

SURVIVING SPOUSE DISTRIBUTION ELECTION

The lump-sum value of the death benefit: \$ \_\_\_\_\_

Proposed distribution date: \_\_\_\_\_

I, the surviving spouse of \_\_\_\_\_  
(Participant), make the following distribution election:

1. Payment of Death Benefit. Payment of my portion of the death benefit in the form I have elected under 2. below.

2. Distribution Election. I hereby elect: (Choose one)

a.  A direct rollover of my portion of the death benefit (not less than \$500). (Complete 4. below.)

b.  A direct rollover of \$\_\_\_\_\_ (not less than \$500) of my portion of the death benefit, with the balance paid in a lump-sum. (Complete 4. below.)

c.  A lump-sum payment of my portion of the death benefit, with no direct rollover.

d.  I elect a direct rollover of the following portion of my payments (not less than \$500): \$\_\_\_\_\_. Pay me the remaining amount.

e.  Installment payments. Note: Installment payments are not available if the death benefit (excluding amounts attributable to rollovers) is \$5,000 or less. The installment method election will permit you to split your portion of the death benefit distribution between installments and lump-sum and to elect a direct rollover of any payment which is an eligible rollover distribution. (Complete 3. below.)

3. Installment election. I hereby elect:

a.  my entire portion of the death benefit in installments.

b.  \$\_\_\_\_\_ in lump-sum, with the rest of my portion of the death benefit in installments.

Installment Term. (Complete c. and d.)

- c.  I request payment of installments:  monthly  quarterly  
 semi-annually  annually
- d.  I elect the following installment term (Choose i. or ii. below.)
- i.  \_\_\_\_\_  
years.
- ii.  My life expectancy, as determined under Treasury regulations: (Choose A. or B. below.)
- A.  determine my life expectancy once, when I commence distribution.
- B.  recalculate my life expectancy each year.
- e.  I elect a direct rollover of my installment payments. This election applies until revoked. Note: This option is not available unless you elect d.i. and the installment period is less than 10 years.

Note: Failure to elect a direct rollover will result in income tax withholding on any payments that are eligible rollover distributions. See the SPECIAL TAX NOTICE REGARDING PLAN PAYMENTS included with your distribution package.

4. Information for Direct Rollover.

I represent that the IRA or retirement plan designated below is a proper recipient for a direct rollover.

Name of IRA or retirement plan \_\_\_\_\_

Name of trustee, custodian or insurer \_\_\_\_\_

\_\_\_\_\_

Address to send direct rollover \_\_\_\_\_

\_\_\_\_\_

5. Waiver of minimum notice period. I consent to an immediate distribution of my portion of the death benefit. I affirmatively waive any unexpired portion of the minimum 30-day notice period during which I may consent to a distribution from the Plan.

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Signature of Surviving Spouse

\_\_\_\_\_  
Social Security Number