

# IRA Designation of Beneficiary

Account Number \_\_\_\_\_

## Account Owner Information

Name \_\_\_\_\_ D/O/B \_\_\_\_\_  
 Address \_\_\_\_\_ SSN \_\_\_\_\_  
 City \_\_\_\_\_ State, ZIP \_\_\_\_\_ Country \_\_\_\_\_  
 Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_ E-mail \_\_\_\_\_

## Designation of Beneficiaries

If neither primary nor contingent is indicated, the individual or entity will be deemed to be a primary beneficiary. If any primary or contingent beneficiary dies before me, his or her interest of his or her heirs shall terminate completely, and the percentage share of any remaining beneficiary(ies) shall be increased on a pro rata basis. If more than one primary beneficiary is designated and no distribution percentages are indicated, the beneficiaries will be deemed to own equal share percentages in the IRA. Multiple contingent beneficiaries with no share percentage indicated will also share equally. If no primary beneficiary(ies) survives me, the contingent beneficiary(ies) shall acquire the designated share of my IRA.

No.	Name	Date of Birth	SSN	Relationship	Primary or Contingent	Share %
1.					Primary Contingent	%
2.					Primary Contingent	%
3.					Primary Contingent	%
4.					Primary Contingent	%

## Spousal Consent

This section should be reviewed if either the trust or the residence of the IRA Holder is located in a community or marital Property State and the IRA holder is married. Due to the important tax consequences of giving up one's community property interest, individuals signing this section should consult with a tax or legal advisor.

## Current Marital Status

I am not married – I understand that if I become married in the future, I must complete a new IRA Beneficiary Form.

I am married – I understand that if I choose to designate a primary beneficiary other than my spouse, my spouse must sign below.

I am the spouse of the above-named IRA 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 the IRA, I have been advised to see a tax professional. I hereby give the IRA holder any interest I have in the funds or property deposited in the IRA and consent to the beneficiary designation(s) indicated above. I assume full responsibility for any adverse consequences that may result. No tax or legal advice was given to me by the Trustee.

\_\_\_\_\_  
Signature of Spouse and Date

\_\_\_\_\_  
Signature of Witness and Date

**Please read and sign the following. You must sign for this beneficiary designation to be effective.**

I understand that I may change or add beneficiaries at any time by completing and delivering the proper form to the Trustee. The Trustee has provided no tax or legal advice to me regarding my beneficiary designations.

\_\_\_\_\_  
Signature of IRA Holder and Date

\_\_\_\_\_  
Signature of Witness and Date

**Fax your completed, signed form to 312-220-7423, or mail it to PO Box 1347, Chicago IL 60690-1347**