



Primary  Contingent (Please check one)

Per Stirpes

\_\_\_\_\_  
Name of Beneficiary (Individual or Trust)

\_\_\_\_\_  
% of Distribution

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Birthdate or Date of Trust

\_\_\_\_\_  
Beneficiary's Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

Primary  Contingent (Please check one)

Per Stirpes

\_\_\_\_\_  
Name of Beneficiary (Individual or Trust)

\_\_\_\_\_  
% of Distribution

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Birthdate or Date of Trust

\_\_\_\_\_  
Beneficiary's Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

Primary  Contingent (Please check one)

Per Stirpes

\_\_\_\_\_  
Name of Beneficiary (Individual or Trust)

\_\_\_\_\_  
% of Distribution

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Birthdate or Date of Trust

\_\_\_\_\_  
Beneficiary's Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

Please check here if you have attached a separate sheet with additional beneficiary designations. Include the date and your signature.

**Community Property Disclaimer**

**Spousal Consent – Custodian Disclaimer:** The Participant's spouse may have a property interest in the account, and may also have a right to dispose of that property interest by will. Therefore, the Custodian, together with any sponsors, issuers, depositories or other persons or entities associated with the investments in the account, specifically disclaim any warranty as to the effectiveness of the Participant's beneficiary designation in this Beneficiary Designation Change Form, or any warranty as to the ownership of the account after the death of the Participant or the Participant's spouse. For additional information, a qualified tax or legal professional should be consulted.

By signing below I acknowledge that I understand that, if I am subject to community property or marital property state requirements, my spouse may be required to consent to any beneficiary I designate who is not my spouse, or who is in addition to my spouse. I also understand that any beneficiary designation I make, other than my spouse, or in addition to my spouse, may not be effective without my spouse's consent. I certify, under penalty of perjury, if I am married, and have not named my spouse as my sole Primary Beneficiary, I have consulted a qualified tax or legal professional about the need to document spousal consent, and about the consequences of not obtaining my spouse's consent.

**3. Participant Authorization:**

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date