



**Eagle Life Insurance Company®**  
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# Ownership Change

Contract Number: \_\_\_\_\_ Annuitant(s): \_\_\_\_\_

Current Owner(s): \_\_\_\_\_

**SECTION I: To be completed by Current Owner(s) and New Owner(s)**

**OWNERSHIP CHANGE**

I/We, the current Owner(s) of the above captioned annuity contract (the "Contract"), hereby assign all rights, title and interest in and to the Contract to the party(ies) identified below:

New Owner:	Date of Birth:	SSN/TIN:	Relationship to Owner:
Mailing Address:		Phone Number:	Marital Status:
New Joint Owner <i>(if applicable)</i> :	Date of Birth:	SSN/TIN:	Relationship to Owner:
Mailing Address:		Phone Number:	Marital Status:

**Spousal Consent for Ownership Change**

If the current Owner(s) resides in AZ, CA, ID, LA, NV, NM, TX, WA, or WI, spousal consent, or the consent of any individual who is established by law as being a party to a legally recognized domestic relationship according to the laws of the state of the owner's domicile, is required to complete this transfer of ownership. Eagle Life shall be entitled to rely on its good faith belief that no community property interest exists and assumes no responsibility for injury. All persons signing this form agree to indemnify and hold Eagle Life harmless from the consequences of processing this transaction.

X \_\_\_\_\_ Date X \_\_\_\_\_ Date  
 Signature of Current Owner's Spouse Signature of Current Joint Owner's Spouse

By signing below I/We consent to the change of ownership of the Contract from the Current Owner(s) to the New Owner(s). I/We understand that this change of ownership is irrevocable once processed by Eagle Life and that the Current Owner(s) will no longer have any right to take action or receive any information on the Contract.

This form must be signed by ALL Current Owner and ALL New Owners. **NEW OWNERS MUST ALSO COMPLETE SECTION II BELOW.**

X \_\_\_\_\_ Date X \_\_\_\_\_ Date  
 Current Owner's Signature Current Joint Owner's Signature *(if applicable)*

X \_\_\_\_\_ Date X \_\_\_\_\_ Date  
 New Owner's Signature New Joint Owner's Signature *(if applicable)*

X \_\_\_\_\_ X \_\_\_\_\_  
 New Owner's Initials New Joint Owner's Initials

**SECTION II: To be completed by New Owner(s)**

**BENEFICIARY DESIGNATION: Upon change of ownership, all prior beneficiary designations are revoked.** The new Owner(s) must complete the following section to designate a beneficiary of the Contract. If you do not designate a new beneficiary or if this designation is ineffective or otherwise not accepted by Eagle Life before a claim is triggered, proceeds will be paid to the decedent's estate.

**Instructions for Beneficiary Designations:**

- All requested information below must be completed for this form to be in good order. This information is used to assist in paying out any death benefit proceeds in the event a claim is triggered.
- When multiple beneficiaries are named, you must indicate the percentage of the proceeds each beneficiary is to receive. Do NOT list a dollar amount. All percentages must total 100%. If no percentages are listed, or if percentages do not equal 100%, proceeds will be divided equally among surviving beneficiaries.
- **If there are joint owners, proceeds do not automatically pay to the surviving owner upon the death of the first owner. In order for the surviving owner to be the beneficiary of the Contract, please designate "Surviving Owner" as the primary beneficiary.**
- Spousal continuation is only available if the spouse is sole primary beneficiary.
- Do not list classes of beneficiaries (e.g. "My Children"). Instead, list each beneficiary individually.
- If you wish to name additional beneficiaries, please attach a Beneficiary Addendum – Form 3527.

**YOU MAY NOT NAME YOUR REPRESENTATIVE AS A PRIMARY OR CONTINGENT BENEFICIARY UNLESS YOUR REPRESENTATIVE IS DIRECTLY RELATED TO YOU.**

I/We, the NEW Owner(s) of the Contract, designate the following beneficiary(ies) of the Contract:

Beneficiary Type	Beneficiary Name and Relationship	Date of Birth/Trust Date	Social Security/Tax ID#	Address (Street, City, State, Zip)	Percentage
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent					
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent					
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent					
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent					
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent					
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent					
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent					

**Spousal Consent for Beneficiary Designation**

If the current Owner(s) resides in AZ, CA, ID, LA, NV, NM, TX, WA, or WI, spousal consent is required to name someone other than the spouse as the primary beneficiary of the Contract. Eagle Life shall be entitled to rely on its good faith belief that no community property interest exists and assumes no responsibility for injury. All persons signing this form agree to indemnify and hold Eagle Life harmless from the consequences of processing this transaction.

X \_\_\_\_\_ Date X \_\_\_\_\_ Date  
Signature of New Owner's Spouse Signature of New Joint Owner's Spouse

X \_\_\_\_\_ X \_\_\_\_\_  
New Owner's Initials New Joint Owner's Initials

**Tax Identification Certification (Substitute W-9)**

Under Penalty of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number; and
- 2. I am not subject to backup withholding due to failure to report interest and dividend income; and
- 3. I am a U.S. citizen or other U.S. Person (defined in the W-9 instructions).

*Certification Instructions: You must strike out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding.*

**The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

**Trusts:** If a Trust is the New Owner, the trustee must sign for the New Owner in his/her capacity as trustee and must submit to Eagle Life either (1) a full copy of the trust OR (2) the first page and all signature pages of the trust, along with Form 3523 (Certification of Trust).

**Business Entities:** If a business entity is the New Owner, an officer of the business other than the annuitant must sign this form and indicate his/her official title. You must also submit documentation showing who is authorized to sign on behalf of the business.

**POAs, Guardianships, Conservatorships:** If you are signing on behalf of someone as their Attorney-in-Fact, Guardian, or Conservator, Eagle Life requires a copy of the applicable Power of Attorney, Letters of Guardianship, or Letters of Conservatorship.

Eagle Life is required to report any taxable event. If you have questions regarding your tax liability, please contact your tax advisor.

By signing below, I/we acknowledge that the information contained herein is true and accurate to the best of my belief.

x \_\_\_\_\_  
New Owner's Signature Date

x \_\_\_\_\_  
New Joint Owner's Signature (if applicable) Date

X   X   
New Owner's Initials New Joint Owner's Initials