Change of Beneficiary

[redacted]

American General Life Insurance Company (AGL),
☐ Fixed Life Service Center - P. O. Box 4373, Houston, TX 77210-4373
☐ Variable Life Service Center - P. O. Box 4880, Houston, TX 77210-4880

Member of American International Group, Inc.
Instructions for completing this form are listed on the back.

1. CONTRACT IDENTIFICATION

☐ Check Here if New Address

CONTRACT No.: _____

OWNER: _____ **SSN/TIN OR EIN:** _____

ADDRESS: _____ **PHONE No.:** _____

_____

EMAIL ADDRESS (optional): _____

INSURED/ANNUITANT (if other than Owner): _____

2. BENEFICIARY DESIGNATIONS

One or more of the following may be checked. If nothing is checked, the designation will be in effect for the base insured only.
Designation is in effect for: ☐ Base Insured ☐ Spouse Insured ☐ Other _____

A. PRIMARY ***Address Required***

Full Name	Relationship	Address	SSN	Percentages (if applicable) ***Must total 100***

If a living or non-testamentary trust is designated as a primary beneficiary, complete the following:

_____ Dated: _____
Legal Name of Trust

B. CONTINGENT ***Address Required***

Full Name	Relationship	Address	SSN	Percentages (if applicable) ***Must total 100***

_____ Dated: _____
Legal Name of Trust

3. OPTIONAL CLAUSES

One or more of the following may be checked if desired:
☐ POSTPONEMENT CLAUSE - COMMON DISASTER
☐ MINOR BENEFICIARY CLAUSE - TRUSTEE FOR CHILDREN
☐ CHILDREN'S CLAUSE - PER STIRPES
☐ IRREVOCABLE BENEFICIARY

_____ Dated: _____
Name of Trust/Trustee

4. SIGN HERE FOR ABOVE REQUEST

The undersigned contract owner hereby revokes any previous beneficiary designation and any optional mode of settlement with respect to any death benefit proceeds payable at the death of the Insured/Annuitant.

Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number, and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to back-up withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. person (including a U.S. resident alien). The Internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup withholding.

_____ _____
Signature of Owner Date

_____ _____
Signature of Co-owner (or other party having interest in contract) Date

_____
Witness Date

RETURN COMPLETED FORM TO THE ADDRESS OF THE COMPANY CHECKED ABOVE.