

SOCIAL SECURITY NUMBER	EMPLOYEE'S NAME		
	First	Initial	Last
MAILING ADDRESS	Street and Number (Include Apartment Number)		City State Zip Code
IF FOREIGN RESIDENT	Province	Country	DATE OF BIRTH
			/ /
			<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE

EMPLOYER ONLY			
EMPLOYER'S NAME		LOCATION	EMPLOYER NUMBER
DATE EMPLOYEE HIRED	EMPLOYMENT STATUS	PART-TIME SERVICE	DATE 1,500 HOURS COMPLETED
/ /	<input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME	If this employee ever worked on a part-time basis, enter the date on which the 1,500-hour requirement was met, in accordance with plan specifications.	/ /
PRIOR TAX-EXEMPT SERVICE If during the last three years this employee had service with another eligible organization that is to be counted toward meeting eligibility requirements, insert the number of months of such service that are to be counted.			NUMBER OF MONTHS
EMPLOYEE'S MONTHLY SALARY RATE	EMPLOYEE'S DEPARTMENT #	COVERAGE EFFECTIVE DATE	DATE
\$ _____		Enter the coverage effective date.	/ /

BENEFICIARY DESIGNATIONS (Complete Reverse Side)

Any death benefit due under your Pension Plan will be paid to the person or persons you name as your beneficiary. (Name your beneficiaries on the reverse side.)

If you are married, you must name your spouse as your only primary beneficiary unless your spouse signs the Spouse's Waiver on the reverse side. If your spouse signs the Waiver, you can name any beneficiaries you wish. Whenever you want to change your beneficiaries, your spouse must sign a new waiver unless you name him or her as your only primary beneficiary.

If you are unmarried, you may name any beneficiaries you wish. If you marry in the future, your beneficiary designation under the retirement plan will be automatically voided. At that time, you should complete Mutual of America's "Beneficiary Designation" form and follow the instructions applicable to married participants.

If you name more than one primary beneficiary, or more than one secondary beneficiary, the death benefit will be paid in equal shares unless you show below the percentage you want each of them to receive. If you do this, be sure your figures for each beneficiary type total 100%.

If no one you have named as a primary beneficiary is living when the death benefit is to be paid, the person(s) you name as your secondary beneficiary will receive the death benefit. If there is no living designated beneficiary at your death, the amount payable will be paid in the following order: to (a) your widow or widower, (b) your children in equal shares, (c) your parents in equal shares, (d) your brothers and sisters in equal shares, or (e) the executors or administrators of your estate.

Name your primary and secondary beneficiaries in the space provided. If you need more space, attach a page showing for each beneficiary the information asked for below. Please add your Employer's name and Employer number, your signature and the date.

