

## Qualified Retirement Plan Beneficiary Designation Addendum

This form may only be used to supplement an Individual 401(k) application or qualified retirement plan beneficiary designation form to name more beneficiaries than can be accommodated on these forms. Complete additional addendums if necessary.

**VIP Services:** (888) 855-9856 | info@trustprovident.com 8880 W. Sunset Rd., Suite 250, Las Vegas, NV 89148

Section 1 Plan Participant Information
First Name MI Last Name
Last Four Digits of Email Social Security Number Account Number
Form Type and Date (Select and attach the supplemented form)  Original Individual 401(k) Application Qualified Retirement Plan Beneficiary Designation Form Dated
Section 2 Beneficiary Information
I designate the beneficiaries named below, in addition to the beneficiaries named on the attached form, as beneficiaries of this retirement plan.  All fields must be completed.
Primary Contingent Share Percentage % (Whole percentages only)
First Name MI Last Name
Address City State Zip
Tax ID (SSN/TIN)  Date of Birth (mm/dd/yyyy)  Relationship
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Address City State Zip
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Address City State Zip	
Tax ID (SSN/TIN) Date of Birth (mm/dd/yyyy) Relationship	
Primary Contingent Share Percentage % (Whole percentages only)	
First Name MI Last Name	
Address City State Zip	
Tax ID (SSN/TIN) Date of Birth (mm/dd/yyyy) Relationship	
If you are naming an entity (e.g., trust, estate, charity) as beneficiary, please complete the following information.	
☐ Primary ☐ Contingent Share Percentage  % (Whole percentages only)	
Date of Registration	/Creation
Name of Entity/Trust/Estate Tax ID (mm/dd/yyyy)	
Address City State Zip	
Trustee, Executor, or Authorized Signer Name	
NOTE: The total share percentage indicated for primary beneficiaries and the total share percentage indicated for contingent beneficiaries must	total 100%
Check here if additional beneficiaries are listed on an attached addendum. Total number of addendums attached to this account	
Section 3 Plan Participant Authorization	
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understand that I may replace my beneficiary designations at any time by completing and delivering a Qualified Retirement Plan	
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**Fax to:** (702) 253-7565

Las Vegas, NV 89148