Print Form

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Beneficiary Designation Change Form

Use this form if you'd like to change beneficiaries on an existing account, including Traditional IRA, Roth IRA, SEP, SIMPLE, HSA and ESA. If an account owner does not designate an account beneficiary, the assets of the account will be transferred to the estate upon the account owners death.

1 GENERAL INFORMATION

Account Holder's Name	NuView Account Number
☐ Mr. ☐ Ms. ☐ Mrs. ☐ Dr. ______________________	

2 BENEFICIARIES

Select Beneficiary Type: ☐ Primary ☐ Contingent

Name	Social Security Number	Relationship	Date of Birth	Share %

Address	City	State	Zip

Select Beneficiary Type: ☐ Primary ☐ Contingent

Name	Social Security Number	Relationship	Date of Birth	Share %

Address	City	State	Zip

Select Beneficiary Type: ☐ Primary ☐ Contingent

Name	Social Security Number	Relationship	Date of Birth	Share %

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Select Beneficiary Type: ☐ Primary ☐ Contingent

Name	Social Security Number	Relationship	Date of Birth	Share %

Address	City	State	Zip

If you are currently required to take a Required Minimum Distribution, a change of beneficiary may change this amount. Please contact your tax professional for more information.

3 SIGNATURES

This section should be reviewed if either the trust or the residence of the Account Holder is located in a community or marital property state and the Account 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 competent tax or legal advisor. **Applicable only in community property states (currently Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington and Wisconsin).**

CURRENT MARITAL STATUS:
☐ **I am not married -** I understand that if I become married in the future, I must complete a new Change of 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.

CONSENT OF SPOUSE: I am the spouse of the aforementioned Account 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 this Account, I have been advised to see a tax professional. I hereby give the Account Holder any interest I have in the funds or property deposited in this Account 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 Custodian.

Signature of Spouse	Date

I hereby release the Custodian from and indemnify it for any and all claims arising from the Custodian's actions hereunder. I understand this Change of Beneficiary will be effective on the date of receipt by the Custodian and that upon any change of beneficiary, the right of all previously designated beneficiaries to receive benefit under this account shall cease. Accordingly, I hereby revoke my beneficiary designations made previously with respect to this Account.

Signature of Account Holder	Date	Signature of Custodian	Date