

**DESIGNATION OF BENEFICIARY**

To the Trustee of Alvin Community College Money Purchase Plan: ("Plan"):

Re: \_\_\_\_\_, Participant's Name

Pursuant to the provisions of the Plan permitting the designation of a beneficiary or beneficiaries by a participant, I hereby designate the following person or persons as primary and secondary beneficiaries of my Accrued Benefit under the Plan payable by reason of my death:

<b>Primary Beneficiary(ies) [include address and relationship]:</b>
<b>Contingent Beneficiary(ies) [include address and relationship]:</b>

**I RESERVE THE RIGHT TO REVOKE OR CHANGE ANY BENEFICIARY DESIGNATION. I HEREBY REVOKE ALL PRIOR DESIGNATIONS (IF ANY) OF PRIMARY BENEFICIARIES AND CONTINGENT BENEFICIARIES.**

The Trustee will pay all sums payable under the Plan by reason of my death to the primary beneficiary, if he or she survives me, and if no primary beneficiary survives me, then to the contingent beneficiary, and if no named beneficiary survives me, then the Trustee will pay all amounts in accordance with the Plan Documents.

\_\_\_\_\_  
Date of this Designation

\_\_\_\_\_  
Signature of Participant

**NOTE: IF YOU ARE MARRIED, SEE THE FOLLOWING PAGE FOR APPLICABLE SPOUSAL CONSENT REQUIREMENTS.**

**NOTE:** If your spouse fails to consent to the beneficiary designation, and the consent relates to a waiver of the joint and survivor annuity, the Plan must pay your entire benefit in the form of a joint and survivor annuity and your spouse will be the sole beneficiary under that annuity. If your spouse fails to consent to the beneficiary designation, and the consent relates to the waiver of the preretirement survivor annuity, the preretirement survivor annuity waiver becomes invalid but this beneficiary designation remains valid. In that case, the Plan pays the preretirement survivor annuity to your surviving spouse and then pays your remaining vested account balance to your designated beneficiaries. If your spouse also is a designated beneficiary, the amount payable to your spouse under the preretirement survivor annuity reduces the amount your spouse would receive if this beneficiary designation applied to 100% of your vested account balance.

**CONSENT OF SPOUSE**

**I, the undersigned spouse of the Participant named in the foregoing "Designation of Beneficiary," hereby certify I have read the Designation of Beneficiary and fully understand the property subject to the designation is my spouse's accrued benefit under the plan, in which I possess a beneficial interest, provided I survive my spouse. Being fully satisfied with the provisions of the designation, I hereby consent to and accept the beneficiary designation, without regard to whether I survive or predecease my spouse. This consent is irrevocable unless my spouse changes the designation. If my spouse changes the designation, I understand I must file a similar consent to the new designation, or my consent is no longer effective.**

**This consent relates to my waiver of the Qualified Joint and Survivor Annuity and Preretirement Survivor Annuity**

I have executed this consent this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of spouse of participant

Signature of spouse witnessed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, in the presence of:

\_\_\_\_\_  
Plan Representative (Trustee)

**OR**

STATE OF \_\_\_\_\_ )

) SS.

COUNTY OF \_\_\_\_\_ )

BEFORE ME, the undersigned, a Notary Public, personally appeared \_\_\_\_\_ who executed the above Consent of Spouse as a free and voluntary act.

IN WITNESS WHEREOF, I have signed my name and affixed my official notarial seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

(SEAL)

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_