

UA LOCAL 190 PENSION PLAN

Beneficiary Designation Form

Section 1 - Primary Beneficiary

Primary Beneficiary: If you die before your entire vested accrued benefit has been paid to you, who should receive any death benefit payable under the Plan? Please check one of the boxes below, and fill in the name(s) of your beneficiary(ies) and the shares to be received.

I am Unmarried and I designate the beneficiary(ies) named below to receive benefits under the Plan after my death in the shares indicated. (Spouse consent does not apply.)

I am Married and I designate my spouse to receive all benefits under the Plan after my death. (No spouse consent required.)

I am Married and I designate the beneficiary(ies) named below to receive all death benefits under the Plan in shares indicated. **(Spouse consent is required below.)**

Name of Beneficiary	Share	Name of Beneficiary	Share
_____	_____ %	_____	_____ %
_____	_____ %	_____	_____ %

Section 2 - Contingent Beneficiary

If the person(s) chosen above are not alive at your death, who should receive any death benefit payable under the Plan? Please fill in the name and share of death benefits to be received by each such person.

Name of Beneficiary	Share	Name of Beneficiary	Share
_____	_____ %	_____	_____ %
_____	_____ %	_____	_____ %

Section 3 - Participant Signature

I hereby sign this Beneficiary Designation. If I am married and have designated a Primary Beneficiary other than my spouse, I hereby waive the Qualified Pre-retirement Survivor Annuity.

Print Name: _____ Signature: _____ Date: _____ Last 4 of SS: _____

Section 4 - Spouse's Consent to Beneficiary Designation

I consent to my spouse's designation of primary beneficiaries named in Section 1 above to receive death benefits. I have read the Notice of Qualified Pre-retirement Survivor Annuity. I Understand (1) that pension laws require that I receive a Qualified Pre-retirement Survivor Annuity if my spouse predeceases me; (2) however, by signing this consent, I will lose my right to receive a Qualified Pre-retirement Survivor Annuity; (3) that I will receive a death benefit only if I am named a Primary Beneficiary in Section 1; (4) that my spouse's designation is not valid unless I consent to it; and (5) that I cannot change my consent after I sign this form.

This consent is subject to the following condition: **(Choose one)**

No Change in my spouse's Beneficiary Designation shall be made without my consent

My spouse may change the Beneficiary Designation at any time without further consent by me. I understand that I have the right to limit my consent to a specific beneficiary and I voluntarily elect to permanently waive that right.

Date: _____ Signature: _____

STATE OF MICHIGAN)
) ss
COUNTY OF _____)

The foregoing instrument was acknowledged before me this ____ day of _____, by _____

See Reverse for Instructions

_____, Notary Public
_____, County, Michigan
My Commission Expires: _____

Instructions

1. Please complete the attached Beneficiary Designation on page 1 of this form and return it to the Plan Administrator as soon as possible. If no Beneficiary Designation is filed or if the last filed designation is revoked, your Plan death benefit will be paid to your spouse, if any; if no spouse is alive, to your children, if any; and if no spouse or children are alive, to your estate.
2. You have the right to revoke or amend the Beneficiary Designation before benefit payment begins, and the last Beneficiary Designation filed before payment begins will be irrevocable.
3. Please fill out the Beneficiary Designation as follows:
 - a. Check one box under "Primary Beneficiary(ies)" (Section 1)
 - b. Fill in the name(s) of all primary beneficiaries and the shares they are to receive of any death benefit that becomes payable. If you do not specify otherwise, the beneficiaries will receive equal shares. Be sure to fill in the name of your spouse if he or she is to receive any part of the death benefit. Include the address and social security number of each person designated. Attach extra pieces of paper if needed. If a primary beneficiary dies before the entire amount is distributed, the remaining amount will be reallocated among surviving primary beneficiaries.
 - c. Fill in the names of any contingent beneficiaries. If all primary beneficiaries die before all benefits are distributed, remaining benefits will be reallocated among contingent beneficiaries designated by you. If no contingent beneficiaries are designated remaining benefits will be distributed as described above. (Section 3)
 - d. Sign and date the form. (Section 3)
4. Be sure to inform the Plan Administrator if your marital status changes, because that could affect the validity of your Beneficiary Designation

Notice of Qualified Pre-Retirement Survivor Annuity

If you die before benefit payments begin and you are married at the time of your death, pension laws require a **"spousal death benefit"** be paid to your spouse. Your spouse will receive a lifetime annuity with monthly payments equal to 100% of the payments you would have received if you had retired on the day before your death. This benefit is called a **Qualified Pre-retirement Survivor Annuity**.

You may name a different beneficiary to receive the spousal death benefit. If you elect a different beneficiary, you will be considered to have "waived" the Qualified Pre-retirement Survivor Annuity. However, your election will be effective only if your spouse consents to the different beneficiary in writing in the "Spouse's Consent to Beneficiary Designation" on page 1 of this form. **Consent must be notarized.** By checking one of the boxes above the spouse signature, your spouse may limit the consent to the specific persons named by you on the Beneficiary Designation or may let you make future changes without further consent.

You can revoke such an election at any time. If the election is revoked, then the spousal death benefit will once again be paid to your spouse as a Qualified Pre-retirement Survivor Annuity. If you do not revoke your election, it will be effective for different periods of time depending on your age at the time the election is made. If your election is made before the Plan Year in which you turn age 35, it will remain until the first day of the Plan Year in which you reach age 35. If your election is made after the Plan Year in which you reach age 34, it will remain in effect until you change it. You are responsible for notifying the Plan and requesting new forms if you initially waive the annuity or name a beneficiary other than your spouse before the Plan Year in which you reach age 35.

If you want your spouse to receive the spousal death benefit, you need not be concerned with the age 35 election requirements or the spouse consent requirements.