

Annuitant Change Request Form

07-150-1 (09/18)



Americo Financial Life and Annuity Insurance Company

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Annuitant	Policy Number
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Please note the following before completing the form:

- Only the owner of non-qualified policies can change the annuitant. The annuitant cannot be changed on IRAs, 403(b)s, or other qualified plans funded by pre-tax or tax deductible dollars.
- Only the owner may change the annuitant. If the owner is not a natural person, then the annuitant cannot be changed (i.e., if the owner is a trust or corporation).
- The annuitant must be a natural person. The annuitant cannot be a trust or corporation.

As owner of the above designated policy, I request that the annuitant be changed. As defined in the contract, the annuitant is the person(s) who serves as the measuring life for the purposes of determining the amount of annuity payments on the annuity date while the owner is the person(s) or entity that may exercise all rights and privileges under this contract during the lifetime of the annuitant.

New Annuitant	Annuitant's Date of Birth
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Annuitant's Tax Identification Number	Annuitant's Email Address
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Annuitant's Street Address *(Include City, State, and ZIP)*

TAXPAYER IDENTIFICATION CERTIFICATION

Certification

1. Under penalties of perjury, I certify that I am a US citizen or other US person, and that the number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me.)
2. I am not subject to backup withholding because (A) I am exempt from backup withholding, or (B) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (C) the IRS has notified me that I am no longer subject to backup withholding.
 Check the box if you have been notified by the IRS that you are currently subject to backup withholding because you failed to report all interest or dividends on your tax return.
3. I am exempt from FATCA reporting.

X _____
Annuitant's Signature Date

X _____
Owner's Signature Date Owner's Daytime Phone Number

X _____
Joint Owner's Signature Date

X _____
Signature of Notary Public *(If required)* Stamp/Seal of Notary Public