

Beneficiary Designation Form



Optional- This form is to be used if the space on the application is not sufficient to reflect all primary beneficiaries and/or contingent beneficiaries. Please mark on the application "see attached". If more space is needed, please use an additional form.

Owner's Primary Beneficiary Designation

In the event of the owner's death, death benefit proceeds are payable to the owner's primary beneficiary. If there are joint owners, the death benefit is payable upon the first death. If there are joint owners, the surviving joint owner, if any, will be the designated primary beneficiary unless otherwise specified below.

| | | | |
|---|--------------------------------------|--------------------------------------|---|
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | Percentage <input type="text"/> % | |
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | Percentage <input type="text"/> % | |
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | Percentage <input type="text"/> % | |
| Other (non-living entity, e.g., trust, corporation, estate, etc.) <input type="text"/> | | | Trust Date <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Tax Identification Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | Percentage <input type="text"/> % | |

Owner's Contingent Beneficiary Designation

If the owner's primary beneficiary is no longer living at the time of the owner's death, the owner's contingent beneficiary will receive the death benefit proceeds.

| | | | |
|---|--------------------------------------|--------------------------------------|---|
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | Percentage <input type="text"/> % | |
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | Percentage <input type="text"/> % | |
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | Percentage <input type="text"/> % | |
| Other (non-living entity, e.g., trust, corporation, estate, etc.) <input type="text"/> | | | Trust Date <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Tax Identification Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | Percentage <input type="text"/> % | |



Annuitant's Primary Beneficiary Designation

In the event of the annuitant's death, death benefit proceeds are payable to the annuitant's primary beneficiary. If there are joint annuitants, the death benefit is payable upon the second death. Complete this section only if the owner(s) and annuitant(s) are not the same.

| | | | |
|---|--------------------------------------|-----------------------------------|---|
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | | Percentage <input type="text"/> % |
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | | Percentage <input type="text"/> % |
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | | Percentage <input type="text"/> % |
| Other (non-living entity, e.g., trust, corporation, estate, etc.) <input type="text"/> | | | Trust Date <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Tax Identification Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | | Percentage <input type="text"/> % |

Annuitant's Contingent Beneficiary Designation

If the annuitant's primary beneficiary is no longer living at the time of the annuitant's death, the annuitant's contingent beneficiary will receive the death benefit proceeds. Complete this section only if the owner(s) and annuitant(s) are not the same.

| | | | |
|---|--------------------------------------|-----------------------------------|---|
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | | Percentage <input type="text"/> % |
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | | Percentage <input type="text"/> % |
| First Name <input type="text"/> | MI <input type="text"/> | Last Name <input type="text"/> | Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | | Percentage <input type="text"/> % |
| Other (non-living entity, e.g., trust, corporation, estate, etc.) <input type="text"/> | | | Trust Date <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Tax Identification Number <input type="text"/> - <input type="text"/> - <input type="text"/> | Relationship <input type="text"/> | | Percentage <input type="text"/> % |

Owner's Name (please print)

Joint Owner's Name (please print)

Date
 / /

Owner's Signature

Joint Owner's Signature

