

Change of Beneficiary Form

Use this form to update the beneficiary information for your Traditional IRA, Roth IRA, Rollover IRA, SEP IRA, SIMPLE IRA or 403(b) account. If you hold more than one account with us and you provide the lead account number from your quarterly statement, all of your retirement accounts will be updated. If you wish to make separate beneficiary designations for different accounts, please provide the account number for the specific account you wish to change.

Note: If you are an active participant in an Employer's 403(b) plan, you should provide your employer with a copy of your beneficiary election.

Individual or Joint Tenant non-retirement accounts, please use the Transfer on Death (TOD) Form to update beneficiary designation..

1. PARTICIPANT INFORMATION

Name		IRA or 403(b) Account Number		
Mailing Address		City	State	Zip Code
Day Telephone	Evening Telephone	Cell Telephone		
Email Address				

Check here if contact information above is new. To update the name on an account, please include a completed Name Change Form.

2. PARTICIPANT'S DESIGNATION

My previous beneficiary designation will be replaced with the designation below.

Note: The share percentage must equal 100% for all Primary or all Contingent Beneficiaries. If neither the Primary nor the Contingent Beneficiary box is checked, the beneficiary will be deemed to be a Primary Beneficiary. If a trust is designated as a Beneficiary, please also provide the date of the trust.

In the event of my death, the balance in the account shall be paid to the Primary Beneficiaries who survive me in equal shares (or in the specified shares, if indicated). If none of the Primary Beneficiaries survive me, the balance in the account shall be paid to the Contingent Beneficiaries who survive me in equal shares (or in the specified shares, if indicated). I understand that, unless I have specified per Stirpes designations, if I name multiple beneficiaries and a beneficiary does not survive me, such interest is terminated and that percentage will be divided proportionately among the remaining beneficiaries. I understand that I may change my beneficiaries at any time by giving written notice to the Custodian. If I do not designate a beneficiary, or if all designated beneficiaries predecease me, my surviving spouse will become the beneficiary of my IRA. If I do not have a surviving spouse at the time of my death, my estate will become the beneficiary of my IRA.

PER STIRPES BENEFICIARY DESIGNATIONS—The Custodian shall accept as complete and accurate all written instructions provided in good order by the estate/executor with regard to the identification of the beneficiaries and the allocations thereto.

Primary Contingent (Please check one) Per Stirpes

Name of Beneficiary (Individual or Trust)		% of Distribution		
Relationship		Birthdate (mm/dd/yyyy) or Date of Trust		
Beneficiary's Mailing Address		City	State	Zip Code

Change of Beneficiary Form

Primary Contingent (Please check one)

Per Stirpes

Name of Beneficiary (Individual or Trust)

% of Distribution

Relationship

Birthdate (mm/dd/yyyy) 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 (mm/dd/yyyy) 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 (mm/dd/yyyy) 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'S AUTHORIZATION

Participant's Signature

Date