

DESIGNATION OF BENEFICIARY

To the TRUSTEE OF: PENSON PLAN AND TRUST FOR EMPLOYEES OF THE PUEBLO OF ZUNI

RE: _____
PLEASE PRINT NAME

Pursuant to the provision of the Plan permitting the designation of a beneficiary or beneficiaries by a participant, I hereby designate the following person or persons as primary and secondary beneficiaries of my Accrued Benefit under the Plan payable by reason of my death:

Primary Beneficiary (ies) [include address and relationship]:

Contingent Beneficiary (ies) [include address and relationship]:

I RESERVE THE RIGHT TO REVOKE OR CHANGE ANY BENEFICIARY DESIGNATION. I HEREBY REVOKE ALL PRIOR DESIGNATIONS (IF ANY) OF PRIMARY BENEFICIARIES AND CONTINGENT BENEFICIARIES.

The Trustee will pay all sums payable under the Plan by reason of my death to the primary beneficiary, if he or she survives me, and if no primary beneficiary survives me, then to the contingent beneficiary, and if no named beneficiary survives me, then the Trustee will pay all amounts in accordance with Section 8.02 of the Plan, which pertains to distributions when there is not a beneficiary designation on file.

Date of this Designation

Signature of Participant