Send this completed form to:

ADMINISTRATOR P.O. Box 10374 Des Moines, IA 50396



REQUEST FOR CHANGE FORM

INSTRUCTIONS – Type or print clearly in ink. Complete fully and return this form to the Plan Administrator for recording in accordance with the group policy. A recorded copy will be returned to you for your records. Please use a new form instead of making erasures or corrections.

If you are changing your beneficiary from a presently designated trustee beneficiary, please submit evidence that the Trust Instrument permits a change. Do not use this form if coverage has been transferred to a non-insured Owner, e.g. a Trustee owner; call the Administrator for the correct form.

SAMPLES OF POPULAR BENEFICIARY DESIGNATIONS ARE SHOWN ON THE REVERSE SIDE. Name of Association: Group Policy # Insured Member's Name _____ Certificate # _____ REQUEST FOR CHANGE OF BENEFICIARY I hereby designate the person or persons below as beneficiary for the life insurance specified below, revoking any other beneficiary designation and optional method of settlement election for such insurance, such change to be effective in accordance with the terms and conditions of the group policy. SOCIAL SECURITY NUMBER RELATIONSHIP **ADDRESS** PERCENTAGE NAME **REPORT OF NAME CHANGE** (Do NOT complete if requesting only a Change of Beneficiary) I hereby request that the records kept in connection with the group policy reflect the following change of name of the insured or beneficiary, as shown below: _____ To ____ ____ Beneficiary Date of Change ____ Member Signature Dated , 20

Dated , 20

Recorded on behalf of New York Life, subject to the terms and conditions of the group policy, and copy returned.

Form 6X-MA 3-95 (3/12)

Popular, Clear and Complete Beneficiary Designations:

1. One beneficiary only:

Mary J. Smith, wife.

2. Two or more beneficiaries, equal amount:

William F. Smith, father, Alice C. Smith, sister, and Richard B. Smith, brother, or the survivors or survivor, in equal shares if more than one.

3. <u>Unequal amounts:</u>

50% to Mary J. Smith, wife, and 25% each to Alice C. Smith, sister, and Richard B. Smith, brother, the share of any deceased beneficiary to be paid in equal shares to the survivors of them, or to the survivor.

4. One primary and two or more contingent beneficiaries:

Mary J. Smith, wife, if living; otherwise Thomas F. Smith, son and Linda M. Smith, daughter, or the survivors or survivor, in equal shares if more than one.

5. Two primary and one contingent beneficiary:

William F. Smith, father, and Lynn K. Smith, mother, equally or the survivor of them, but if neither survives, Alice C. Smith, sister.

6. Trustee Beneficiary (under trust instrument):

The Trust Company of Smith, Illinois as trustee under a trust instrument dated December 29, 1967.

7. Trustee for minor (in absence of trust instrument):

Thomas F. Smith, son, provided that any payment becoming due to that son during his minority will be paid to Richard B. Smith, brother of the insured as trustee, if living; otherwise the legal guardian of said son.

DESIGNATING A MINOR BENEFICIARY:

In the event that the child(ren) you designate as beneficiary is/are minors, we would like to make you aware that we have on occasion experienced <u>delays in the payment</u> of proceeds when the beneficiary is still a minor at the time of the insured's death. A claims payment may be delayed until a surviving parent, relative, or other interested party obtains a court appointment as guardian of the minor's estate, for the purpose of receiving the proceeds on behalf of the child.

This information is based on our experience in insurance matters and is not intended to be applicable in all situations. We are merely alerting you to a potential problem which may arise when insurance proceeds become payable to a minor. We do not intend to imply that there is anything improper or unacceptable about designating a minor as a beneficiary.

(Updated 03/02/12)