



Use this form to add or change the beneficiaries of your IRA Retirement account(s). If you need more room for information or signatures, use a copy of the relevant page.

## HELPFUL TO KNOW

- You may want to review this document with a tax, financial, or legal advisor.
- This form cancels any existing beneficiary information. Be sure this form includes ALL beneficiaries you want on the account(s).
- If you are married and live in a community property state (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, and Wisconsin) and you designate anyone other than your spouse as beneficiary, your designation cannot be accepted without your spouse's notarized signature in Section 5.

## 1. PERSONAL INFORMATION (\*required field)

Should IRA Services need to contact you in regards to this request, your preferred method of contact is:

Email  
Primary Phone

First Name*	Middle Name	Last Name*
Account Number	Social Security Number* (last 4 digits)	Date of Birth* (MM/DD/YYYY)
Phone* XXX-XXX-XXXX	Email (your personal email only)	

## 2. ACCOUNTS INCLUDED

List all accounts you want this form to apply to.

To indicate different beneficiaries for different accounts, use copies of this form.

IRA Services Account Number	IRA Services Account Number
IRA Services Account Number	IRA Services Account Number

## 3. BENEFICIARIES

### Marital Status

Single	Married	Divorced	Widowed
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### Primary Beneficiaries

For each beneficiary you list by name, check a beneficiary type and provide all information.

A "non-spouse" is any individual who is not your spouse under federal law.

For each child beneficiary, check 'Non-Spouse' and provide the name and the share percentage.

If you outlive a beneficiary and you want that beneficiary's share to go to his or her descendants, check "per stirpes."

Spouse	Name <i>If naming spouse as a beneficiary, do so here.</i>		Relationship	
Non-Spouse	Social Security or Taxpayer ID	Date of Birth (MM/DD/YYYY)	Share Percentage	Per stirpes
Trust			%	
Other Entity				

Non-Spouse	Name		Relationship	
Trust	Social Security or Taxpayer ID	Date of Birth (MM/DD/YYYY)	Share Percentage	Per stirpes
Other Entity			%	

Non-Spouse	Name		Relationship	
Trust	Social Security or Taxpayer ID	Date of Birth (MM/DD/YYYY)	Share Percentage	Per stirpes
Other Entity			%	

Non-Spouse	Name		Relationship	
Trust	Social Security or Taxpayer ID	Date of Birth (MM/DD/YYYY)	Share Percentage	Per stirpes
Other Entity			%	

Total must add to 100%

Contingent beneficiaries receive assets only if no primary beneficiary survives you.

Do NOT list any primary beneficiaries here.

A "non-spouse" is any individual who is not your spouse under federal law.

For each child beneficiary, check 'Non-Spouse' and provide the name and the share percentage.

If you outlive a beneficiary and you want that beneficiary's share to go to his or her descendants, check "per stirpes."

## Contingent Beneficiaries

Spouse	Name <i>If naming spouse as a beneficiary, do so here.</i>		Relationship	
Non-Spouse				
Trust	Social Security or Taxpayer ID	Date of Birth (MM/DD/YYYY)	Share Percentage	Per stirpes
Other Entity			%	

Non-Spouse	Name		Relationship	
Trust				
Other Entity	Social Security or Taxpayer ID	Date of Birth (MM/DD/YYYY)	Share Percentage	Per stirpes
			%	

Non-Spouse	Name		Relationship	
Trust				
Other Entity	Social Security or Taxpayer ID	Date of Birth (MM/DD/YYYY)	Share Percentage	Per stirpes
			%	

Non-Spouse	Name		Relationship	
Trust				
Other Entity	Social Security or Taxpayer ID	Date of Birth (MM/DD/YYYY)	Share Percentage	Per stirpes
			%	

Total must add to 100%		%	
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## 4. SIGNATURE (Account owner or authorized individual must sign and date.)

By signing below, you:

- Affirm that the beneficiary information provided on this form replaces any prior beneficiary information that may be on record for the indicated account(s).
- Acknowledge that, if you check "per stirpes," that any share otherwise payable to a beneficiary shall instead be paid to that beneficiary's surviving descendants by right of representation if the original beneficiary does not survive the account owner.
- Acknowledge that "per stirpes" creates a category of beneficiaries (for example, the children of a beneficiary), and therefore may end up including individuals not yet born or adopted.
- Acknowledge that listing beneficiaries by name does NOT create a category of beneficiaries, and that if you later want to include other beneficiaries, you will need to submit a new beneficiary form.
- Agree that IRA Services has no obligation to locate or notify any beneficiary or to independently verify any information submitted by any person claiming an interest in your account.
- Acknowledge that if you do not provide percentages, the account will be divided equally among primary or contingent beneficiaries, as applicable.
- Acknowledge that if you do not properly name a beneficiary, or no beneficiary survives you, your beneficiary will be your spouse or, if you are not married, your estate in accordance with the rules of succession in the Plan Document.
- Acknowledge that if you are married and live in a community property state (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, and Wisconsin) and you designate anyone other than your spouse as beneficiary, your designation cannot be accepted without your spouse's notarized signature in Section 5.
- Agree that if your beneficiary allocation totals at least 99%, but less than 100% (e.g., 3 named beneficiaries are each assigned a 33% interest in the account), IRA Services will assign the unallocated remainder to the first named beneficiary.
- Agree that when your assets are distributed to your beneficiaries, fractional shares that cannot be distributed in accordance with your instructions will instead be given to the beneficiary receiving the largest percentage of the account's assets or, if each beneficiary is receiving an equal percentage, to the last paid beneficiary.

Print Owner / Authorized Individual Name	
Account Owner's Signature	Date (MM/DD/YYYY)
X	

**5. SPOUSE'S CONSENT** (Notarized signature required if spouse is not the only primary beneficiary AND you are living in a community property state)

By signing below, you:

- agree to the designation of the beneficiary(ies) on this form
- understand that you are allowing those beneficiary(ies) to receive assets that would otherwise be paid to you

Print Spouse Name	
Spouse's Signature X	Date (MM/DD/YYYY)

**Notice to Community Property State Residents:** A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

If needed, attach the Acknowledgement Form appropriate for your state.

**Certificate of Acknowledgment of Notary Public** Must be a U.S. Notary. Foreign notary or consular seals may NOT be substituted.

State of \_\_\_\_\_

in the County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_, the undersigned officer, personally appeared \_\_\_\_\_ known to me or satisfactorily proven to be the person whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal.

Name and Signature of Notary

▼ Notary Seal/Stamp ▼

Title of Officer
My commission expires (MM/DD/YYYY)

**DELIVERY INSTRUCTIONS**

**Email**  
newaccounts@IRAServices.com

**Fax**  
(650) 745-2902

**Regular mail**  
IRA Services  
PO Box 7080  
San Carlos, CA 94070-7080

**Overnight mail**  
IRA Services  
1160 Industrial Road, Unit 1  
San Carlos, CA 94070-4128