



Beneficiary Designation Form

Use this form to designate or modify the beneficiary(ies) on your Invesco IRA (including Traditional, Roth, SEP, SARSEP and SIMPLE), 403(b) or Optional Retirement Program (ORP) account or an account with transfer on death (TOD) registration.

- We recommend that you speak to a tax or financial advisor prior to designating or modifying beneficiary(ies) for your account.
- Remember to include your account number in Section 1. If these designations apply to more than one account, list all applicable account numbers.

PLEASE USE BLUE OR BLACK INK

PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS

1 | Registration Information and Invesco Account Number

Account Registration (Please print name(s) as it appears on account.)

Social Security Number (Required)

Invesco Account Number or Plan ID

Invesco Account Number or Plan ID

Invesco Account Number or Plan ID

Primary Phone Number

Alternate Phone Number

2 | Beneficiary Information

Provide a complete list of your primary beneficiary(ies) and your contingent beneficiary(ies) below. If you have additional beneficiaries, please attach a separate page including all of the information requested in this section. The designation you provide will replace any current designation in entirety. If you have additional beneficiaries, please attach a separate page including all of the information requested in this section.

Primary Beneficiary(ies)

1. Full Name

Percentage

 %

SSN or TIN (Required)

Date of Birth (mm/dd/yyyy)

2. Full Name

Percentage

 %

SSN or TIN (Required)

Date of Birth (mm/dd/yyyy)

Total %



Contingent Beneficiary(ies)

1. Full Name

Percentage

 %

SSN or TIN (Required)

Date of Birth (mm/dd/yyyy)

2. Full Name

Percentage

 %

SSN or TIN (Required)

Date of Birth (mm/dd/yyyy)

Total %

Important information for retirement account participants: If any of the beneficiaries listed above is a former spouse who is being re-designated as a non-spouse beneficiary after the date of divorce, please re-identify the non-spouse beneficiary here.

Full Name

3 | Authorization and Signature (Please sign and date below.)

I designate the beneficiary(ies) listed in section 2 to receive any assets remaining in my account upon my death, based on the percentage allocations provided. I further understand that Invesco Investment Services, Inc. (IIS) will not maintain a beneficiary designation that is conditional upon the occurrence of a specific event other than what is detailed below and in the applicable custodial agreement and disclosure statement. (Custodial agreement and disclosure statement not applicable for TOD accounts.)

- If no percentage allocation is provided for the primary beneficiary(ies) listed in section 2, any remaining assets in my account shall be distributed to the primary beneficiary(ies) in equal amounts.
- If no percentage allocation is provided for the contingent beneficiary(ies) listed in section 2 and no primary beneficiary(ies) survives me, any remaining assets in my account shall be distributed to the contingent beneficiary(ies) in equal amounts.
- **As a participant of a retirement account,** if no primary or contingent beneficiary designation is in effect at the time of my death, or if all primary or contingent beneficiary(ies) have pre-deceased me, then my beneficiary shall be my surviving spouse, provided however, that if I am unmarried at the time of my death, my beneficiary shall be my estate.
- **As a shareholder of a TOD account,** if no primary or contingent beneficiary designation is in effect at the time of my death, or if all primary or contingent beneficiary(ies) have pre-deceased me, then the balance in my account will be distributed to the legal representative of my estate.
- This designation of beneficiary(ies) and any subsequent change in designation must be received by IIS prior to my death in order to be effective.

I have read and agree to the information listed above. This document, upon receipt by IIS, supersedes and revokes in entirety any existing beneficiary designation on file with IIS.

Signature (Required)

Date (mm/dd/yyyy)

Signature of Joint Account Owner (Required for TOD accounts only.)

Date (mm/dd/yyyy)

4 | Mailing Instructions

Please send completed and signed form to:

(Direct Mail)

Invesco Investment Services, Inc.
P.O. Box 219078
Kansas City, MO 64121-9078

(Overnight Mail)

Invesco Investment Services, Inc.
c/o DST Systems, Inc.
430 W. 7th Street
Kansas City, MO 64105-1407

For additional assistance please contact an Invesco Client Services representative at 800 959 4246, weekdays, 7 a.m. to 6 p.m. Central Time.

Visit our website at invesco.com/us to:

- Check your account balance
- Confirm transaction history
- View account statements and tax forms
- Sign up for eDelivery of statements, daily transaction statements, tax forms, prospectuses, and reports
- Check the current fund price, yield and total return on any fund
- Process transactions
- Retrieve account forms and investor education materials

Call the 24-Hour Automated Investor Line 800 246 5463 to:

- Obtain fund prices
- Confirm your last three transactions
- Order a recent account statement(s)
- Check your account balance
- Process transactions

To use the system, please have your account numbers and Social Security number available.

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