

**Instructions**

To designate a beneficiary or to change your existing beneficiary designation on an annuity plan, complete all applicable sections of this form, obtain any required signatures, and return it to your Plan Representative. To confirm if your plan is an annuity plan please see your Plan Representative or call Transamerica at 800-755-5801. For further information, please refer to the Qualified Pre-Retirement Survivor Annuity Explanation.

Initial Designation     Change of Designation

**Section A. Plan Sponsor Information**

Plan Sponsor Name

Contract/Account No.     Affiliate No.     Division No.

**Section B. Personal Information**

Social Security No.     Date of Birth (mm/dd/yyyy)

First Name/Middle Initial     Last Name

Mailing Address

City     State     Zip Code

Phone No.     Ext.

E-mail Address

Marital Status:  Married     Single/Divorced

**Section C. Primary Beneficiary Designation - Will receive benefits in the event of your death**

This designation will apply to the account number above. You must designate a specific percentage for each beneficiary. Shares must be whole percentages and total 100%. If you do not indicate shares, benefits will be split equally among surviving beneficiaries. If the named beneficiary is a trust, please specify the name and date of the trust, and the name of the trustee.

*Note: Share of benefits must total 100% for primary beneficiaries. If additional space is needed to designate multiple beneficiaries, complete the Supplemental Beneficiary Designation page.*

Share of Benefits:  % (whole percentages only)    Relationship

Last Name     Date of Birth (mm/dd/yyyy)

First Name/Middle Initial     Social Security No.

Mailing Address

City     State     Zip Code

**Primary Beneficiary Designation (continued)**

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Share of Benefits:	<input type="text"/>	% (whole percentages only)	Relationship	<input type="text"/>
Last Name	<input type="text"/>	Date of Birth (mm/dd/yyyy)	<input type="text"/>	
First Name/Middle Initial	<input type="text"/>	Social Security No.	<input type="text"/>	
Mailing Address	<input type="text"/>			
City	<input type="text"/>	State	<input type="text"/>	Zip Code <input type="text"/>

**Section D. Contingent Beneficiary(ies) - Will receive benefits if no primary beneficiary is living at the time of your death**

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*Note: Share of benefits must total 100% for contingent beneficiaries. If additional space is needed to designate multiple beneficiaries, complete the Supplemental Beneficiary Designation page.*

Share of Benefits:	<input type="text"/>	% (whole percentages only)	Relationship	<input type="text"/>
Last Name	<input type="text"/>	Date of Birth (mm/dd/yyyy)	<input type="text"/>	
First Name/Middle Initial	<input type="text"/>	Social Security No.	<input type="text"/>	
Mailing Address	<input type="text"/>			
City	<input type="text"/>	State	<input type="text"/>	Zip Code <input type="text"/>

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Share of Benefits:	<input type="text"/>	% (whole percentages only)	Relationship	<input type="text"/>
Last Name	<input type="text"/>	Date of Birth (mm/dd/yyyy)	<input type="text"/>	
First Name/Middle Initial	<input type="text"/>	Social Security No.	<input type="text"/>	
Mailing Address	<input type="text"/>			
City	<input type="text"/>	State	<input type="text"/>	Zip Code <input type="text"/>

**Section E. Waiver of Qualified Pre-Retirement Survivor Benefit (for married members if spouse is not primary beneficiary)**

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I elect to waive all or a portion of the qualified pre-retirement survivor annuity death benefit coverage for my spouse. Instead, I designate the above beneficiary(ies) to receive all or a portion of the benefits upon my death.

X \_\_\_\_\_ X \_\_\_\_\_  
Member Signature Date

**Section F. Spousal Consent (if spouse is not primary beneficiary)**

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I consent to my spouse's waiver of my rights to all or a portion of the qualified pre-retirement survivor annuity death benefit coverage. I understand that this consent means I may not receive any (or only a portion) of my spouse's retirement benefits under the plan in the event of my spouse's death prior to payment of benefits under the plan. Instead I agree to the above designation of beneficiary(ies) to receive all or a portion of benefits upon my spouse's death. I further understand that if my spouse wishes to change the above beneficiary designation, my written consent will be required.

X \_\_\_\_\_ X \_\_\_\_\_  
Spouse Signature Date

**WITNESSED**

X \_\_\_\_\_ X \_\_\_\_\_  
Plan Representative or Notary Public Signature and Stamp/Seal Date

**Section G. Member Signature**

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I certify that the information provided on this form is correct and complete.

X \_\_\_\_\_ X \_\_\_\_\_  
Member Signature Date

X \_\_\_\_\_ X \_\_\_\_\_  
Print Name Social Security Number

**Section H. Plan Representative Signature**

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I certify that the information provided on this form is correct and complete, and that any required consents and waivers have been obtained.

\_\_\_\_\_ X \_\_\_\_\_  
Plan Representative Signature Date

## Supplemental Beneficiary Designations

Social Security No.

First Name/Middle Initial

Last Name

**Note: Share of benefits must total 100% for primary beneficiaries (will receive benefits in the event of your death) AND 100% for contingent beneficiaries (will receive benefits if no primary beneficiary is living at the time of your death).**

**Primary Beneficiary**     **Contingent Beneficiary**

Share of Benefits:  % (whole percentages only)

Relationship

Last Name

Date of Birth (mm/dd/yyyy)

First Name/Middle Initial

Social Security No.

Mailing Address

City

State

Zip Code

**Primary Beneficiary**     **Contingent Beneficiary**

Share of Benefits:  % (whole percentages only)

Relationship

Last Name

Date of Birth (mm/dd/yyyy)

First Name/Middle Initial

Social Security No.

Mailing Address

City

State

Zip Code

## Qualified Pre-Retirement Survivor Annuity Explanation

**This information pertains to members in a retirement plan that provides a Qualified Pre-Retirement Survivor Annuity (QPSA) to the spouse that is 100% of the member's vested account balance. To confirm the percentage required by your plan, please refer to your Summary Plan Description or contact your Plan Representative.**

As a plan member, the law requires that you be informed as to the disposition of your account balance upon your death before retirement.

Generally, if you are married and you die before benefit payments under the plan have begun, the plan will use the vested portion of your account balance to purchase a pre-retirement survivor annuity for your spouse. This annuity will provide your spouse with a series of monthly payments over his/her life. However, your spouse may choose any other option provided under the plan. If your vested account balance is at or below the plan specified minimum (generally \$5,000), it will (after any required tax withholding) be paid out in a single sum.

However, beginning with the first day of the plan year in which you attain age 35 (or upon your termination of employment if you are under age 35), you may elect to waive either (a) the requirement that your death benefits be paid in the form of a pre-retirement survivor annuity or (b) the requirement that your spouse be your beneficiary. You may elect at any time before your death or benefit starting date, whichever comes first, to waive either or both requirements. In order for any such election to be valid, however, your spouse must duly consent in writing before your Plan Representative or a Notary Public. If you waive either requirement prior to the first day of the plan year in which you turn 35 and while still employed, the waiver becomes invalid upon the beginning of the plan year in which your 35th birthday occurs and your spouse would receive a pre-retirement survivor annuity upon your death, unless you execute a new waiver. If at any time you wish to change your non-spouse beneficiary designation by naming a new non-spouse beneficiary, you must again obtain the acknowledgement and consent of your spouse. A revocation of a prior waiver may be made by you without the consent of your spouse at any time before your death or benefit starting date, whichever comes first. If you do this, the survivor annuity will be restored for your spouse unless you properly make a new waiver election prior to your death or benefit starting date, whichever comes first.

The examples below compare benefits under the qualified pre-retirement survivor annuity and other forms of distribution. The examples are based on specific assumptions and certain interest rates and mortality rates. The amounts shown are used to illustrate the differences between the various options; the values may be different in your case. Assume a member dies at age 55 with a vested account balance of \$200,000 and has a spouse of the same age.

Type of Distribution	Benefit to Spouse After Member Dies
Monthly QPSA with 100% Continuing to Spouse	\$810.50 per month
10 Years Certain (No Life)	\$1,776.94 per month
Single Sum Payment	\$200,000

If you are not married at the time of your death, the death benefit will be paid to your designated beneficiary. If you have not named a designated beneficiary, the death benefit will be paid in accordance with the terms of the plan. Dollar amounts shown do not reflect any required tax withholding.

It is important that you and your spouse understand your rights and obligations concerning your death benefit. You should direct any questions to your Plan Representative. Also, because a spouse has certain rights to the death benefit, you should immediately inform your Plan Representative of any change in your marital status.

**This information pertains to members in a retirement plan that provides a Qualified Pre-Retirement Survivor Annuity (QPSA) to the spouse that is 50% of the member's vested account balance. To confirm the percentage required by your plan, please refer to your Summary Plan Description or contact your Plan Representative.**

As a plan member, the law requires that you be informed as to the disposition of your account balance upon your death before retirement.

Generally, if you are married and you die before benefit payments under the plan have begun, the plan will use at least 50% of the vested portion of your account balance to purchase a pre-retirement survivor annuity for your spouse. This annuity will provide your spouse with a series of monthly payments over his/her life. However, your spouse may choose any other option provided under the plan. If your vested account balance is at or below the plan specified minimum (generally \$5,000), it will (after any required tax withholding) be paid out in a single sum.

However, beginning with the first day of the plan year in which you attain age 35 (or upon your termination of employment, if you are under age 35), you may elect to waive either (a) the requirement that your death benefits be paid in the form of a pre-retirement survivor annuity or (b) the requirement that your spouse be your beneficiary, for at least 50% of your vested account balance. You may elect at any time before your death or benefit starting date, whichever comes first, to waive either or both requirements. In order for any such election to be valid, however, your spouse must duly consent in writing before your Plan Representative or a Notary Public. If you waive either requirement prior to the first day of the plan year in which you turn 35 and while still employed, the waiver becomes invalid upon the beginning of the plan year in which your 35th birthday occurs and your spouse would receive a pre-retirement survivor annuity upon your death, unless you execute a new waiver. If at any time you wish to change your non-spouse beneficiary designation by naming a new non-spouse beneficiary, you must again obtain the acknowledgement and consent of your spouse. A revocation of a prior waiver may be made by you without the consent of your spouse at any time before your death or benefit starting date, whichever comes first. If you do this, the survivor annuity will be restored for your spouse (for at least 50% of your vested account balance) unless you properly make a new waiver election prior to your death or benefit starting date, whichever comes first.

The examples below compare benefits under the qualified pre-retirement survivor annuity and other forms of distribution. The examples are based on specific assumptions and certain interest rates and mortality rates. The amounts shown are used to illustrate the differences between the various options; the values may be different in your case. Assume a member dies at age 55 with a vested account balance of \$200,000 and has a spouse of the same age.

<b>Type of Distribution</b>	<b>Benefit to Spouse After Member Dies</b>
Monthly QPSA with 50% Continuing to Spouse	\$432.52 per month
10 Years Certain (No Life)	\$888.47 per month
Single Sum Payment	\$100,000

If you are not married at the time of your death, the death benefit will be paid to your designated beneficiary. If you have not named a designated beneficiary, the death benefit will be paid in accordance with the terms of the plan. Dollar amounts shown do not reflect any required tax withholding.

It is important that you and your spouse understand your rights and obligations concerning your death benefit. You should direct any questions to your Plan Representative. Also, because a spouse has certain rights to the death benefit, you should immediately inform your Plan Representative of any change in your marital status.