



Genworth[®]
Financial

Genworth Life and Annuity
Genworth Life
Genworth Life of New York
P. O. Box 40016
Lynchburg, VA 24506-4016
Tel: 888 GENWORTH
(888 436.9678)
Fax: 877 300.1280

Ownership, payee and beneficiary designation request

from Genworth Life and Annuity Insurance Company, Genworth Life Insurance Company and Genworth Life Insurance Company of New York†

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- Complete the contract or policy information section and any section(s) that pertain to the change(s) you need (any change is not effective until we receive all designation requirements)
- Designation changes may have tax consequences (please contact your tax or legal advisor to discuss your specific needs)
- For more space, attach additional pages with all required information and signatures
- **Please print clearly** using blue or black ink, **and initial any corrections** or we may not be able to accept your request

Contract or policy information

The contract or policy is referred to as the “Contract” in the rest of this form.

Contract/policy number(s) *Use only the spaces needed*

• _____	
Annuitant/insured name(s)	Date of birth
• _____	• _____

Ownership designation

The current owner is referred to as “you” and “your” in this form.

Unless otherwise stated in your Contract, an ownership change revokes all prior beneficiary designations and settlement options. The new owner becomes the beneficiary, except as designated in the beneficiary section of this form, or if the prior beneficiary was designated as irrevocable.

Primary owner

For life insurance and annuities

New owner name	Relationship to annuitant/insured	
• _____	• _____	
Social Security/Tax ID <i>Required for tax reporting</i>	Date of birth/trust date	
• _____	• _____	
Address <i>Required for billing and correspondence</i>		
• _____		
City	State	Zip
• _____	• _____	• _____

Joint owner *Optional*

For life insurance and annuities

Joint owners will have right of survivorship unless otherwise designated or stated in your contract.

New joint owner name	Relationship to annuitant/insured	
• _____	• _____	
Social Security/Tax ID <i>Required for tax reporting</i>	Date of birth/trust date	
• _____	• _____	
Address <i>Required</i>		
• _____		
City	State	Zip
• _____	• _____	• _____

Contingent owner *Optional*

For life insurance only

Contingent owner becomes primary owner if all primary and joint owners are deceased.

New contingent owner name	Relationship to annuitant/insured	
• _____	• _____	
Social Security/Tax ID <i>Required for tax reporting</i>	Date of birth/trust date	
• _____	• _____	
Address <i>Required</i>		
• _____		
City	State	Zip
• _____	• _____	• _____

Payee designation *A payee change revokes all prior payee designations*

For immediate annuities only

The payee is entitled to receive annuity payments.

An irrevocable payee assumes tax liability and must sign to accept the designation (see designation examples on page 3).

New payee name	Relationship to annuitant/insured	
• _____	• _____	
Social Security/Tax ID <i>Required for tax reporting</i>	Date of birth/trust date	
• _____	• _____	
Address <i>Required</i>		
• _____		
City	State	Zip
• _____	• _____	• _____

Ownership, payee and beneficiary designation request

Beneficiary designation *A beneficiary change revokes all prior beneficiary designations*

Primary beneficiary
For life insurance and annuities

Designation percentages must total 100%. If no percentage is provided, proceeds will be divided equally among all surviving beneficiaries.

See page 3 for designation examples and information about irrevocable designations.

Name or designation

.		
Social Security/Tax ID		Relationship to annuitant/insured
.		.
Date of birth/trust date		Designation percentage
.		• %
Name or designation		
.		
Social Security/Tax ID		Relationship to annuitant/insured
.		.
Date of birth/trust date		Designation percentage
.		• %

Contingent beneficiary *Optional*
For life insurance and annuities

If you name a contingent beneficiary, you must also restate the primary beneficiary above.

Contingent beneficiary becomes primary beneficiary if all primary beneficiaries are deceased.

Name or designation

.		
Social Security/Tax ID		Relationship to annuitant/insured
.		.
Date of birth/trust date		Designation percentage
.		• %
Name or designation		
.		
Social Security/Tax ID		Relationship to annuitant/insured
.		.
Date of birth/trust date		Designation percentage
.		• %

Designated beneficiary
For applicable annuities

Some annuity contracts provide for a designated beneficiary of the owner, in addition to the primary and contingent beneficiaries of the annuitant (*above*). Refer to your contract for details.

If the annuitant is also the contract owner, no designated beneficiary is required.

Name or designation

.		
Social Security/Tax ID		Relationship to annuitant/insured
.		.
Date of birth/trust date		Designation percentage
.		• %
Name or designation		
.		
Social Security/Tax ID		Relationship to annuitant/insured
.		.
Date of birth/trust date		Designation percentage
.		• %

Declaration and signature(s) *See signing instructions on page 3*

If you are signing as a fiduciary or representative, you must **sign in capacity** and provide documentation of your authority

Other signatures that may be required include: **spouse** (*if community property state, see signing instructions*), **irrevocable beneficiary or payee** (*must sign with title, see signing instructions*), **witness** (*see signing instructions*), and **collateral assignee** (*if contract is collaterally assigned*).

<ul style="list-style-type: none"> You certify under penalty of perjury that the statements and answers given on this form are true, complete and correct to the best of your knowledge and belief You declare that no bankruptcy proceedings are now pending against you and you are not subject to back-up withholding You understand and agree that the designations on this form will not be effective unless all designation requirements are completed 	
Current owner <i>Required</i>	Date
X	.
Joint owner <i>If applicable</i>	Date
X	.
New owner <i>Required for ownership change</i>	Date
X	.
New joint owner <i>Required for ownership change, if applicable</i>	Date
X	.
Other required signature <i>If applicable</i>	Date
X	.

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Corporate acknowledgment *See signing instructions for corporations below*

Notary Public must complete this section if acknowledgement is required.

By signing and securing my Notary seal, I acknowledge that I have reviewed evidence of the signer's corporate affiliation and personal identity.

Date	State of	City/County of
•	•	•
Corporate signer's name		Corporate signer's title
•		•
Corporation name		
•		
Notary Public signature	Registration ID	Expiration date
X	•	•

Signing instructions

Attorney-in-Fact

The attorney-in-fact must sign in capacity as "attorney-in-fact;" provide a copy of the entire power of attorney document, if not previously submitted; and complete a Genworth Declaration of attorney-in-fact form, if the power of attorney was not signed in the past twelve months.

Corporation or Limited Liability Corporation (LLC)

One officer of the company or managing member of the LLC must sign and provide either a corporate or board of director's resolution, a copy of the Articles of Incorporation or operating agreement (for LLC's), or complete the corporate acknowledgement above and sign the form in the presence of the Notary Public. If the signing officer or managing member is also the insured/annuitant, a second officer or member must also sign.

Guardian

The guardian must sign in capacity and provide a copy of the current guardianship documents.

Irrevocable beneficiary/payee

The individual must sign with the title "Irrevocable Beneficiary" or "Irrevocable Payee."

Joint owners

All owners must sign, unless otherwise stated in your contract.

Partnership

All partners must sign with title, or the general or managing partner must sign with title (if the general or managing partner is also the insured/annuitant, another partner must also sign).

Spouse

A spouse in a community property state (AZ, CA, ID, LA, NV, NM, TX, WA, WI) must sign.

Trust

The trustee(s) must sign with title "trustee," according to the terms of the Trust Agreement, and submit a completed Genworth Certification of trustee powers form.

Witness

A witness (over 18 years of age) must sign for all life insurance beneficiary changes when the owner resides in Massachusetts.

Beneficiary designation examples

Children or adopted children

All children of John Doe during any marriage, *or*
Children born of the marriage of, or legally adopted by, John Doe and Mary Doe

Estate of the insured/owner

- The executors or administrators of the insured (*or owner, if annuity*), *or*
- The estate of the insured (*or owner, if annuity*)

For benefit of

John Doe, Spouse of the Insured, for benefit of John Doe II and Jane Doe, Children of the Insured

Irrevocable beneficiary/payee

John Doe, irrevocable (*designating an irrevocable beneficiary/payee assigns limited rights of ownership to the beneficiary/payee, who must sign future requests*)

Partnership

Doe, Jones and Smith, a partnership

Sole proprietorship

John A. Doe, DBA The Glass Menagerie

Trust

Provide full name and date of trust: John Doe Trust, dated May 1, 2007

Trust under Last Will and Testament

The Trustee, or successors in trust, under the last Will and Testament of the Insured (*or owner, if annuity*)

Uniform Gifts/Transfers to Minors Act

John Doe, Former Spouse of the Insured, as custodian for John Doe II, Son of the Insured, under the *Maine Uniform Transfers to Minors Act* (the designation must refer to the appropriate act in the specified state)

Unnamed children, per capita

All children born of the marriage of, or legally adopted by, John Doe and Mary Doe, in equal shares with right of survivorship among them

Unnamed children, per stirpes

All children born of, or legally adopted by, John Doe during any marriage per stirpes