

Instructions

Designation of Beneficiary Form for Cash Balance Plan

With this form you designate who will receive the pre-retirement survivor benefit provided under The Pension Plan for Insurance Organizations (which is sometimes called the “Plan”) if you die before you begin to receive retirement benefits under the Plan, you are vested when you die, and you are not married when you die. Please read these instructions carefully. The instructions provide important information about completing the form. If you have questions about the form or your pre-retirement survivor benefits, please call the Principal Financial Group at 1-800-547-7754

A pre-retirement survivor benefit is a benefit that is paid if you die before you begin to receive your retirement benefit under the Plan and you are vested in a benefit under the Plan at the time of your death. The pre-retirement survivor benefit is paid to your surviving spouse if you are married at the time of your death or your designated beneficiary if you are not married at the time of your death. You should complete and return the enclosed Designation of Beneficiary Form even if you are not currently vested in a benefit under the Plan or you are currently married since your status may change prior to your death. Note that this is only a summary of the preretirement survivor benefit. The Plan document and the summary plan description provide additional details.

To complete the beneficiary designation, please:

1. Complete Section 1: Member Information.
2. Designate your Primary Beneficiary(ies) for the Cash Balance Plan in Section 2.
3. Designate your Contingent Beneficiary(ies) for the Cash Balance Plan in Section 3.
4. Designate your Primary Beneficiary(ies) for the Traditional Benefit Plan in Section 4. *(Complete only if you have a Traditional Benefit)*
5. Designate your Contingent Beneficiary(ies) for the Traditional Benefit in Section 5. *(Complete only if you have a Traditional Benefit)*
6. Sign Section 6: Member Signature.
7. Return the completed original form in its entirety to the Principal Life Insurance Company, P.O. Box 9394, Des Moines, IA 50306-9394.
8. Keep a copy of the completed form for your records.

If you do not complete and return this form, or if all of your primary and contingent beneficiaries die before you do, the Plan will pay the pre-retirement survivor benefit (the amount in your cash balance account as a single lump sum or, if you are an ISO Member, also as an actuarially equivalent annuity) to a default beneficiary. The individual who is described first in the following list and who survives you will be the default beneficiary.

- Your surviving children, if any, in equal shares.
- If no children survive you, your surviving parents, if any, in equal shares.
- If no children or parents you, your estate.

If you have a pension benefit under the Traditional Plan, and all of your primary and contingent beneficiaries die before you do, the Plan will pay the pre-retirement survivor benefit (50% of the amount of your traditional benefit as an annuity or as an actuarially equivalent single lump sum) to a default beneficiary. The individual who is described below will be treated as a default beneficiary (or default beneficiaries in equal shares) in the following order:

- child or children,
- parent or parents,
- sibling or siblings, and
- your estate. In this case, the Plan will pay an actuarially-equivalent single sum to your estate.

Sections 2, 3, 4 and 5: Primary and Contingent Beneficiaries

You should designate both primary and contingent beneficiaries. Your primary beneficiaries will receive survivor benefits if they are alive at your death. Your contingent beneficiaries will receive survivor benefits if all of your primary beneficiaries die before you do. The form has space for up to three primary and three contingent beneficiaries. If you want to name four or more in a category, attach additional sheets with the information required.

For example, suppose John, Bill, and Joe are your primary beneficiaries. If you want 50% of the value of the pre-retirement survivor benefit to be paid to John, 30% to be paid to Bill, and the remaining 20% to be paid to Joe, write 50% in the percentage box under John's name (it's the lowest box in that column), 30% in the percentage box under Bill's name, and 20% in the percentage box under Joe's name.

Two important notes:

- If, some, but not all, of the primary beneficiaries are alive at your death: If, for example, John dies before you do but Bill and Joe are still alive when you die; then John's share will be distributed to Bill and Joe. As a result, Bill would get 60% of the value of the pre-retirement survivor benefit and Joe would get 40%.
- The amount paid monthly from an annuity depends on the age of the recipient. Suppose, for example, as of your date of death the value of your survivor benefit is \$150,000 and you designate John, Bill, and Joe to get equal shares (33⅓% each). They will each get a benefit equivalent to \$50,000, but if they are different ages the amount of the monthly payments they receive will be different. This is because the younger recipient is expected to receive payments for a longer period. If, to continue the example, John is 60, Bill is 57, and Joe is 54 when their benefits begin, the lifetime monthly income would be roughly \$350 for John, \$325 for Bill, and \$300 for Joe. Note that any or all of the three may elect to take the benefit in a single sum (in which case they'd receive \$50,000 in a single sum).

When the Designation Takes Effect

The Designation of Beneficiary Form becomes effective on the postmark date when it is mailed to Principal. When submitted, this form revokes and overrides any and all prior beneficiary designations.

Beneficiary Designation Changes or Revocations

To ensure that the pre-retirement survivor benefit is distributed according to your wishes, it is important to review and update your named beneficiaries periodically. Additionally, you should update your beneficiary contact information whenever there is a change of address.

You may change a designation of beneficiary at any time as long as the valid beneficiary designation takes effect before your death. All changes to or revocations of your beneficiary designation must be made on the Plan's official Designation of Beneficiary Form for Pre-Retirement Death Benefits.

If you have questions about the form or your pre-retirement survivor benefits, please call the Principal Financial Group at 1-800-547-7754.

Please keep a copy of the completed form for your records.

Designation of Beneficiary Form

This form is used to designate who will receive the pre-retirement survivor benefit for the Cash Balance Plan and the Traditional Benefit Plan if you are not married when you die.

Section 1: Participant Information (Type or Print) **Plan id# 4-56353**

First Name	Middle Initial	Last Name
Social Security Number	Date of Birth	Telephone Number
Street Address	City	State
Zip Code		

Section 2: Primary Beneficiary Designation for the Cash Balance Plan (Type or Print)

Primary Beneficiary: If you die before you start to receive your benefit under the Cash Balance Plan, you are vested in your benefit under the Plan, and you are not married when you die, a pre-retirement survivor benefit will be paid to the primary beneficiary(ies) named below. If any of your primary beneficiaries die before you do, the pre-retirement survivor benefit will be paid to your remaining primary beneficiaries or, if no primary beneficiary survives you, your contingent beneficiary(ies).

I hereby designate the person named below as my primary beneficiary (or the persons named below as my primary beneficiaries) for the pre-retirement survivor benefit payable from the Cash Balance Plan if I die before I begin to receive my retirement benefit.

	Primary Beneficiary	Primary Beneficiary	Primary Beneficiary
Name			
Date of Birth			
Relationship			
Social Security Number			
Address:			
Street			
City and State			
Zip Code			
Email Address			
Telephone Number			
Percentage of Benefit			

Section 3: Contingent Beneficiary Designation for the Cash Balance Plan (Type or Print)

Contingent Beneficiary: If you die before you start to receive your benefit under the Cash Balance Plan, you are vested in your benefit under the Plan, you are not married when you die, and none of the primary beneficiaries listed in Section 2 outlive you, a pre-retirement survivor benefit will be paid to the contingent beneficiary(ies) named below. If any of your contingent beneficiaries die before you do, the pre-retirement survivor benefit will be paid to your remaining contingent beneficiary(ies) or, if no contingent beneficiary survives you, any benefit will be paid in accordance with Cash Balance Plan rules.

If my primary beneficiary (or all of my primary beneficiaries) predeceases me, and if I die before I begin to receive my retirement benefit, I hereby designate the person named below as my contingent beneficiary (or the persons named below as my contingent beneficiaries) for the pre-retirement survivor benefit payable from the Cash Balance Plan.

	Contingent Beneficiary	Contingent Beneficiary	Contingent Beneficiary
Name			
Date of Birth			
Relationship			
Social Security Number			
Address:			
Street			
City and State			
Zip Code			
Email Address			
Telephone Number			
Percentage of Benefit			

Section 4: Primary Beneficiary Designation for the Traditional Benefit Plan (Type or Print)

Primary Beneficiary: If you die before you start to receive your benefit under the Traditional Benefit Plan, you are vested in your benefit under the Plan, and you are not married when you die, a pre-retirement survivor benefit will be paid to the primary beneficiary(ies) named below. If any of your primary beneficiaries die before you do, the pre-retirement survivor benefit will be paid to your remaining primary beneficiaries or, if no primary beneficiary survives you, your contingent beneficiary(ies).

I designate the same person or persons as my primary beneficiary as shown in Section 2 above for the pre-retirement survivor benefit payable from the Plan if I die before I begin to receive my retirement benefit. *(Do not check this box if you wish to designate a different beneficiary(ies) as your primary beneficiary. Instead complete the information in the box below.)*

I hereby designate the person named below as my primary beneficiary (or the persons named below as my primary beneficiaries) for the pre-retirement survivor benefit payable from the Traditional Benefit Plan if I die before I begin to receive my retirement benefit. *(Complete only if you have a Traditional Benefit)*

	Primary Beneficiary	Primary Beneficiary	Primary Beneficiary
Name			
Date of Birth			
Relationship			
Social Security Number			
Address:			
Street			
City and State			
Zip Code			
Email Address			
Telephone Number			
Percentage of Benefit			

Section 5: Contingent Beneficiary Designation for the Traditional Benefit Plan (Type or Print)

Contingent Beneficiary: If you die before you start to receive your benefit under the Traditional Benefit Plan, you are vested in your benefit under the Plan, you are not married when you die, and none of the primary beneficiaries listed in Section 4 outlive you, a pre-retirement survivor benefit will be paid to the contingent beneficiary(ies) named below. If any of your contingent beneficiaries die before you do, the pre-retirement survivor benefit will be paid to your remaining contingent beneficiary(ies) or, if no contingent beneficiary survives you, any benefit will be paid in accordance with Traditional Benefit Plan rules.

I designate the same person or persons as my primary beneficiary as shown in Section 3 above for the pre-retirement survivor benefit payable from the Plan if I die before I begin to receive my retirement benefit. *(Do not check this box if you wish to designate a different beneficiary(ies) as your primary beneficiary. Instead complete the information in the box below.)*

If my primary beneficiary (or all of my primary beneficiaries) predeceases me, and if I die before I begin to receive my retirement benefit, I hereby designate the person named below as my contingent beneficiary (or the persons named below as my contingent beneficiaries) for the pre-retirement survivor benefit payable from the Traditional Benefit Plan. *(Complete only if you have a Traditional Benefit)*

	Contingent Beneficiary	Contingent Beneficiary	Contingent Beneficiary
Name			

Date of Birth			
Relationship			
Social Security Number			
Address:			
Street			
City and State			
Zip Code			
Email Address			
Telephone Number			
Percentage of Benefit			

Section 6: Your Signature

Participant's signature: _____ Date: _____