

Prudential Mutual Fund Services LLC (PMFS),
a Prudential Financial company

For assistance:
 Clients: **(800) 225-1852**
 Pruco representatives: **(800) 542-7117**
 Financial professionals: **(888) 778-5471**

Instructions

Use this form to add or change the beneficiary designation on your IRA, Roth IRA, & SEP IRA accounts. You can also change beneficiaries online at prudentialfunds.com/myaccess.

About Your Beneficiary Designation

When you submit this form, it will replace any prior beneficiary designations on the accounts listed on this form. Therefore it is important that you list all the primary and secondary beneficiaries you want to designate, even if you are only updating information about one beneficiary. Those you designate as your primary beneficiaries will be the first to inherit your mutual fund assets upon your death. Secondary beneficiaries will receive the balance of your mutual fund assets only after the primary beneficiary.

If you do not designate a beneficiary, your IRA will be distributed to your surviving spouse or your estate.

We encourage you to consult an advisor who understands both tax-law and related estate-planning implications of this form.

1 Account Information *(Print account information exactly as it appears on your account statement.)*

A. Owner Information

Account Owner Name *(first, MI, last name)* Mr. Ms. Mrs.

Social Security number

Mailing address Check if mailing address has changed

City _____ State _____ ZIP code _____ 4-digit ext _____

Daytime phone number _____ Extension _____ Cell phone number _____

E-mail address

B. Account Number(s)

The beneficiary designations listed on this form apply to all funds under the following PMFS IRA accounts. If you wish to designate different beneficiaries for different accounts, then submit separate forms for each account.

Account number *(required)* Account number *(if applicable)* Account number *(if applicable)*

2 Choose your Beneficiaries

Tell us who should receive your account balance after your death. For each beneficiary you list by name, check a beneficiary type (primary or secondary) and provide all information.

If the **Per Stirpes** designation is checked and the named beneficiary does not survive the account owner, but leaves surviving descendants, then any share otherwise payable to such beneficiary shall instead be paid to such beneficiary's surviving descendants, by right of representation.

Please note, the primary and secondary beneficiary totals must each equal 100%.

Primary Secondary (Please check one)

Name:

Per Stirpes

Percentage:

 %

Social Security Number:

Date of Birth:

Relationship:

Address:

Daytime phone number:

City:

State:

Zip Code:

4-digit ext

E-mail address

Primary Secondary (Please check one)

Name:

Per Stirpes

Percentage:

 %

Social Security Number:

Date of Birth:

Relationship:

Address:

Daytime phone number:

City:

State:

Zip Code:

4-digit ext

E-mail address

2 Beneficiaries *(continued)*

Primary Secondary (Please check one)

Name: Per Stirpes Percentage: %

Social Security Number: Date of Birth: Relationship:

Address: Daytime phone number:

City: State: Zip Code: 4-digit ext

E-mail address

Primary Secondary (Please check one)

Name: Per Stirpes Percentage: %

Social Security Number: Date of Birth: Relationship:

Address: Daytime phone number:

City: State: Zip Code: 4-digit ext

E-mail address

Please check here if you have attached a separate sheet with additional beneficiary designations. Include the date and your signature.

3 Minor Beneficiaries *(optional)*

If any beneficiary named in this form is a minor, I hereby request that proceeds be paid to _____ as custodian under the _____ (name of state) UTMA (to the extent permitted by named state).

Important: The date of birth of the named minor is required in Section 2 for this designation to apply.

4 Spousal Consent

Special laws apply to the designation of a beneficiary by a married person residing in a "community property" state. Community property is recognized in AZ, CA, ID, LA, NV, NM, TX, WA, WI and Puerto Rico. If you are married and reside in a community property state and have not designated your spouse as your sole primary beneficiary, your spouse must sign this section. Your spouse's signature represents consent to the beneficiary designation.

For Federal tax purposes, the term "spouse" includes any married individuals (same sex or otherwise), if the individuals are lawfully married under state law. Federal law does not recognize domestic partnerships or civil unions that are not designed as "married" under state law.

There are numerous situations that may affect your beneficiary designation. We suggest you consult an advisor who understands both tax-law and related estate-planning implications of this form. Neither Prudential Mutual Fund Services LLC, nor Prudential Investments, or its affiliates will be liable for any consequences resulting from failure to provide proper spousal consent.

Spouse's signature

Date (mm/dd/yyyy)

Sign here

X _____

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5 Signature

As the account owner, by signing this form, I certify and acknowledge that:

- this beneficiary designation replaces the current designation on my IRA accounts.
- this beneficiary designation cannot be changed or modified after my death.
- the calculation of RMDs may be affected by changing the beneficiary of this IRA, and
- the information provided on this form is correct.

Account owner's signature

Date (mm/dd/yyyy)

Sign here

X _____

(if the IRA owner is a minor, a legal guardian or custodian must sign.)

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Mailing Instructions

Standard mail to: Prudential Mutual Fund Services LLC
PO Box 9658
Providence, RI 02940

Overnight mail to: Prudential Mutual Fund Services LLC
4400 Computer Drive
Westborough, MA 01581