# DESIGNATION OR CHANGE OF BENEFICIARY

SunAmerica IRA

**I. IRA, ROTH IRA OR SEP IRA**

Check One: ❑ IRA ❑ Roth IRA ❑ SEP ☐☐☐ - ☐☐☐☐☐☐ - ☐
Account Number

**II. DESIGNATION OF BENEFICIARY**

❑ I hereby make the following beneficiary designation(s) pursuant to the SunAmerica Trust Company Retirement Account indicated above.

**III. CHANGE OF BENEFICIARY**

❑ I hereby revoke all prior beneficiary designations and designate the beneficiary or beneficiaries for my account listed below.

**IV. PARTICIPANT INFORMATION**

Name

Address

City State Zip

Social Security Number Date of Birth

Area Code and Telephone Number

Marital Status *If you are married, spousal consent may be required. See Section VIII below.*

❑ single ❑ married

**V. DESIGNATION OF BENEFICIARY OR BENEFICIARIES**

*The following shall be my beneficiary or beneficiaries. If I designate more than one primary or contingent beneficiary, but do not specify the percentages to which such beneficiaries are entitled, payment will be made to the surviving beneficiaries in equal shares.*

*NOTE: For specific beneficiary provisions, please refer to the applicable sections of the Plan and the Disclosure Statement.*

**VI. PRIMARY BENEFICIARIES**

| Name | Gender | Relationship | Date of Birth | Social Security # | Address | Percentage |
|---|---|---|---|---|---|---|
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**VII. CONTINGENT BENEFICIARIES**

*Contingent beneficiaries are paid only if all primary beneficiaries predecease participant.*

| Name | Gender | Relationship | Date of Birth | Social Security # | Address | Percentage |
|---|---|---|---|---|---|---|
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**VIII. SPOUSAL CONSENT**

*If you are married, reside in a community or marital property state (AZ, CA, ID, LA, NV, NM, TX, WA and WI) and you have named someone other than your spouse as your sole primary beneficiary, your spouse must sign this form below. If required in your state, your spouse's signature must be witnessed by a Notary Public.*

I am the spouse of the above-named account holder. I acknowledge that I have received a fair and reasonable disclosure of my spouse's property and financial obligations. Due to the important tax consequences of giving up my interest in this IRA, Roth IRA or SEP IRA, I have been advised to see a tax professional. I hereby give the account holder any interest I have in the funds or property deposited in this IRA, Roth IRA or SEP IRA and consent to the beneficiary designation indicated above. I assume full responsibility for any adverse consequences that may result. No tax or legal advice was given to me by SunAmerica Trust Company.

Signature of Spouse (residents of community or marital property states) Date

**IX. SIGNATURE OF PARTICIPANT**

Participant Date

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