



IRA RESOURCES, INC.

Beneficiary Designation

1. ACCOUNT OWNER INFORMATION

Form section 1: Account Owner Information. Fields include Full Name, Account Number, Account Type, Email Address, Daytime Phone Number, and Marital Status.

2. DESIGNATION OF BENEFICIARIES

I designate the following person(s) named below as my Primary and/or Contingent Beneficiaries of my plan. If the Primary or Contingent box is not checked for a beneficiary, the beneficiary will be deemed to be a Primary Beneficiary.

If I named a Trust as a Beneficiary, I understand I must supply a copy or abstract of the Trust.

Form section 2: Designation of Beneficiaries. Three rows for Beneficiary 1, 2, and 3. Each row includes fields for Name, Social Security, DOB, Relationship, Mailing Address, City, State, Zip, and Share Percentage.

3. ACCOUNT OWNER SIGNATURE AND ACKNOWLEDGEMENT

I understand that I may change or add beneficiaries at any time by completing and submitting this form. I acknowledge that any Beneficiary Designation Form currently on file will be superseded by this form.

Form section 3: Signature and Acknowledgement. Fields for Signature and Date.



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4. SPOUSAL CONSENT

The consent of spouse must be signed only if the following conditions are present:

- A. Your spouse is not the sole primary beneficiary named and;
B. You and your spouse are residents of a community property state (such as AZ, CA, ID, NV, MN, TX, WA, or WI)

I am the spouse of the account holder listed above. I hereby certify that I have reviewed the Designation of Beneficiary Form and I understand that I have a legal interest in the account. I hereby acknowledge and consent to the above Designation of Beneficiary other than, or in addition to, myself as primary beneficiary. I further acknowledge that I am waiving part or all of my rights to receive benefits under this plan when my spouse dies.

I, _____, hereby consent to the above Beneficiary Designation.

IRA Owner Spouse Name

Table with 2 columns: Spouse Signature, Date. Spouse Signature cell contains a green arrow icon.

Submission Options

Table with 3 columns: FAX, EMAIL, MAIL. FAX: (858) 459-6565; EMAIL: forms@iraresources.com; MAIL: IRA Resources, 1000 Broadway, Suite 350, Oakland, CA 94607