



Savings

IRA Beneficiary Designation Form

AMERICAN EXPRESS NATIONAL BANK, MEMBER FDIC

WHAT YOU NEED TO KNOW

This form may be used to add or replace any beneficiaries you have currently designated on your IRA plan. If you want to keep your current beneficiaries, they must be included on this form. To successfully add or change a beneficiary, you must provide their full name, date of birth, relationship to you, Social Security number, and address. If any beneficiary information is missing or incorrect, we cannot add that person as a beneficiary to your IRA.

To add or change your beneficiaries more quickly, and to review your current designations, please log in to your account at go.amex/savings. Click **Account Services** then select **Manage Beneficiaries**.

Where to send this form

Send this form to us via fax to **1-800-542-0779** or via mail to **American Express National Bank, PO Box 30376, Salt Lake City, UT 84130**.

IMPORTANT TERMS YOU SHOULD KNOW

Beneficiary. The person you name to inherit your IRA in the event of your death.

IRA Custodian. A financial institution that holds your IRA funds for safekeeping and adheres to applicable IRS and government regulations.

Roth IRA. A Roth IRA is a way to save for retirement, with non-tax-deductible contributions. Earnings are tax-deferred while accumulating in the plan and, if certain requirements are satisfied, distributions (including earnings) are tax-free.

Traditional IRA. A traditional IRA is a way to save for retirement with tax advantages. Traditional IRA contributions (deposits) may be tax-deductible, and the earnings are tax-deferred while accumulating in the plan; however, they may become taxable when distributed (withdrawn).

AENB IRA OWNER INFORMATION

IRA Plan Type:

- Traditional
- Roth

Name of Account Owner

 / /

Date of Birth

AENB Account Number

 - -

Last 4 Digits of Social Security Number

Street Address

City

State

Zip/Postal Code

□□□□ - □□□□ - □□□□□□

Daytime Phone Number

Email Address

BENEFICIARY INFORMATION

You may use this form to designate up to 5 IRA plan beneficiaries.

Beneficiary #1

Name

Relationship

□□ / □□ / □□□□

Date of Birth

□□□□ - □□□□ - □□□□□□

Daytime Phone Number

□□□□ - □□ - □□□□□□

Social Security Number or Tax ID Number

Street Address

City

State

Zip/Postal Code

Beneficiary #2

Name

Relationship

□□ / □□ / □□□□

Date of Birth

□□□□ - □□□□ - □□□□□□

Daytime Phone Number

□□□□ - □□ - □□□□□□

Social Security Number or Tax ID Number

Street Address

City

State

Zip/Postal Code

Beneficiary #3

Name

Relationship

□□ / □□ / □□□□

Date of Birth

□□□ - □□□ - □□□□

Daytime Phone Number

□□□ - □□ - □□□□

Social Security Number or Tax ID Number

Street Address

City

State

Zip/Postal Code

Beneficiary #4

Name

Relationship

□□ / □□ / □□□□

Date of Birth

□□□ - □□□ - □□□□

Daytime Phone Number

□□□ - □□ - □□□□

Social Security Number or Tax ID Number

Street Address

City

State

Zip/Postal Code

Beneficiary #5

Name

Relationship

□□ / □□ / □□□□

Date of Birth

□□□ - □□□ - □□□□

Daytime Phone Number

□□□ - □□ - □□□□

Social Security Number or Tax ID Number

Street Address

City

State

Zip/Postal Code

I, the undersigned IRA Owner, hereby designate the above as my beneficiary(ies). Unless otherwise requested herein, each payment made pursuant to this designation: shall be paid in equal shares to the beneficiary(ies) who are living at the time of my death. I have the right to change this designation at any time.

Spousal consent (for use in community or marital property states): I agree to my spouse's naming a primary beneficiary other than myself. I transfer (transmute) any community property interest I have in this IRA into the separate property of my spouse. I agree to seek the advice of a legal or tax professional, as needed.

Signature of Spouse (ink only)

Date

IRA OWNER SIGNATURE

I, the undersigned IRA owner, direct that the balance remaining in my account(s) be payable in equal shares on death to the above-named beneficiary (or beneficiaries) that survive me. I have had an opportunity to consult with an attorney, financial or tax advisor, and/or other aqualified estate professional before submitting this Beneficiary Designation to American Express National Bank. I also acknowledge my understanding that certain state law restrictions may apply to payable-upon-death accounts and supersede the payable-on-death designation, and that I am solely responsible for complying with applicable law in establishing a payable-on-death account. I also understand and acknowledge that different beneficiaries may be treated differently for tax purposes. For an IRA Plans Beneficiary Designation, I am aware that in most cases I do not need spousal consent to name a non-spouse beneficiary of my IRA and I recognize it is my responsibility to get spousal consent if it is required by state law. The Custodian has not provided me with any legal or tax advice, and I assume full responsibility for this transaction. I will not hold the Custodian liable for any adverse consequences that may result from this transaction.

Signature of IRA Owner (ink only)

Date

What to do next

PLEASE SUBMIT COMPLETED FORM VIA FAX OR MAIL TO:

Fax: 1-800-542-0779

Mail: American Express National Bank, PO Box 30376, Salt Lake City, UT 84130

Have questions?

We don't provide tax advice and recommend you consult with a financial or tax advisor as needed about IRAs in general. Have questions about this form or your account? Call us 24/7 at 1-800-446-6307.