

# Interstate Life Insurance Company

3750 West Deerfield Road • Riverwoods, Illinois 60015

(800) 233-3750 • www.interstatelife.com

## CHANGE OF OWNERSHIP OR CONTINGENT OWNERSHIP

### 1. CURRENT OWNER INFORMATION (Please print)

Contract Number \_\_\_\_\_ Insured or Annuitant \_\_\_\_\_

Current Owner(s) Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Daytime Phone \_\_\_\_\_

### 2. NEW OWNER INFORMATION (Please print) Select one: Owner Contingent Owner

New Owner \_\_\_\_\_ Social Security or Tax ID Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Is the new Owner a U.S. Citizen, U.S. Resident Alien, or U.S. entity?  Yes  No

If the New Owner is a trust:

Trustee Name(s): \_\_\_\_\_ Trust Date: \_\_\_\_\_

### 3. TERMS OF TRANSFER (For change of Ownership only - Please check one)

No money, property, or services are being exchanged for this policy.

This policy is being transferred in exchange for money, property, or services.

Please change the ownership for the policy listed above. I understand that the New Owner shall have the power to exercise all rights of ownership under this contract. I understand that this ownership change may have tax consequences. We recommend that you consult your tax advisor with any questions you may have prior to making this change of ownership.

\_\_\_\_\_  
Signature of Current Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Spouse of Current Owner

\_\_\_\_\_  
Date

Spouse's signature required in the following states: AZ, CA, ID, LA, NV, NM, TX, WA, WI

\_\_\_\_\_  
Signature of New Owner

\_\_\_\_\_  
Date

### Acknowledgement Below Is For Home Office Use Only

Interstate Life Insurance Company acknowledges receipt of this Change of Ownership or Contingent Change of Ownership and agrees to this request.

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Date