

Deferred Annuity Claim Instructions For Individual Beneficiaries



Mail or fax completed form to:

P.O. Box 1555, Des Moines, IA 50306-1555 Fax: 866 709 3922

Contact us:

Annuity Customer Contact Center - Tel: 888 266 8489
Press Option 1, then Option 3 to speak to a Claim Specialist

Athene Annuity and Life Company

7700 Mills Civic Parkway, West Des Moines, IA 50266-3862

Athene Annuity & Life Assurance Company of New York

Nyack, NY 10960

Use these instructions to ensure you have included all appropriate documents and completed your claim form accurately and completely before submitting your claim. Submit pages 1-6 of the claim form along with all required documents. These instructions do not need to be returned with your claim form. Unclear or incomplete information or missing documents may delay your claim.

REQUIRED DOCUMENTS

- Deferred Annuity Claim Form for Individual Beneficiaries (10034)
 - Complete and return pages 1-6. Sign and date page 6, using today's date.
 - If there is more than one beneficiary, a separate claim form is required for each beneficiary.
- Copy of Death Certificate for Annuitant showing cause and manner of death
 - If the Death Certificate is issued in Florida, the long form showing cause and manner of death must be submitted.

ADDITIONAL DOCUMENTS – May be required.

- **Power of Attorney for the Beneficiary** – A copy of the Power of Attorney document
- **Conservator or Guardian for the Beneficiary** – Court paperwork showing appointment of conservator or guardian
- **Minor Beneficiary** – Court paperwork showing appointment of conservator or guardian of minor's estate (required even if a parent). If the beneficiary qualifies under UGMA/UTMA, a notarized affidavit showing custodianship may be submitted.
- **Beneficiary Name Change** – Proof of the name change, such as marriage certificate, divorce decree, or other court document showing the name change
- **Deceased Beneficiary** – Copy of Death Certificate for the beneficiary. If the deceased beneficiary was designated "Per Stirpes," an Affidavit of Heirship (18376) is required.
- **Beneficiary Designation of All Children** – Affidavit for Payment to Surviving Children (80568). This form must list all children and be notarized. If there are multiple children only one Affidavit is required.
- **Beneficiary is a Former Spouse** – Copy of the divorce decree and marital settlement agreement
- **Funeral Home Assignment** – Instructions, signed and dated by the claimant, indicating the dollar amount assigned to the funeral home and the payee and address to be listed on the check. (The claimant is still responsible for taxes on the amount assigned to the funeral home.)
- **Foreign Beneficiary** – A completed and signed IRS Form W-8BEN (Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding) is required in order to institute a lower tax treaty rate. If an IRS Form W-8BEN has not been received and all other documents necessary to settle the claim have been received, we will proceed with settlement of the claim and withhold 30% of the benefit payable.
- **Foreign Death** – If the Annuitant passed away outside of the U.S., a Consular Report of Death of a U.S. Citizen Abroad from the Bureau of Consular Affairs

GENERAL

- Complete all applicable sections of your claim form clearly and entirely. Required fields are indicated with asterisks (*).
- When faxing your claim form, be sure to fax both sides of each page.
- Claim information may only be released to the beneficiary or an authorized representative of the beneficiary. To authorize a third party to receive information about your claim, call our Customer Contact Center.
- All claims will be paid in U.S. currency.

1. ANNUITY CONTRACT NUMBERS - This section is required.

- List **all** annuity contract numbers for which you are claiming the death benefit.



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2. DECEDENT INFORMATION – This section is required.

- Complete this section with information about the deceased person.
- List all names by which the decedent may have been known.

3. BENEFICIARY/CLAIMANT INFORMATION - This section is required.

- Complete all required fields (*) in their entirety.
- If you are the named beneficiary, complete this section with information about yourself.
- If you are claiming on behalf of the named beneficiary, as a Conservator, Guardian, or Attorney-in-Fact, complete this section with information about the beneficiary and provide your information in Section 8.

4. PAYMENT OPTIONS - An election in this section is required.

- Consider your options carefully. Be aware that upon distribution of the funds, you will need to include the taxable portion of the distribution in your gross income for tax purposes. You may want to consult your financial or tax advisor before making your decision.
- You may select only one payment option for each contract listed in Section 1. If you are making elections for multiple contracts, specify the contract number(s) next to each election.
- To ensure your claim is processed by December 31, all requirements must be received in good order by December 1.
- **Once your claim has been processed, your Payment Option cannot be changed.**

A. **Lump Sum Payment** – This option provides the death claim payment in a single sum paid to you. The taxable portion of the claim payment is reported as taxable income in the year the check is issued. **If it is after December 31 of the year following the date of death, this is the only payment option available.**

B. **Periodic Payments** - This option provides a series of fixed payments, distributed over your lifetime or a fixed number of years, based on your elections below. Payments must begin no later than December 31 of the year following the date of death. Once payments begin, they cannot be changed.

- Elect only one option. If no option is elected, we will default to a 5-Year Period Certain with annual payments.
 - **Life Only** – Your payment amount is calculated based on your life expectancy. Payments will continue as long as you are living and cease at your death. Upon your death, no proceeds will be payable to a beneficiary.
 - **Period Certain** – You may elect a specific number of years to receive payments. Your payment amount is calculated based on the duration elected. You may designate a beneficiary to receive payments upon your death, if it is within the Period Certain timeframe. If a beneficiary is not designated, any remaining payments will be made to your estate.
 - **Life and Period Certain** – Payments will continue for the greater of your life or the specified duration. Your payment amount is calculated based on both your life expectancy and the duration elected. You may designate a beneficiary to receive payments upon your death, if it is within the Period Certain timeframe. If a beneficiary is not designated, any remaining payments will be made to your estate.
- If you elected the Period Certain or Life and Period Certain option, enter a duration of 5 years or more. If no duration, or a duration less than 5 years is entered, we will default to 5 years.
- The maximum number of years allowed for Period Certain is 30. The maximum number of years allowed for Life and Period Certain is 20.
- Elect only one Frequency. If no Frequency is elected, we will default to Annually.

C. **Transfer/1035 Exchange** – This option allows funds to be moved directly from one account to another, as a 1035 Exchange, Non-Qualified Taxable Transfer, Trustee-to-Trustee Transfer, or Inherited IRA. Transfer of funds may be internal, to a new Athene annuity, or external, to an account at another company. **We encourage you to consult your tax advisor regarding any questions you have about the tax treatment of this distribution.**

- Elect the Type of Transfer/1035 Exchange and indicate if an application or transfer paperwork are included or will follow. (Internal 1035 Exchanges are available for spouse beneficiaries only.)
- Transfer paperwork must include the Athene contract number, ownership of the receiving account, type of account, acceptance of funds, authorized signature with title, and mailing address.



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4. PAYMENT OPTIONS - An election in this section is required. (continued)

- Elect the Tax Qualification of the Transfer/1035Exchange.
 - **1035 Exchange** – Non-Qualified funds are sent directly to another non-qualified annuity on a tax free basis. The owner and the annuitant must be like-to-like. This election is a federal tax reportable event.
 - **Non-Qualified Taxable Transfer** – Non-Qualified funds are transferred directly from one financial institution to another, and put into another non-qualified account. The owner and annuitant do not have to be like-to-like. This election is a federal taxable event.
 - **Trustee-to-Trustee Transfer** – Qualified funds are transferred directly from one financial institution to another on a tax free basis, and put into another IRA or qualified account. This election does not result in federal tax reporting.
 - **Inherited IRA** – Qualified funds are transferred directly from one financial institution to another on a tax free basis, and put into an Inherited IRA account in your name. This election does not result in federal tax reporting. Annual distributions based on your life expectancy must begin no later than December 31 of the year following the date of death. Ownership of an Inherited IRA account may never be changed. Inherited IRAs are available for qualified contracts only and must be processed by December 31 of the year following the date of death.

Non-Qualified:

- Elect either 1035 Exchange or Non-Qualified Taxable Transfer.

Qualified:

- Elect either Trustee-to-Trustee Transfer or Inherited IRA.
- **Required Minimum Distribution (RMD):**
 - Elect if a Required Minimum Distribution (RMD) should be processed for the decedent prior to the transfer.
 - If the decedent had reached his or her Required Beginning Date, and had not yet taken their Required Minimum Distribution (RMD) the beneficiary/claimant is required to satisfy the RMD amount by December 31 of the year of death.
 - If there is more than one beneficiary, and at least one beneficiary elected a lump sum payment, this satisfies the decedent's RMD.
 - **If you have any questions regarding Required Minimum Distributions, please consult your tax advisor.**

D. **Deferral** – This option delays your claim payment for up to 5 years from the decedent's date of death. The claim must be paid on or before December 31 of the 5th year following the date of death. You may request your claim payment at anytime within the 5 years by submitting a new claim form.

- During the deferral period, you may not request partial withdrawals or transfers, designate beneficiaries, or exercise any other contractual rights.
- You may visit our website, atheneannuity.com, or contact us via phone or in writing to request a new claim form. Please request a new claim form at least 30 days prior to the day you would like to receive payment.
- If payment has been deferred past December 31 of the year following the date of death, the only payment option available is Lump Sum Payment.
- In the event of your death during the deferral period, proceeds of the annuity contract will be made payable to your estate.
- **Qualified Contracts:** This option is not available if the decedent had reached the Required Beginning Date for minimum distributions. You must continue to take Required Minimum Distributions (RMDs) beginning in the year after the decedent's death. If the decedent was not required to take minimum distributions, you may elect this option and delay distribution until December 31 of the 5th year following the date of death.

E. **Spousal Continuation** – This option continues the existing contract in your name with the original effective date and the same contract number. No death benefit distribution will occur and this ownership change is not taxable. This option is only available if your spouse is the deceased and you are the sole beneficiary. **This option must be processed by December 31 of the year following the date of death.**



5. PAYMENT INSTRUCTIONS – Complete this section if you elected Payment Options A, B, or RMD in Option C.

- Select where you would like your payment to be sent. If no option is selected, your payment will be mailed to the Mailing Address provided in Section 3 of this form.
- Do not complete this section for a transfer/1035 exchange. The check will be mailed to the address provided on the transfer paperwork.
- To authorize your active Athene producer to receive information about your claim, provide your producer information and check the box in Option C.
- To request your claim payment to be mailed overnight, check the box in Option D. A charge of \$25.00 will be deducted from the payment amount. (This option is not available if mailing check to a Post Office Box.)

6. TAX WITHHOLDING - Complete this section if you elected Payment Options A, B, or RMD in Option C.

- **Please read this notice prior to making your withholding elections.**
- All or part of the payment you receive may be included in your gross income for tax purposes.
- The taxable portion of the distribution is subject to federal (and potentially state) withholding unless you elect not to have withholding apply. You may elect not to have withholding apply by marking the appropriate box.
- If you elect not to have withholding apply or if you do not have enough federal income tax withheld, you may be responsible for payment of estimated tax.
- **Tax withholding elections do not apply to interest accrued from the date of death to the date of payment.**
- If an election is not made, no federal or state taxes will be withheld from your payment.
- If federal withholding is elected and no percentage is specified, we will default to 10%.
- If federal withholding is elected and you reside in a state that requires mandatory withholding, state income taxes will also be withheld.
- If state withholding is elected and no percentage is specified, we will default to 5% or the mandatory percentage required in your state, if applicable. (Required income tax withholding rules supersede any election made.)
- Federal income tax withholding must be elected if state income tax withholding is elected. If state withholding is elected and federal withholding is not specified, we will default to 10% federal withholding.
- **We encourage you to consult your tax advisor regarding any questions you have about taxes.**
- Choose either A or B for Federal Withholding and either A or B for State Withholding.
- **Residents of VT:** Choose the appropriate spousal indication.

Foreign Claimants

- If you are not a United States Citizen, we are required to withhold up to 30% of the benefit payable to you.
- A special withholding rule exists if you are a citizen of, and reside in, a country with which the United States has an income tax treaty. A list of treaty countries is provided in IRS Publication 901 (United States Tax Treaties) which can be obtained from the IRS Website at www.IRS.gov.
- In order for us to institute a lower treaty rate, your United States Taxpayer Identification Number (TIN) must be provided on a completed and signed IRS Form W-8BEN (Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding). If an IRS Form W-8BEN has not been received and all other documents necessary to settle the claim have been received, we will proceed with settlement of the claim and withhold 30% of the benefit payable to you.
- If you do not have a United States TIN, one can be obtained from the Internal Revenue Service by using IRS Form W-7 (Application for IRS Individual Taxpayer Identification Number). Note: The Company does not facilitate the beneficiary's application for a TIN. Please do not return IRS Form W-7 to our office.



7. NEW BENEFICIARY ELECTION - Complete this section if you elected Payment Options B or E.

- Complete all required fields (*) in their entirety.
- Percentages for all beneficiaries must total 100%. If no percentage is provided, proceeds will be divided equally among all surviving beneficiaries.
- If a new beneficiary is not elected, we will default to your estate.
- **Relationship to Claimant** – If you are completing this form as the named beneficiary, complete this field with the new beneficiary's relationship to you. If you are completing this form as a Conservator, Guardian, or Attorney-in-Fact, complete this field with the new beneficiary's relationship to person named in Section 3 of this form.
- You may also use additional blank pages completed with beneficiary information. Each blank page must be signed and dated, labeled with the word "Attachment," and provide the contract number and all required beneficiary information, including full name, primary/contingent designation, percentage, Social Security/Tax Identification Number, and date of birth.
- **If you elected Option C, and are doing an internal transfer to a new Athene Annuity, provide your new beneficiary election on the application, rather than this claim form.**

8. AUTHORIZATION AND SIGNATURES – This section is required.

- If you are the named beneficiary, sign your name, enter today's date, and print your name below your signature.
- If you are claiming on behalf the named beneficiary, as a Conservator, Guardian, or Attorney-in-Fact, check the appropriate box to indicate the capacity in which you are signing. Then sign your name, enter today's date, print your name and title below your signature, and provide your address, email address, and telephone number.

If you are signing as...

- **Conservator** – Example: "John Smith, Conservator"
- **Guardian** – All acting guardians must sign. Example: "John Smith, Guardian"
- **Attorney-in-Fact** – Example: "John Smith, Attorney-in-Fact"
- **UGMA/UTMA** – Example: "John Smith, Custodian Under [State] UTMA/UGMA"

9. FRAUD NOTICE

- Read the applicable fraud notice for your state before submitting your claim.

