spouse

I am the spouse of the above-named IRA owner. I acknowledge that I have received a fair and reasonable disclosure of my spouse's property and financial obligations. Because of the important tax consequences of giving up my interest in this IRA, I have been advised to see a tax professional.

I hereby give the IRA owner my interest in the assets or property deposited in this IRA and consent to the beneficiary designation indicated above. I assume full responsibility for any adverse consequences that may result.

### Signature

X \_\_\_\_\_  
Signature of Spouse Date (MM/DD/YYYY)