IRA Change of Beneficiary

Section 1



Use this form to change IRA beneficiary(ies). This IRA Change of Beneficiary form will supersede and replace all prior beneficiary designations once received and accepted.

IRA Holder and Account Information

The account number will be used if the account	Name of IRA hold	ler				nt Number uitive Investor® Accounts.)	
name and number do not match.	Account Type Traditional Roth SEP SIMPLE Traditional Inherited Roth Inherited						
Section 2	Beneficiary Information						
Please provide the full legal name and beneficiary type for each listed	PRIMARY BENEFICIARY To name beneficiaries on a supplemental document, proceed to Section 4: Non-Standard Designation of Beneficiary(ies).						
beneficiary.	Beneficiary Type						
Social Security number/Tax ID and DOB are	Spouse Non-Spouse	Beneficiary Name (If nam	ning a spouse, d	do so here.)	Phone	Number	
recommended but not required and	Trust	Address					
can be provided at any time. Check "Per Stirpes" if you want the selected beneficiary's share of the IRA to go to their lineal descendants (generally children). This will only occur if you outlive the selected beneficiary or the beneficiary disclaims.	Other Entity	Social Security Number/ Tax ID	Date of Birth	% (of Benefits %	Per Stirpes (Completion of Section 3 on the IRA Change of Beneficiary form is required with this election.)	
	Non-Spouse Trust Other Entity	Beneficiary Name				Number	
		Address					
		Social Security Number/ Tax ID	Date of Birth	% (of Benefits	Per Stirpes (Completion of Section 3 on the IRA Change of Beneficiary form is required with this election.)	
	☐ Non-Spouse ☐ Trust	Beneficiary Name			Phone	Number	
	Other Entity	Address					
		Social Security Number/ Tax ID	Date of Birth	% (of Benefits	Per Stirpes (Completion of Section 3 on the IRA Change of Beneficiary form is required with this election.)	
	Non-Spouse Trust Other Entity	Beneficiary Name			Phone	Number	
		Address					
		Social Security Number/ Tax ID	Date of Birth	% (of Benefits	the IRA Change of Benefician	
	To name additional beneficiaries use the Beneficiary Designation Continuation Pages (form 594646) and submit with this form. Total of listed primary beneficiaries must equal 100%.						
		n about the IRA Custodian a WFCS IRA Disclosure State				account, please	
Investment and Insura							
	or any Federal Governmen s a trade name used by V	t Agency May Lose Value I Vells Fargo Clearing Services, I			•	or any Bank Affiliate bank affiliate of	
Wells Fargo & Compar		. ss r args cloaring convices, i	, a rogistore	_ DIONOI -GOAII	a.ia iloii-k	a.m. amiliato Ol	
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Only complete this section if you	Trust as Primary Beneficiary					
named a Trust as your primary beneficiary.	by me as grantor a	and	der the Agreement of Trust executed on as Trustee(s) to be held as part rdance with its provisions at the time of my death.			
Only complete this section to designate the Custodian for the named minor primary beneficiary.	Designation of Custodian for Primary Minor Beneficiaries under the Uniform Transfers to Minors Act (The named Custodian does not have to be a parent or legal guardian.) I designate as Custodian for					
To name additional trusts or custodians for minor Beneficiaries complete the Beneficiary Designation Continuation Pages (form 594646).	minor Beneficiary(ies) under the Uniform Transfers to Minors Act (UTMA) of the State of my domicile. If the foregoing named Custodian is unable or unwilling to serve for any reason, I designate as successor Custodian. If no Custodian is named, or if the foregoing named Custodian(s) are unable or unwilling to serve for any reason, I designate the Executor or Administrator of my Last Will and Testament as Custodian for such minor Beneficiary(ies). If no Custodian is named or acting under the foregoing provisions, the guardian of such minor Beneficiary(ies), whether appointed under a will or by court, shall become successor Custodian for such minor Beneficiary(ies). CONTINGENT BENEFICIARY					
Contingent beneficiaries receive the assets if a Per Stirpes designation was not elected and the primary beneficiary(ies) dies prior to you or disclaims. Check "Per Stirpes" if you want the selected beneficiary's share of the IRA to go to their lineal descendants (generally children). This will only occur if you outlive the selected beneficiary or the beneficiary disclaims.	To name your bene Designation of Ben Beneficiary Type Spouse Non-Spouse Trust Other Entity	Spouse Beneficiary Name (If naming a spouse, do so here.) Phone Number Non-Spouse Trust Address				
	_ Galler Elliaty	Social Security Number/ Tax ID	Date of Birth	% of Benefits	Per Stirpes (Completion of Section 3 on the IRA Change of Beneficiary form is required with this election.)	
	☐ Non-Spouse ☐ Trust ☐ Other Entity	Beneficiary Name Address		Phone I	Number	
		Social Security Number/ Tax ID	Date of Birth	% of Benefits %	Per Stirpes (Completion of Section 3 on the IRA Change of Beneficiary form is required with this election.)	
	☐ Non-Spouse ☐ Trust	Beneficiary Name		Phone I	Number	
	Other Entity	Address Social Socurity Number/			Der Stirnes	
		Social Security Number/ Tax ID	Date of Birth	% of Benefits %	Per Stirpes (Completion of Section 3 on the IRA Change of Beneficiary form is required with this election.)	
	☐ Non-Spouse ☐ Trust	Beneficiary Name		Phone I	Number	
	Other Entity	Address				

Per Stirpes

% of Benefits

%

(Completion of Section 3 on the IRA Change of Beneficiary form is required with this election.)

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and submit with this form. Total of listed contingent beneficiaries must equal 100%.

To name additional beneficiaries use the Beneficiary Designation Continuation Pages (form 594646)

Date of Birth

Social Security Number/

Tax ID

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Only complete

Only complete	Trust as Contingent Beneficiary				
this section if you named a Trust as your contingent beneficiary.	The Trustee(s) serving at my death under the Agreement of Trust executed on by me as grantor and as Trustee(s) to be held as part of such Trust and administered in accordance with its provisions at the time of my death.				
Only complete this section to designate the Custodian for the named	Designation of Custodian for Contingent Minor Beneficiaries under the Uniform Transfers to Minors Act (The named Custodian does not have to be a parent or legal guardian.)				
minor contingent beneficiary.	I designate as Custodian for				
To name additional trusts or custodians for minor Beneficiaries complete the Beneficiary Designation Continuation Pages (form 594646).	minor Beneficiary(ies) under the Uniform Transfers to Minors Act (UTMA) of the State of my domicile. If the foregoing named Custodian is unable or unwilling to serve for any reason, I designate				
Section 3	Per Stirpes Representative Designation				
Please select one option and provide the requested information if Per Stirpes designation was elected in	Name the individual or role (a role is either an Executor or Trustee) that will provide to the IRA Custodian the proper identity of any unidentified beneficiaries and the extent of their interest in this IRA. You cannot name your Financial Advisor in this capacity. Select one of the boxes below:				
Section 2.	☐ My Personal Representative will be (list the Individual's Name):				
	The individual serving in the role of (list either Executor/Executrix or Trustee):				
Section 4	Non-Standard Designation of Beneficiary(ies)				
Complete this section if you are naming beneficiary(ies)	Name the individual or role that will provide to the IRA Custodian the distribution instructions they will rely on upon your death. A role is either an Executor or Trustee. Please seek legal advice before making this election.				
on a signed supplemental	Select one of the boxes below:				
document that has been attached to this form.	☐ My Personal Representative will be (list the Individual's Name):				
	☐ The individual serving in the role of (list either Executor/Executrix or Trustee):				

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Section 5 Signature and Date IRA holder 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 IRA.
- Acknowledge that, if per stirpes was selected, any share otherwise payable to a named beneficiary shall be paid to their surviving lineal descendants, if the named beneficiary dies before you or disclaims their portion.
- Acknowledge that if you do not provide percentages for each beneficiary, the IRA will be divided equally among primary or contingent beneficiaries, as applicable.
- Acknowledge that if you do not have a valid beneficiary designation on file at the time of your death the default provisions will be used in accordance with the IRA Disclosure Statement and Custodial Agreement.
- Agree that if your beneficiary allocation totals at least 99% but less than 100% (e.g., 3 named beneficiaries are each given 33% of the IRA), we will assign the unallocated remaining amount to the first named beneficiary.
- Agree that when your beneficiaries claim their portions of the IRA, any fractional shares that cannot be distributed in accordance with your instructions, will instead be given to the beneficiary receiving the largest percentage of the IRA or if each beneficiary is receiving an equal percentage, to the last paid beneficiary.
- Acknowledge that this beneficiary designation is not effective until the IRA Custodian has received and accepted this document.

Sign Here	X	Printed Name	Date (minvaavyyyy)		
Section 6	Spousal Consent	Spousal Consent not required i	f establishing an Inherited IRA.		
	Your spouse must sign below if you live in a community or marital property jurisdiction and are not designating your spouse as your primary beneficiary. This includes but is not limited to residents of AZ, CA, ID, NV, NM, PR, TX, WA, and WI. Note that in Alaska, community property rules may be adopted by agreement signed by the married couple.				
	I am the spouse of the above IRA holder and acknowledge I am familiar with the assets in this IRA. I agree with and consent to my spouse's designation of a primary beneficiary other than, or in addition to, me. I also acknowledge and agree that I shall have no claim whatsoever against the beneficiary(ies) or the custodian for any payment to my spouse's named beneficiary(ies).				
	Signature of IRA Holder's	s Spouse Printed Name	Date (mm/dd/yyyy)		

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