

**SPOUSAL CONSENT**

ReliaStar Life Insurance Company (Home Office: Minneapolis, MN)  
 ReliaStar Life Insurance Company of New York (Home Office: Woodbury, NY)  
*Members of the ING family of companies*  
 ING Customer Service Center  
 PO Box 5050, Minot, ND 58702-5050  
 Phone: 877-884-5050

**CONTRACT OWNER INFORMATION** *(Please print.)*

Contract Owner Name \_\_\_\_\_ SSN **(Required)** \_\_\_\_\_

Employer Name \_\_\_\_\_ Contract # \_\_\_\_\_

**TYPE OF DISTRIBUTION**

- Loan  Settlement Option  
 Withdrawal  Transfer/Contract Exchange/Rollover

**PARTICIPANT ELECTION**

I have requested a transaction under my Annuity Contract as specified on the attached form and unless one of the following conditions apply, waive completely or consent to the reduction of benefits otherwise payable in the request of a QPSA and QJSA.

- I am unmarried.  
 My Spouse cannot be located.  
 I am married and my Spouse must consent by completing the Spousal Consent.  
 I am legally separated or abandoned within the meaning of local law. Spousal Consent is not required unless a pending QDRO provides otherwise.  
 My Spouse is deceased.

**CONTRACT OWNER SIGNATURE AND CERTIFICATION**

I certify that the information provided on the Spousal Consent is accurate. I further certify that if I have indicated that I am legally separated or abandoned, I have the necessary court order. I understand that if I receive a payment as a complete or partial withdrawal of my account (other than a joint and survivor annuity), the value of benefits payable to my Spouse either under a QPSA or QJSA will be reduced or eliminated. I understand that once payment representing complete or partial withdrawal of my account has been made, my election to waive QPSA and QJSA is irrevocable with respect to the value of amounts paid pursuant to my request.

Contract Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

**SPOUSAL CONSENT** *(Requires Notarization or Plan Representative Authorization.)*

I have read the attached written explanation of survivor annuity payment options and hereby consent to the request of amounts to my Spouse under the Plan and in so doing, consent to my Spouse's election to waive the QPSA or QJSA. I understand if my Spouse receives the amount of his/her account balance under the Plan, the value of benefits payable to me under a QPSA or a QJSA will be reduced.

Spouse Name \_\_\_\_\_ SSN \_\_\_\_\_

**X** Signature of Spouse \_\_\_\_\_ Date \_\_\_\_\_

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**NOTARY PUBLIC OR EMPLOYER/PLAN SPONSOR CERTIFICATION**

I certify that the Spouse stated above personally appeared and is known to me (or is satisfactorily proven) to be the person whose name is subscribed to within this instrument. I acknowledge that he/she executed this document for the purpose stated.

Notary Public or Plan Representative Name *(Please print.)* \_\_\_\_\_

Notary Public or Plan Representative Signature \_\_\_\_\_

State \_\_\_\_\_ County \_\_\_\_\_ Date \_\_\_\_\_

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**UNDERSTANDING SURVIVOR ANNUITY PAYMENT OPTIONS**

Under the Internal Revenue Code, some plans are required to make payments under one of the survivor annuity options described here, unless you waive this right and your Spouse consents to your waiver. Even if your plan is not subject to this provision of the law, your Employer may have voluntarily chosen to administer their plan as if it were.

The following information is provided to better help you understand the survivor annuity payment options available to you and your Spouse. This only summarizes certain rules that might apply to the payment option you select. Since the Internal Revenue Code is complex and contains many conditions and exceptions not included here, you may wish to consult a professional tax advisor or financial advisor before selecting a payment option.

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**QUALIFIED JOINT AND SURVIVOR ANNUITY (QJSA)**

The Retirement Equity Act of 1984 (REA) requires that qualified retirement plans distribute benefits to married plan participants in the form of a Qualified Joint and Survivor Annuity (QJSA), unless the Participant elects to waive this form of benefit and the Participant's Spouse consents in writing to that election. QJSA provides an annuity for the lives of you and your Spouse. At your death, at least 50% of the payment will continue to your Spouse under this option. Your election to waive QJSA will have different effects depending upon the alternative form of payment you elect. One effect may be that no benefit will be payable to your Spouse should your Spouse survive you.

You have a right to waive the QJSA at any time provided that (1) you make the election within the 180-day period before the date on which your benefits are to begin, and (2) your Spouse consents to your election. Your Spouse's consent must be in writing and must be witnessed by a notary public or plan sponsor representative. You may revoke your waiver of QJSA at any time before your benefits begin. Spousal consent of this revocation is not necessary. If you revoke your election, your benefits under the Plan will be paid in the form of a QJSA.

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**QUALIFIED PRE-RETIREMENT SURVIVOR ANNUITY (QPSA)**

If you are married and your death occurs before you retire, the law requires that any amount remaining in your account be paid to your surviving Spouse in the form of a "Qualified Pre-Retirement Survivor Annuity." A QPSA will provide your Spouse with a series of periodic payments over his or her life. The size of the periodic payments will depend on the amount remaining in your account and the plan provisions. You may elect to waive the requirement that your surviving Spouse be paid in the form of a QPSA, and if applicable, the requirement that your Spouse be your beneficiary. You may make either or both of these elections beginning with the first day after which you become a participant in the Plan.

Any waiver election you sign before age 35 will become invalid the first day of the plan year in which you attain age 35. At that time you may again waive QPSA and the requirement that your Spouse be your beneficiary. Your Spouse must consent in writing to either waiver. You have the right to revoke any waiver that you have made at any time.

Your Spouse may need to consent to any subsequent change of beneficiary. Please ask your Plan Administrator or Employer for more information regarding changing beneficiaries.

If your vested account balance is \$5,000 or less at the time of your death, the Plan Administrator may make a distribution to your surviving Spouse in a single payment even if you had not waived QPSA prior to your death.

Because a Spouse has certain rights under the law, you should inform your Plan Administrator or Employer immediately of any changes in your marital status. A change in your marital status may require you to designate a new beneficiary. For more information regarding QJSA or QPSA, contact your Plan Administrator or Employer.