

## BENEFICIARY DESIGNATION FOR PLANS WITH ANNUITY PROVISIONS

Plan Name:			
Participant Name:  Print or Type Complete Leg	cal Nigera - First MI   Lost		
Social Security Number:			
Street Address:			
City:		ZIP:	
Check One: New Designation	☐ Change		
I hereby acknowledge I have been informed commencing distribution of my benefits (if than 100%, as specified in the Plan) of my Survivor Annuity to my surviving spouse. Of an annuity that will provide a series of letthe designation of my spouse as the sole to consents in writing (witnessed by the Planthat I may revoke such waiver as may be respouse's consent.	any) under the Plan, a per vested account balance This death benefit will be evel periodic payments for peneficiary of the Pre-Ret Administrator or Notary F	ercentage (not less than 50% nor more will be used to provide a Pre-Retirement paid to my surviving spouse in the form r his or her life. I have the right to waive irement Survivor Annuity if my spouse Public) to such a wavier. I understand	
The remainder (if any) of my vested accou be paid in accordance with my beneficiary	designation.	•	
SECTION I:	BENEFICIARY DESI	GNATION	
Regarding any amount payable under the to my situation and make the following ber		ath, I hereby mark the option applicable	
	ual(s) named below to red is void one year after my		
FOR MARRIED PARTICIPANTS I have been given the Notice of Pre-Retire understand that I must inform the Plan Adr			
☐ Married with spouse as sole beneficial Pre-Retirement Survivor Annuity form benefit. Any benefit in excess of the Peneficiary(ies) as designated below to	of payment at any time p Pre-Retirement Survivor A	nnuity shall be paid to my	
the Plan provisions. Note: If you are	al(s) named below to rec married and do not name	eive death benefits in accordance with	

# Primary or Contingent?\* Name Social Security Number Relationship Date of Birth Account\*

Percentages must total 100% for primary beneficiaries and 100% for contingent beneficiaries

If a minor is a primary beneficiary, please indicate the legal guardian to whom the distribution is to be paid:

#### Note to Participant:

- (1) Estate planning: If you are not certain how the death distribution of your Plan account affects the disposition of your entire estate, or if you have any questions regarding the estate planning consequences of your beneficiary designation, you may wish to consult with a professional tax advisor before completing this Beneficiary Designation form.
- **(2) Effect of divorce:** A divorce decree or a decree of legal separation automatically revokes a designation of your spouse as a beneficiary, unless the decree or a qualified domestic relations order provides otherwise.

#### **SECTION 2: NOTICE OF PRE-RETIREMENT SURVIVOR ANNUITY**

If you are married and die before commencing distribution of your benefits (if any) under the Plan, the Plan automatically provides that a percentage (not less than 50% nor more than 100%, as specified in the Plan) of your vested account balance will be paid to your surviving spouse in the form of a Pre-Retirement Survivor Annuity. This death benefit will be paid to your surviving spouse in the form of an annuity that will provide a series of level periodic payments for his or her life (or, if the Plan provides, a single lump sum distribution in lieu thereof).

You have the right to waive the designation of your spouse as the sole beneficiary of the Pre-Retirement Survivor Annuity or to have such benefit paid in a form other than a Pre-Retirement Survivor Annuity provided your spouse consents in writing to such election. The Plan Administrator or a Notary Public must witness your spouse's consent. You have the right to revoke such waiver at any time before benefits begin without your spouse's consent.

If you are making an election to waive during a Plan Year in which you have not attained or will not attain age 35, your election will become invalid as of the first day of the Plan Year in which you reach age 35. You will have to make a new election during the Plan Year in which you turn age 35, and again, obtain your spouse's written consent, witnessed by the Plan Administrator or Notary Public.

The required waiver to waive only the Pre-Retirement Survivor Annuity while keeping your spouse as your primary beneficiary is below. Your spouse may also waive the Pre-Retirement Survivor Annuity when electing to receive the distribution of the death benefit.

<sup>\*</sup>Distributions will be paid to the primary beneficiaries unless they are also deceased, in which case the distributions will be paid to the contingent beneficiaries.

SECTION 3: SPOUSE'S CONSENT			
SPOUSE'S CONSENT TO WAIVER I hereby voluntarily consent to the elections made by my sponsor Pre-Retirement Survivor Annuity, and I hereby acknowledge election is to reduce or eliminate any death benefit to which beneficiary designation is not valid unless I consent to it; and spouse revokes the beneficiary designation before benefits benefits to the spouse revokes the beneficiary designation before benefits benefits to the spouse revokes the benefit of the spouse revokes	that I understand: (1) that the effect of such an I may otherwise be entitled; (2) that each I (3) that my consent is irrevocable unless my		
Signature of Participant's Spouse	Date		
SPOUSE'S CONSENT TO WAIVE PRE-RETIREMENT SURVIVOR ANNUITY FORM OF BENEFIT I hereby voluntarily consent to waive the annuity form of benefit, which is a series of level periodic payments for my life, and instead receive this benefit in a single lump sum distribution in lieu thereof. By signing this section I am <b>not</b> waiving my rights as the primary beneficiary.			
Signature of Participant's Spouse	Date		
SECTION 4: WITNESS OF SPOUSE'S SIGNATURE (only one witness signature required)			
Plan Administrator Signature	Date		
OR			
WITNESS OF SIGNATURE by Notary Public			
Signature of Notary Public	Date		
My commission expires	Stamp or Seal		
SECTION 5: REQUIRED SIGNATURES			
I RESERVE THE RIGHT TO REVOKE OR CHANGE ANY BENEFICIARY DESIGNATION. I HEREBY REVOKE ALL PRIOR DESIGNATIONS (IF ANY) OF PRIMARY BENEFICIARIES AND CONTINGENT BENEFICIARIES.  The Trustee will pay all sums payable under the Plan by reason of my death to the primary beneficiary, if he or she survives me, and if no primary beneficiary survives me, then to the contingent beneficiary, and if no named beneficiary survives me, then the Trustee will pay all amounts in accordance with the Plan. I understand that, unless I have provided otherwise above, the Trustee will pay all sums payable to more than one beneficiary equally to the living beneficiaries.			
Participant Signature	Date		

Page 3 of 4 (Please Complete All Pages)

Plan Administrator Signature

2/10

Date

### THIS DESIGNATION REVOKES ALL PRIOR DESIGNATIONS FILED WITH THE PLAN ADMINISTRATOR

CHANGES TO THIS DESIGNATION OF BENEFICIARY MAY BE MADE AT ANY TIME BY COMPLETING A NEW FORM AND FILING IT WITH THE PLAN ADMINISTRATOR

THIS FORM IS TO BE KEPT ON FILE AT THE EMPLOYER'S ADDRESS SO THAT IT IS ACCESSIBLE TO THE EMPLOYEE

DO NOT RETURN TO THE RETIREMENT ADVANTAGE, INC.