



Virtus Mutual Funds  
 PO Box 534470  
 Pittsburgh, PA 15253-4470

**403(b) Custodial Account  
 Beneficiary Designation Form**

For assistance, please contact us at 800-243-1574 or visit our website at Virtus.com

**1. Important Information**

Complete this form to change your current Primary or Contingent Designated Beneficiary(ies). The share percentage must equal 100% for all Primary Beneficiaries and 100% for all Contingent Beneficiaries. If neither the Primary nor the Contingent Beneficiary box is checked, the beneficiary will be deemed to be a Primary Beneficiary.

**2. Participant Information**

Name	U.S. Social Security Number	
Address	Email Address	
City, State, ZIP Code	Fund and Account Number(s)	
<input type="checkbox"/> By checking the preceding box, I authorize Virtus Mutual Funds to replace any conflicting information and/or add any missing information to my account records, with regard to the address, email address and telephone numbers provided in this section.	Mobile Telephone Number	Evening Telephone Number

**3. Participant's Designation**

I hereby revoke any previous beneficiary designation.

In the event of my death, the balance in the account shall be paid to the Primary Beneficiaries who survive me in equal shares (or in the specified shares, if indicated). If none of the Primary Beneficiaries survive me, the balance in the account shall be paid to the Contingent Beneficiaries who survive me in equal shares (or in the specified shares, if indicated). I understand that, unless I have specified otherwise, if I name multiple Primary Beneficiaries and a beneficiary does not survive me, such interest is terminated and that percentage will be divided proportionately among the remaining Primary Beneficiaries. Similarly, unless I have specified otherwise, if no Primary Beneficiary survives me and I have named multiple Contingent Beneficiaries and a beneficiary does not survive me, such interest is terminated and that percentage will be divided proportionately among the remaining Contingent Beneficiaries. If I name a beneficiary that is a Trust, I understand that I must provide certain information concerning the Trust to the Custodian. I understand that I may change my beneficiaries at any time by giving written notice to the Custodian. If I do not designate a beneficiary, or if all designated beneficiaries predecease me, my surviving spouse will become the beneficiary of my custodial account. If I do not have a surviving spouse at the time of my death, my estate will become the beneficiary of my custodial account.

**PER STIRPES BENEFICIARY DESIGNATIONS** The Custodian shall accept as complete and accurate all written instructions provided in good order by the estate/executor with regard to the identification of the beneficiaries and the allocations thereto.

**Primary, or** \_\_\_\_\_  
 **Contingent** Name \_\_\_\_\_ Social Security Number \_\_\_\_\_ Relationship to Participant \_\_\_\_\_

\_\_\_\_\_ Address \_\_\_\_\_ Date of Birth \_\_\_\_\_ Percentage \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Apply a per-stirpes designation

**Primary, or** \_\_\_\_\_  
 **Contingent** Name \_\_\_\_\_ Social Security Number \_\_\_\_\_ Relationship to Participant \_\_\_\_\_

\_\_\_\_\_ Address \_\_\_\_\_ Date of Birth \_\_\_\_\_ Percentage \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Apply a per-stirpes designation

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