Model Qualified Disclaimer Form

I,________________________________________________ (DISCLAIMANT), in accordance with the provisions of Section 2518 of the Internal Revenue Code and Section ___________ of the State of ______________________________ (INSERT NAME OF APPLICABLE LAW), do hereby irrevocably disclaim my interest in any and all property (OR A PARTIAL DISCLAIMER - ENTER THE PARTIAL AMOUNT, IF APPLICABLE) passing under Section ____ of the________________________ (NAME OF QUALIFIED PLAN) of___________________________________________ (NAME OF PARTICIPANT), deceased on __________________________________ (DATE OF DEATH), said disclaimed property being more particularly described as follows:

(DESCRIPTION OF QUALIFIED PLAN AND DEATH BENEFIT)

(DISCLAIMANT OR DISCLAIMANT'S LEGAL REPRESENTATIVE)

THE STATE OF ________________
COUNTY OF _______________

This instrument was acknowledged before me on the ______ day of ______________, 20___ by (DISCLAIMANT OR DISCLAIMANT’S LEGAL REPRESENTATIVE).

Notary Public in and for the
State of _______________________

I received this disclaimer on the _____ day of _____________________________, 20__.

________________________________________
PLAN ADMINISTRATOR
Instructions for Model Qualified Disclaimer Form

**Important Notice:**

Qualified disclaimers are governed by the Internal Revenue Code and the applicable state probate code. The model qualified disclaimer form satisfies the requirements of the Internal Revenue Code, but may or may not meet all the requirements of state law. Special rules may apply when the disclaimant is a nonresident alien. Therefore, we recommend the disclaimant seek competent legal advice to ensure that all of the state’s requirements have been met.

**General Requirements:**

The disclaimant is the person who would have received the disclaimed death benefit under the qualified plan if the disclaimer had not been made. This may be a beneficiary who was specifically designated by the participant, or a beneficiary determined under the plan’s default beneficiary provisions. However, the disclaimant is not necessarily the person making the disclaimer. The disclaimer may be signed by the disclaimant’s legal representative.

The disclaimant must not have expressly or implicitly accepted the benefit before making the disclaimer. The beneficiary of a qualified plan may disclaim any interest, in whole or in part. The disclaimer is irrevocable once made.

The disclaimer must be made and delivered to the plan administrator within nine (9) months of the later of the participant’s date of death or nine (9) months after the date on which the disclaimant attains twenty-one (21) years of age.

Effective January 1, 2003, for a disclaimer to be valid for purposes of the Internal Revenue Code section 401(a)(9) minimum required distribution purposes, it must be delivered to the plan administrator by September 30 of the calendar year following the year of the participant’s death.

**Next Steps:**

Please return the completed qualified disclaimer with a notarized signature within ___ days to:

_______________________________________________

_______________________________________________

_______________________________________________

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