



Muhlenkamp Fund

# IRA Beneficiary Designation: Addition/Change Form

Mail To:
Muhlenkamp Fund
c/o U.S. Bank Global Fund Services
P.O. Box 701
Milwaukee, WI 53201-0701

Overnight Express Mail To:
Muhlenkamp Fund
c/o U.S. Bank Global Fund Services
615 E. Michigan St., 3rd Floor
Milwaukee, WI 53202-5207

Use this form to designate or change the beneficiary(ies) for a Traditional IRA, Roth IRA, SEP IRA, or SIMPLE IRA. Do NOT use this form for non-retirement accounts.

IMPORTANT NOTICE: This designation will not be in force unless it is signed and received by the custodian, at one of the addresses above, before the death of the IRA Grantor (shareholder). The terms, provisions, and limitations of the IRA Plan and Custodial Agreement, as amended from time to time, are controlling at all times and govern the rights of the Grantor and any beneficiaries. The Custodial Agreement is available upon request by calling (800)860-3863.

## 1. Account Information

Complete the following account information as it appears on your Muhlenkamp Fund account statement.

ACCOUNT NUMBER: \_\_\_\_\_ SOCIAL SECURITY NUMBER: XXX - XX - \_\_\_\_\_
ACCOUNT REGISTRATION: \_\_\_\_\_
DAYTIME PHONE NUMBER: \_\_\_\_\_ EVENING PHONE NUMBER: \_\_\_\_\_

## 2. Beneficiary Designation

Complete the following information for the beneficiary(ies) you designate.

- NOTE:
• Payments upon death will be made to the primary beneficiary(ies) first.
• If any of your beneficiaries die before you, the deceased beneficiary's share will be reallocated among the surviving beneficiaries on a pro-rata basis.
• The secondary beneficiary(ies) inherit only if all primary beneficiaries are deceased or disclaim their inheritance.
• All beneficiaries must be named, as the Custodian cannot properly determine beneficiaries such as "children" or "spouse".
• If you wish to name more than four primary or secondary beneficiaries, attach a separate sheet and check the box in Section 3.
• If you have reached your "required beginning date" (April 1 following your 70 1/2 year), a change of beneficiary may affect your Required Minimum Distribution.
• If beneficiary is a minor, indicate "minor" next to their name and attach a separate sheet indicating a custodian for the minor.

I hereby revoke all prior beneficiary designations and designate the following as the beneficiary(ies) of my Retirement Account (IRA) upon my death:

Primary Beneficiary(ies). In the event of my death, pay my IRA balance to the primary beneficiary(ies) listed below:

Table with 6 columns: NAME, RELATIONSHIP, ADDRESS, SSN, DATE OF BIRTH (mm/dd/yyyy), %

Secondary Beneficiary(ies). If all of the primary beneficiary(ies) die before me, pay my IRA balance to the following secondary beneficiary(ies):

Table with 6 columns: NAME, RELATIONSHIP, ADDRESS, SSN, DATE OF BIRTH (mm/dd/yyyy), %

Spousal Consent: (Complete only if required by your state's law.) If you name someone other than or in addition to your spouse as primary beneficiary and reside in a community or marital property state, including AZ, CA, ID, LA, NV, NM, TX, WA, and WI, your spouse must consent by signing below. Please consult your own legal adviser.

SIGNATURE OF SPOUSE \_\_\_\_\_ DATE (mm/dd/yyyy) \_\_\_\_\_

## 3. Signature of IRA Owner

I have read and understand the IRA Disclosure Statement and Custodial Account Agreement. I wish to designate the above as the beneficiary(ies) of my IRA listed in Section 1.

Check here if you have attached a separate sheet detailing additional information.

SIGNATURE OF IRA OWNER (GRANTOR) \_\_\_\_\_ DATE (mm/dd/yyyy) \_\_\_\_\_