



Request for Change of Beneficiary

Certificate no. _____ Insured/Annuitant name _____ Owner _____
(if other than insured/annuitant)

I, the undersigned owner of the above certificate, interest income, or supplementary contract issued by Royal Neighbors of America (the Society), hereby request the Society to change the beneficiary as set forth in the space below.

Clearly designate the beneficiary by including full name, relationship, date of birth, Social Security number and address. Initial any corrections made. Please see enclosed example sheet.

Unless otherwise specified, two or more named beneficiaries share equally.

I agree that no change of beneficiary will take effect unless recorded by the Society at its Home Office, and that when so recorded, the change will take effect as of the date this request was signed, but without prejudice to the Society on account of any payment made or other action taken by it before receipt of this request at its Home Office. I represent and certify that no insolvency or bankruptcy proceedings are now pending against me. If I am married and designating a beneficiary other than my spouse, my spouse's signature may be required on this form.

Do Not Write In This Space
(For Home Office use only)

Under penalty of perjury, I certify the following:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am **not** subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person

Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. The IRS does not require your consent to any part of this form other than the certifications required to avoid backup withholding.

Dated _____
(month/day/year)

Signature of owner

Witness to Signature of Owner

Social Security number

Signature of adult person other than a beneficiary

Mailing address

Mailing address

City, state, and ZIP code

City, state, and ZIP code

Telephone number of owner (incl. area code)

E-mail address

I hereby agree to the above Request for Change of Beneficiary and waive any community property or Uniform Marital Property Act (UMPA) rights, as applicable, that I may have in the subject of this Request of Change of Beneficiary. If the spousal consent is not signed, my signature is certification that no spousal consent is required.

Spousal consent-signature of spouse of certificateowner

Date

(Spousal consent signature required for residents of AZ, CA, ID, LA, NM, NV, TX, WA, WI)



Examples of Common Types of Beneficiary Designations

Below are examples of common beneficiary designations that are acceptable to the Society. If the certificate is an annuity certificate, the word “annuitant” or “annuitant’s” should be substituted for the word “insured” or “insured’s” in the following examples.

<u>Type of Beneficiary</u>	<u>Example of Proper Wording to be Used</u>
(1) Estate	The Executor or Administrator of the Estate of the Insured*
(2) One beneficiary	Mary Jane Doe, wife, 123 Main Street, Chicago, Illinois
(3) Two or more beneficiaries equally	Mary Jane Doe, mother, 123 Main Street, Chicago, Illinois John James Doe, father, 123 Main Street, Chicago, Illinois
(4) Two or more beneficiaries unequally	2/3 to Mary Jane Doe, mother, 123 Main Street, Chicago, Illinois 1/3 to John James Doe, father, 123 Main Street, Chicago, Illinois
(5) One primary and one contingent beneficiary	Mary Jane Doe, mother, 123 Main Street, Chicago, Illinois, if living; otherwise to John James Doe, father, 123 Main Street, Chicago, Illinois
(6) One primary beneficiary with an estate as contingent beneficiary	Mary Jane Joe, mother, 123 Main Street, Chicago, Illinois, if living; otherwise to the Executor or Administrator of the Estate of the Insured*
(7) One primary and two contingent beneficiaries equally	John James Doe, husband, 123 Main Street, Chicago, Illinois, if living; otherwise to Mary Jane Doe, daughter, 123 Main Street, Chicago, Illinois and Richard Thomas Doe, son, 123 Main Street, Chicago, Illinois
(8) One primary and two contingent beneficiaries unequally	John James Doe, husband, 123 Main Street, Chicago, Illinois, if living; otherwise 2/3 to Mary Jane Doe, daughter, 123 Main Street, Chicago, Illinois and 1/3 to Richard Thomas Doe, son, 123 Main Street, Chicago, Illinois
(9) Two primary beneficiaries equally and a contingent beneficiary for each	1/2 to John James Doe, husband, 123 Main Street, Chicago, Illinois, if living; otherwise to Richard Thomas Doe, son, 123 Main Street, Chicago, Illinois 1/2 to Mary Jane Doe, daughter, 123 Main Street, Chicago, Illinois, if living; otherwise to Ruth Ann Doe, granddaughter, 123 Main Street, Chicago, Illinois
(10) Two primary beneficiaries unequally and a contingent beneficiary for each	2/3 to Mary Jane Doe, daughter, 123 Main Street, Chicago Illinois, if living; otherwise to Ruth Ann Doe, granddaughter, 123 Main Street, Chicago, Illinois 1/3 to John James Doe, husband, 123 Main Street, Chicago Illinois, if living; otherwise to Richard Thomas Doe, son, 123 Main Street, Chicago, Illinois
(11) Two primary beneficiaries equally, or the survivor, and a contingent beneficiary if neither survives	John James Doe, father, 123 Main Street, Chicago, Illinois, and Mary Jane Doe, mother, 123 Main Street, Chicago, Illinois, equally, or to the survivor if either survives; otherwise to Ruth Ann Doe, wife, 123 Main Street, Chicago, Illinois
(12) A corporation	XYZ Company, 100 State Street, Chicago, Illinois, an Illinois corporation

(When a corporation is named beneficiary, the beneficiary designation should set forth the exact corporate name of the corporation, the address of its principal office, the name of the state under the laws of which it is incorporated, and the Taxpayer Identification number.)

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| (13) A revocable grantor trust | John Doe Revocable Trust dated July 4, 2000
(A copy of the trust must be submitted with the beneficiary designation) |
| (14) Funeral home | Acme Funeral Home, 345 Oak St., Austin, TX
(A funeral home may not be specifically designated as a beneficiary in Idaho, Illinois, Massachusetts, Michigan, Minnesota, Montana, Nevada, or New York.)
However, special wording may be used for a funeral home beneficiary classification in Minnesota and Montana as follows:
(a) Minnesota Irrevocably to any funeral home that has provided funeral or burial services to the Insured.
(b) Montana Irrevocably to _____ (name of funeral home), _____ (address of funeral home.) |

* If used for a Supplementary Contract or Interest Income Contract, replace the word insured with OWNER.