

**Individual Annuity Ownership Change Request**

Please Print

Contract Number	Annuitant	Owner (If other than the Annuitant)
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**A Transfer of Ownership** from the current owner of the above-referenced contract to the new owner(s) shown below is permissible pursuant to the terms and conditions of the contract with regard to insurable interest. The undersigned owner(s) warrant(s) that he or she has the right to transfer the ownership of the contract and that no proceedings in bankruptcy or insolvency, voluntary or involuntary, have been instituted by or against him/her and he/she is not under guardianship or any legal disability. **This change of ownership may be considered a taxable distribution. Consult your personal tax adviser on all tax matters. Please be advised that changing the ownership will terminate any systematic withdrawal that is currently processing on this contract.**

**Section I: New Primary Owner**

*In order to update beneficiary information in conjunction with this change, the new owner must complete a Beneficiary Change Request (Form V-4614).*

New Primary Owner Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Daytime Phone \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Social Security or Taxpayer Number \_\_\_\_\_

**Section II: New Joint Owner OR Successor Owner**

*Please note: Joint Trustee or successor Trustee information should not be provided in this section unless that individual is also being added to the contract as a joint or successor owner.*

New Joint Owner Name **OR**  New Successor Owner Name  
 Name (Print) \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Daytime Phone \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Social Security or Taxpayer Number \_\_\_\_\_

**Section III: Change of Name**

*You **must** submit proof of the name change (e.g., Court Documents, Drivers License, Divorce Decree).*

Former Name \_\_\_\_\_ New Name \_\_\_\_\_

**Section IV: Date of Birth Correction**

*Please note: Proof of the date of birth may be requested in order to complete this change,*

From \_\_\_\_\_ To \_\_\_\_\_

**Under penalty of perjury, each owner certifies that his/her Social Security (or taxpayer identification) number is correct as it appears on this form.**

**WARNING!** If your contract has a Guaranteed Lifetime Withdrawal Benefit Rider, additional documents may be required. The transfer of ownership could have negative impact(s) to the rider. Please refer to your contract for more details.

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
\*Signature of Current Owner Date

\_\_\_\_\_  
Signature of Current Joint Owner (if applicable)

\_\_\_\_\_  
\*Signature of New Owner Date

\_\_\_\_\_  
Signature of new Joint/Successor Owner (if applicable)

**\*If trust, custodial, corporate, or partnership owned, must include a title after the signature (e.g., Trustee, Custodian, etc.). If signing pursuant to a power of attorney, must indicate this after signature (e.g., POA, Attorney-in-Fact, etc.).**

