Beneficiary Designation Form



Use this form to designate or change a beneficiary(ies) on your IRA account(s). To update the beneficiary on a non-IRA, the Transfer on Death Form needs to be used. ☐ New Participant Beneficiary Form ☐ Change in Existing Beneficiary Form FOR MUTUAL FUND AND ALL IRA ACCOUNTS Mail completed form to: Lord Abbett Funds Service Center, P.O. Box 534489, Pittsburgh, PA 15253-4489 Overnight mail: Lord Abbett Funds Service Center, Attention: 534489, 500 Ross Street, 154-0520, Pittsburgh, PA 15262 Fax: 844-761-0139 Call Lord Abbett for assistance: 888-522-2388 (Monday - Friday between 8:00 a.m. and 5:30 p.m. ET) **STEP 1: ACCOUNT REGISTRATION INFORMATION** Owner Name (First Name, MI, Last Name) Street Address City State Zip Code Email Address Daytime Phone Number STEP 2: ACCOUNT INFORMATION 🔼 🗖 All my Lord Abbett IRA accounts (Traditional, Roth, Rollover, SEP, and SIMPLE IRA). Account Number (Please provide one of your IRA account numbers) B. D Specific accounts listed below (If you wish to designate different beneficiaries for multiple accounts, please complete one form for each account. Photocopies of this form with an original signature are acceptable.) **Fund Name Account Number**

STEP 3: BENEFICIARY DESIGNATION

Beneficiary Name (First Name, MI, Last Name)

If you have any additional primary beneficiaries, or wish to designate any additional contingent beneficiaries, please attach a separate list.

Upon my death, distribute all funds in my retirement account(s) specified in Step 2 as listed below. I revoke all prior beneficiary designations, if any, made by me for these assets.

I understand that if I do not designate a beneficiary, assets will be paid to my estate. If the custodian receives satisfactory proof that all primary beneficiaries have predeceased the applicant, the assets will be paid to the contingent beneficiary(ies).

I understand that I may add or change the beneficiary(ies) designated below at any time after the account is established by filing a new beneficiary designation with the custodian. Any such subsequent beneficiary designation will revoke all prior designations. (If no percentage is specified, the account balance will be shared equally among all designated beneficiaries.)

If your beneficiary allocation totals at least 99%, but less than 100% (e.g., three named beneficiaries are each assigned a 33.33% interest in the account), Lord Abbett will assign the unallocated remainder to the first beneficiary.

Share % (Total

Primary Beneficiary(ies): If there is no Primary Beneficiary living at the time of my death, the balance is to be distributed to the Contingent Beneficiaries I designate (see next page), unless I have stipulated a Per Stirpes* Designation within my Primary designation.

Social Security or

Date of Birth

or Name of Trust or Trustee	Must Equal 100%)	Tax ID Number	(MM/DD/YYYY)	or Trust	Yes or No
1					
2					
3			· -		
4	Total = 100%		-		
Contingent Beneficiary(ies)					
Beneficiary Name (First Name, MI, Last Name) or Name of Trust or Trustee	Share % (Total Must Equal 100%)	Social Security or Tax ID Number	Date of Birth (MM/DD/YYYY)	Relationship or Trust	Per Stirpes* Yes or No
1					
2					
3			· -		
4	Total = 100%				
responsibility to determine whether this section applies CA, ID, LA, NM, NV, TX, WA, or WI], the shareholder may the primary beneficiary for at least half the account. The qualified plan, please talk to your plan administrator. No of the shareholder to provide proper spousal consent. I am the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the above-named shareholder. I acknown in the spouse of the s	need to obtain his/her spo shareholder may need to either the Custodian nor th owledge that I have receiv of giving up my communit	ouse's consent if the sconsult with legal co e plan sponsor is lial red a full and reasona y property interest in	shareholder has no unsel. If you are a s ble for any consequ ble disclosure of m this account, if any	t designated his/ shareholder in yo ences resulting f ny spouse's prope r, I have been adv	ner spouse as ur employer's rom a failure rty and sed to see a
I hereby consent to the designation(s) indicated above. I was given to me by the Custodian or plan sponsor.	assume full responsibility	for any adverse cons	equence that may r	result. No tax or l	egal advice
Signature of Spouse				Date	
Signature of Witness for Spouse (not shareholder or ber	eficiary)			 Date	
STEP 5: AUTHORIZED SIGNATURE					
I understand that this form revokes all prior beneficiary	designations in my Lord A	bbett retirement acco	ount(s) as reference	ed above.	
Authorized Signature				Date	

Per Stirpes*

Relationship