Principal Funds P.O. Box 8024 Boston, MA 02266-8024

Overnight Mail: 30 Dan Road Canton, MA 02021-2809

800-222-5852
PrincipalFunds.com

Beneficiary Designation

- Use this form to make changes to your **EXISTING** Principal Funds **RETIREMENT** account only.
- If you wish to open a new account, contact your Investment Representative or call Principal Funds for an Account Application and prospectus.
- Please type or print clearly.

1. Account Information

Please provide your current address and account information so we can ensure that your account is up to date

Account Number

First Name, Middle Initial, Last Name

Social Security Number (Last Four Digits)
XXX-XX-

Date of Birth (MM/DD/YYYY)

Legal Street Address (no P.O. Box Addresses), City, State, Zip

Mailing Address (if different from above), City, State, Zip

Contact Telephone Number

E-mail Address

2. Beneficiary Designation

Your account will be update to the bene info listed below. This will override all prior bene listings. If neither primary nor contingent status is indicated, the individual or entity will be deemed to be a primary beneficiary. If more than one primary/contingent beneficiary is designated and no distribution percentages are indicated, the beneficiaries will be deemed to own equal share percentages in the account. If any primary or contingent beneficiary dies before me, his or her interest and the interest of his or her heir(s) shall terminate completely, and the percentage share of any remaining beneficiary(ies) shall be increased on a pro rata basis unless I have indicated otherwise by checking the “per stirpes” box. A per stirpes beneficiary designation means that the interest of any beneficiary(ies) in a particular class (primary or contingent) who predecease me will go to his or her heir(s) in equal shares unless otherwise specified. If no primary beneficiary(ies) survives me, the contingent beneficiary(ies) shall acquire the designated share of my account. If no beneficiary(ies) survive me, my beneficiary shall be my estate, or if none, the individual(s) who would have inherited my estate had one existed.

☐ Check here for per stirpes beneficiary designation. By selecting this option you are negating the standard per capita beneficiary designation. Due to the provisions associated with this selection, we recommend that you discuss your decision with a qualified advisor. Additional information may be required from the executor or personal representative of your estate for final distributions.

To name additional beneficiaries complete and attach a new copy of this page.

Choosing beneficiaries and methods of distribution can be very complex and can have significant impacts on various tax situations. We strongly recommend working with a qualified legal or tax advisor when making your selections.

Name of Beneficiary ☐ Primary ☐ Contingent Social Security Number / Taxpayer Identification Number

Date of Birth (MM/DD/YYYY) Relationship: ☐ Spouse ☐ Non-Spouse ☐ Non-Person (trust, estate, charity, etc.) Share %

2. Beneficiary Designation Continued

☐ Primary ☐ Contingent

Name of Beneficiary

Social Security Number / Taxpayer Identification Number

Relationship: ☐ Spouse ☐ Non-Spouse ☐ Non-Person (trust, estate, charity, etc.) %

Date of Birth (MM/DD/YYYY)

Share

☐ Primary ☐ Contingent

Name of Beneficiary

Social Security Number / Taxpayer Identification Number

Relationship: ☐ Spouse ☐ Non-Spouse ☐ Non-Person (trust, estate, charity, etc.) %

Date of Birth (MM/DD/YYYY)

Share

☐ Primary ☐ Contingent

Name of Beneficiary

Social Security Number / Taxpayer Identification Number

Relationship: ☐ Spouse ☐ Non-Spouse ☐ Non-Person (trust, estate, charity, etc.) %

Date of Birth (MM/DD/YYYY)

Share

If you reside in a community or marital property state, you and/or your spouse must complete this section. (Complete only if you reside in AZ, CA, ID, LA, NV, NM, TX, WA, WI)

Current Marital Status

☐ I am not married (Check this box if you are unmarried or widowed.) I understand that if I become married in the future, I must complete a new *Beneficiary Designation* form.

☐ I am married – I understand that if I choose to designate a primary beneficiary other than my spouse, my spouse must complete the Spousal Consent section below.

Special laws apply to the designation of an IRA beneficiary by a married person residing in a “community property” or “marital property” state. If you are married, reside in one of these states, and have not designated your spouse as your primary beneficiary, your spouse must sign the Spousal Consent stating that you may name someone other than your spouse as beneficiary. The Spousal Consent must be medallion signature guaranteed.

Spousal Consent

I am the spouse of the account owner named in this form. I acknowledge I have received a fair and reasonable disclosure of my spouse’s property and financial obligations. Due to the important tax consequences of giving up my interest in this IRA account, I have been advised to see a tax advisor. I hereby consent to the beneficiary designation(s) indicated in the above section. I assume full responsibility for any adverse consequences that may result. No tax or legal advice was given to me by the Custodian, Principal Life Insurance Co.,, or its Agents.

Signature of Spouse | Date (MM/DD/YYYY) | Medallion Signature Guarantee

3. Signature

To act on this request form, the account owner or authorized signer must sign below.

Print or Type Name

Principal Account Owner's/Authorized Signer's Signature | Date (MM/DD/YYYY)