

# Beneficiary Designation

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**ACCOUNT OWNER/BENEFICIAL ACCOUNT OWNER INFORMATION**

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Account Number: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Phone Number \_\_\_\_\_

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**BENEFICIARY INFORMATION**

I hereby designate the persons named herein as primary and contingent beneficiaries to receive my interest in this IRA according to the terms of the IRA Custodial Account Agreement, hereby revoking any such prior designations made by me. I understand that, under the terms of the IRA Custodial Account Agreement, upon my death, my surviving Primary Beneficiary(ies) each will be entitled to name their own beneficiary(ies) for any IRA assets to which each such Primary Beneficiary became entitled upon my death, that remain in the IRA upon the death of such Primary Beneficiary(ies). If any Primary Beneficiary dies before my death, the IRA will pass upon my death to my remaining Primary Beneficiary(ies), if any, based on their proportional interests as specified below. If all of my Primary Beneficiaries die before my death, the IRA will pass to the Contingent Beneficiary(ies) named below. *An Account Owner's beneficiary designation must be on record with the Custodian prior to his/her death to be considered an effective designation.*

*The total percentage for each level of beneficiary, both primary and contingent, must equal 100%. PENSICO Trust Company (PENSICO) will correct any excess or short-fall percentage allocation by applying the ratio of the percentage actually allocated among the beneficiaries at each level.*

**NOTE:** You may designate as many beneficiaries, contingently, or successively as you wish. Use additional sheets if necessary, and provide for each beneficiary the information requested in the following format:

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**PRIMARY BENEFICIARY(IES)** (use additional sheets if designating more than two)

**First Name:** \_\_\_\_\_ **MI:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_ **Percentage:** \_\_\_\_\_% **Relationship:** \_\_\_\_\_  
**Social Security Number (required):** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_  
**State/Province:** \_\_\_\_\_ **Country:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**First Name:** \_\_\_\_\_ **MI:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_ **Percentage:** \_\_\_\_\_% **Relationship:** \_\_\_\_\_  
**Social Security Number (required):** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_  
**State/Province:** \_\_\_\_\_ **Country:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

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**CONTINGENT BENEFICIARY(IES)**


**First Name:** \_\_\_\_\_ **MI:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_ **Percentage:** \_\_\_\_\_% **Relationship:** \_\_\_\_\_  
**Social Security Number (required):** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_  
**State/Province:** \_\_\_\_\_ **Country:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**First Name:** \_\_\_\_\_ **MI:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_ **Percentage:** \_\_\_\_\_% **Relationship:** \_\_\_\_\_  
**Social Security Number (required):** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_  
**State/Province:** \_\_\_\_\_ **Country:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

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**ACCOUNT OWNER ACKNOWLEDGMENT**

I acknowledge that this beneficiary designation supersedes any and all prior beneficiary designation previously provided to PENSICO. This designation shall be in effect until I otherwise notify PENSICO in writing.

 \_\_\_\_\_  
Account Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

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**SPOUSAL CONSENT**

*(for use in community or marital property states)*

**This section, if applicable, must be signed and dated by the spouse of the Account Owner.**

1. If the Account Owner is married and has designated any Primary Beneficiary other than his/her spouse; and
2. If the Account Owner's plan includes or will include property in which his/her spouse possesses a community property interest or other type of property interest. *(As of this printing the community property states are Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, and Wisconsin.)* Please consult with your legal advisor to ensure this satisfies the laws in your state.

I, the undersigned spouse of the Account Owner named above, hereby consent to and accept the beneficiary designation without regard to whether I survive or predecease my spouse.

 \_\_\_\_\_  
Spouse Signature \_\_\_\_\_ Date \_\_\_\_\_  
*(Notary acknowledgement required for spouse's consent signature when Account Owner has designated a non-spouse beneficiary.)*

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**ACKNOWLEDGMENT**

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

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_

a Notary Public in and for said County and State, personally appeared: \_\_\_\_\_, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity on behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.

[Seal]

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**INVESTMENT PRODUCTS: NOT FDIC INSURED • NO BANK GUARANTEE • MAY LOSE VALUE**

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[www.pensico.com/upload](http://www.pensico.com/upload)

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Denver, CO 80217-3859

**For express deliveries:**  
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Denver, CO 80202-3331

**Questions?**  
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