

1. CLIENT INFORMATION

Name: _____ SSN or Tax ID: _____

Marital Status: Married Not Married Legally Separated: *Attach Court Order of Legal Separation. Petition not acceptable.*
 Missing Spouse: *By marking this box, I hereby affirm that I have made reasonable attempts to locate my spouse and have not been able to do so, and I have no reason to believe that I will be able to do so.*

Account Number(s): Changes made on this form will apply to all of your accounts unless you note specific accounts below.

2. BENEFICIARY DESIGNATION

This beneficiary designation supersedes all previous beneficiary designations for such account(s).

- A beneficiary may be an individual, institution, estate, or trust.
- To ensure that all beneficiaries are identified, list each by name.
- If you wish to designate as beneficiaries your current children, and any children who may be born to you or legally adopted in the future, add the words "all my living children" in the name box following the last child listed.
- If no percentage is indicated, your benefits will be paid equally to the listed beneficiaries.
- When there are multiple beneficiaries and one predeceases you, the proceeds will be divided between the remaining beneficiaries.
 A designation of "Per Stirpes" after the beneficiary name allows the children of the deceased beneficiary to receive the deceased beneficiary's portion.

PRIMARY BENEFICIARIES: INDICATE PRIMARY BENEFICIARIES BELOW

Primary beneficiaries receive death benefits upon the client's death.

- **Section 3 must also be completed if you are designating a minor as a beneficiary.**
- **Section 4 must also be completed if you are a participant in an ERISA-covered plan and you are naming someone other than your spouse as the primary beneficiary.**

Name <small>First, MI, Last, or Trust/Estate Name</small>	Address <small>123 Main Street, Anytown, State 12345</small>	SSN <small>123-45-6789</small>	Date of Birth <small>MM-DD-YYYY</small>	Relationship	Percentage <small>Whole % Only</small>

Total must equal 100%

- Check here if you have named additional primary beneficiaries on a separate sheet, signed, dated and attached to this form.
 Print your name and social security number at the top of each separate sheet attached.

CONTINGENT BENEFICIARIES: INDICATE CONTINGENT BENEFICIARIES BELOW

Contingent beneficiaries receive death benefits if all the primary beneficiaries are deceased at the time of the client's death.

- **Section 3 must also be completed if you are designating a minor as a beneficiary.**

Name <small>First, MI, Last, or Trust/Estate Name</small>	Address <small>123 Main Street, Anytown, State 12345</small>	SSN <small>123-45-6789</small>	Date of Birth <small>MM-DD-YYYY</small>	Relationship	Percentage <small>Whole % Only</small>

Total must equal 100%

- Check here if you have named additional contingent beneficiaries on a separate sheet, signed, dated and attached to this form.
 Print your name and social security number at the top of each separate sheet attached.

3. CUSTODIAN FOR BENEFICIARY WHO IS A MINOR

VALIC will pay claims only to a custodian or through an alternative guardianship arrangement for a Beneficiary who is a Minor. If you have named a minor as a primary or a contingent beneficiary, please designate a custodian for the beneficiary who is a minor under your state's Uniform Transfers (Gifts) To Minors Act. or contact a local attorney regarding other alternatives to guardianship requirements.

_____ as Custodian for _____ under the _____ Uniform Transfers (Gifts) to Minors Act.
(name of custodian) (name of beneficiary who is a minor) (state)

- Check here if you have named additional contingent beneficiaries on a separate sheet, signed, dated and attached to this form.
Print your name and social security number at the top of each separate sheet attached.

4. ERISA SPOUSAL CONSENT

Spousal Consent is required for ERISA plans when designating a non-spouse as a primary beneficiary. The Plan Administrator or a Notary Public must witness your spouse's signature. If you are not sure if this requirement applies to you, please contact the Client Care Center at 1-800-448-2542.

Required for spouse: For your spouse to read and sign

Under federal law for ERISA plans, as the spouse of the contract owner, you have the right to receive a survivor benefit of at least 50% of the amount in this contract if your spouse dies before you.

- I agree to the beneficiary designation listed above.
- I understand and agree that I'm giving up my right to receive a survivor benefit payment from VALIC Retirement Services Company, and I release VALIC Retirement Services Company from all liability for completing this transaction.

Spouse's Signature ***Must be witnessed by Plan Administrator or Notary Public**

_____ Date

PLAN ADMINISTRATOR'S ACKNOWLEDGEMENT

- The client has established to my satisfaction that spousal consent is not required.
- OR
- I affirm that any signature of a client's spouse in this section has been witnessed either by me or by a Notary Public.

NOTARY PUBLIC

State of _____ County of _____

On this _____ day of _____ year of _____

Before me personally appeared

_____ (Name of spouse)

known to me to be the person who executed the ERISA SPOUSAL CONSENT and he/she acknowledged to me that he/she executed the same.

_____ Plan Administrator's Signature

_____ Date

_____ Notary Public

_____ Date

5. CLIENT APPROVAL

I certify that the information provided above is true and correct. I request the company to make the requested change(s).

_____ Client's Signature

_____ Date

Please send completed forms to:

AIG VALIC Document Control
P.O. Box 15648
Amarillo, TX 79105-5648

AIG VALIC is the marketing name for the group of companies comprising VALIC Financial Advisors, Inc.; VALIC Retirement Services Company; and The Variable Annuity Life Insurance Company (VALIC); each of which is a member company of American International Group, Inc.

Information

QUALIFIED JOINT AND SURVIVOR ANNUITY AND QUALIFIED ANNUITY BENEFIT: FOR ERISA PLANS ONLY

This notice should be provided to you at least 30 days, but no more than 90 days, before your proposed distribution date.

If you are married, your retirement plan distributions will be paid to you in the form of a Qualified Joint and Survivor Annuity ("QJSA") unless you elect a different form of distribution. Under your QJSA, if your spouse survives you, the plan will pay him or her at least 50% of the amount the plan had been paying to you, on the same frequency as the payments to you. If you are not married, your benefit will be paid monthly over your life and will end upon your death unless you elect a different form of distribution. This benefit is referred to as a Qualified Annuity Benefit ("QAB").

The plan may satisfy the QJSA or QAB by using your vested account balance to purchase an annuity contract from an insurance company. The actual monthly payments made under the annuity contract will depend on the value of your account balance, annuity purchase rates used by the insurance company, your age, and if you are married, your spouse's age at the time the distribution begins.

The following table reflects the relative values of monthly payments from a Joint and Survivor Annuity and a Life Annuity, assuming a vested account balance of \$5,000 and an interest rate of 6%. This table is based on the UP-1984 Mortality tables. **The table is hypothetical and does not reflect the value of your individual benefit or the actual payments you or your beneficiaries would receive.** Please note that as the ages change, the payment amount will change. If none of the examples closely approximates your situation, you may obtain a more accurate value specific to your situation from your plan administrator or from your financial advisor.

Age at Benefit Starting Date

Annuitant	70	65	60	55	50	45	40	35
Spouse	65	70	55	60	45	50	35	40

Monthly Payment

Annuitant Life Only	51.71	44.59	39.32	35.48	32.65	30.53	28.95	27.78
Joint and 50% Survivor	44.08	41.27	35.11	33.49	30.28	29.33	27.61	27.06

This QJSA or QAB requirement may not apply to smaller account balances (generally below \$5,000) and will not apply if you have elected another form of benefit. A partial withdrawal would be considered another form of benefit for this purpose. Other alternate forms of benefits that may be available under your employer's plan and under your plan investments may include:

Annuity

An annuity can provide you with payments for your life or for your life and that of your beneficiary; payments for a specified period; payments for your lifetime with a minimum guaranteed period; or a continuation of payments to your surviving spouse that is different from the plan's percentage of the payments made to you. Generally, the more that the form of payment guarantees, such as a minimum period of payments, or payments to your surviving spouse or to another beneficiary, the more that specified benefit amount will cost. There are IRS rules that may limit the period during which payments may be made.

Lump Sum Distribution

If you elect a lump sum distribution, your benefit will be paid to you in one payment. The amount of your benefit is the vested portion of your account balance as of the valuation date used to calculate your distribution.

Installments

If you elect to receive your benefits in installments, you may specify the dollar amount and frequency of your payments. The period of time over which you receive these installments cannot be greater than your life expectancy or the joint life and last survivor expectancy of you and your designated beneficiary. There are other IRS rules that may further limit the period over which you receive payments.

In order to elect one of these alternative forms of benefits you must waive your right to the QJSA or QAB, and if you are married, your spouse must also consent in writing. In addition, this written consent must be witnessed by a Notary Public or by your Plan Administrator. You are entitled to 30 days (but no more than 90 days) within which to make this decision. Although you have at least 30 days to make this decision, under some circumstances, you may waive this minimum 30-day period, and if you submit a waiver of the QJSA or QAB less than 30 days after it is signed we will assume that you are waiving this notice period. Unless a waiver of the QJSA or QAB is made irrevocably, you have the right to revoke the waiver and execute another waiver at a later time, up to the time when the benefit payments have started. You also have the right to defer receiving a distribution, subject to the terms of your employer's plan as well as legal requirements that generally require distributions to commence upon the later of attainment of age 70½ or retirement.