## Navy Federal® Change of Beneficiary for Individual Retirement Arrangement (IRA)

Access No.						
IRA No.						

This form can be used to change or add beneficiaries for your Roth, SEP, or Traditional IRAs. Numerous situations affect whether your beneficiary designations are up-to-date, and may include death of a beneficiary, divorce, or birth of a child. Please check box for appropriate plan. If you choose different beneficiaries for each plan, please complete a separate application for each IRA plan. If you wish, you may keep a copy for your records.

Name: First		MI			Last		Suffix
Address: Street		City			State		Zip Code
					Navy Federal Credit Unio	on PO Box 3000, Merri	field, VA 22119-3000
Social Security No. (ITIN)	Date of Birth (Mo., Da	y, Yr.)	Home Phone No.				
			☐ Traditional IR.		Roth	(888) 842-6328	
RA Account No. Select one:			Type of IRA Plan (Pl	ease complete a sep	arate form for each plan type.)	Navy Federal's Phone I	No.
	y(ies) - I designate the individed fany, made by me.	lual(s) or enti	ty(ies) named below as	my primary and/o	or contingent beneficiary(ies)	of this IRA and hereby revol	ke all prior benefici-
replace, the beneficiary restate all beneficiaries	s) - I designate the individual( r(ies) previously designated by and the corresponding share p	me on the da ercentage if to	ite specified. (When add	ding beneficiaries,			
no distribution percentages also be deemed to share ed	contingent is indicated, the sare indicated, the beneficiarie qually. If any primary or conting ies) shall be increased on a pro	s will be deen ent beneficiar	ned to own equal share y dies before me, his/he	percentages in the interest and the i	e IRA. Multiple contingent ber interest of his/her heirs shall to	neficiaries with no share percerminate completely, and the	entage indicated wil percentages share o
Principal Beneficia	ary(ies)						
Name: First	MI	Last	Suffix	Social Security No.		Date of Birth (Mo., Day, Yr.)	%
Mailing Address: Street	City		State	:	Zip Code	Relationship	
Name: First	MI	Last	Suffix	Social Security No.		Date of Birth (Mo., Day, Yr.)	%
	C'.		<u> </u>		7' 6 1	B.I.C. II	
Mailing Address: Street	City		State		Zip Code	Relationship	
F			C (f)	6 116 11 11			
Name: First	MI	Last	Suttix	Social Security No.		Date of Birth (Mo., Day, Yr.)	%
Mailing Address: Street	City		State	<u> </u>	Zip Code	Relationship	
Contingent Benef	ficiary(ies) (If any)				·	·	
Name: First	MI	Last	Suffix	Social Security No.		Date of Birth (Mo., Day, Yr.)	%
	C'.		<u> </u>		7' 6 1	B.I.C. II	
Mailing Address: Street	City		State		Zip Code	Relationship	
Name: First	MI	Last	Suffix	Social Security No.		Date of Birth (Mo., Day, Yr.)	%
Mailing Address: Street	City		State		Zip Code	Relationship	
Name: First	MI	Last	Suffix	Social Security No.		Date of Birth (Mo., Day, Yr.)	%
Mailing Address: Street	City		State		7in Codo	Relationship	

## Additional information on reverse.

- The Social Security number(s) for all designated beneficiaries is required information. This ensures proper distribution in the event of the IRA holder's death.
- This beneficiary designation is subject to all the terms and provisions of the Individual Retirement Trust Account under Section 408(a) of the Internal Revenue Code and shall be effective only if received prior to my death by Navy Federal Credit Union.
- This designation shall be effective with respect to my entire interest in my IRA plan which remains unpaid at my death or at the subsequent death of my beneficiary(ies).
- If more than one person is named as beneficiary, each payment to be made pursuant to this designation shall be paid in equal shares or as otherwise indicated above to such of the beneficiaries who are living at the time such payment becomes due. Payment to contingent beneficiaries, if any, will be made only after receipt by Navy Federal of proof of death of principal beneficiary(ies).
- I reserve the right to change this designation at any time or times during my lifetime by filing a new beneficiary designation with the Trustee.
- Navy Federal Credit Union is hereby authorized to pay any assets remaining in my IRA and any Navy Federal complimentary Life Saving Insurance in force at or after my death according to the terms of the Trust Agreement to the beneficiary(ies) designated above and subject to the conditions above.

<b>&gt;</b>	
Signature of IRA Grantor	Date (Mo., Day, Yr.)

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 competent tax or legal advisor.

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 this 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 this 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 or Custodian.

Signature (I agree to the naming of a primary beneficiary other than myself by my spouse, the IRA Grantor named above.)	Date (Mo., Day, Yr.)
Spousal Consent (For use in community or marital property states.)	
Verification of Change (IRA Representative)	Date (Mo., Day, Yr.)

Community property or marital property laws govern the primary rights of married individuals in some states. In these states, Navy Federal requires spousal consent when an IRA holder wishes to name someone other than, or in addition to, their spouse as an IRA beneficiary.

The following are community property states:

- ▶ Alaska (if elected)
- ▶ Arizona
- ▶ California
- ▶ Idaho
- ▶ Louisiana
- ▶ Nevada
- ▶ New Mexico
- ▶ Texas
- Washington

Wisconsin is presently the only marital property state.