The Academy of Natural Sciences Defined Contribution 403(b) Retirement Plan **Beneficiary Designation**

Part A – Participant Information				
Name		Social Sec	urity No.	
Part B – Beneficiary Designation				
Having read "Your Death Benefit and Beneficiary D designation, I hereby designate the following perso reserving the right to change this beneficiary design spouse is entitled to the whole death benefit unless currently unmarried, I understand that this Beneficiary	n(s) natio he/s	to receive the death n from time to time. she waives this right	benefits due under If I am married, I u by completing Par	the Plan, Inderstand that my
Primary Beneficiary(ies):				
Name Social Secu	rity N	lo. Date of Birth	Relationship	Percentage %
1				
2				
3				
4				100%
The contingent beneficiary(ies) will only receive a b	enef	it if none of the prima	ary beneficiaries su	
Contingent Beneficiary(ies):				
Name Social Secu	rity N	lo. Date of Birth	Relationship	Percentage %
1				
2				
3				
4				100%
Note: Unless you state otherwise, if you name monyou do, his/her share will be divided proportionately payment is called pro rata. Contact the Plan Admin complete this form.	∕ am	ong the remaining su	ırviving beneficiari	es. This method of
Sign and date this form below and return to the Pla your spouse as sole Primary Beneficiary, your spou designation to be valid.				
Marital Status		Married (includes se	parated)	
(Check One)		Not Married (include:	s divorced and wid	owed)
Date			articipant's Signat	ure

721_A131.DOC:12/8/2009 1

The Academy of Natural Sciences Defined Contribution 403(b) Retirement Plan **Beneficiary Designation**

Part C – Spousal Consent to Waive Survivor Benefits

you, the spouse of the participant, sign this consent, the participant cannot change the beneficiary named in his Beneficiary Designation unless you agree to the new beneficiary by signing a new consent. However, the articipant can name you as the sole primary beneficiary (with the contingent beneficiary of his/her choice) without getting your consent.				
entitled to receive my spouse's full account bal	_, the spouse of, neficiary Designation as set forth in Part B. I understand that I am lance under the Plan and that, by consenting to his/her Part B fit upon the death of my spouse except as provided in Part B. I			
I am signing this form voluntarily. If I refuse to spouse dies before his/her account is distribute	sign, then I will receive my spouse's full account balance if my ed from the Plan.			
Date	Spouse's Signature			
Sworn to and subscribed before me after a pro	oper proof of identity this day of,,			
in the State of	, County of			
Notary Public	My Commission Expires:(SEAL)			

Part D – Your Death Benefit and Beneficiary Designation Rights

If you die before your account is distributed, the Plan will pay a death benefit equal to 100% of your total Plan account(s). If you are married, your spouse is entitled to receive 100% of your total Plan account(s). You may designate someone else as the beneficiary of all or a part of your total Plan account(s) with your spouse's written, notarized consent. For example, if you name your spouse and child as the primary beneficiary, your spouse will receive less than 100%. Therefore, the designation is void unless your spouse consents.

You should complete a new Beneficiary Designation immediately after any change in marital status.

721 A131.DOC:12/8/2009 2

Guide to Completion of the Beneficiary Designation Form

These instructions will assist you in making your designation clear to everyone.

- For each person named, you are to provide the name, date of birth, Social Security number, relationship and percentage to be awarded. If a named person changes his or her name through marriage or otherwise, you should update your form. The date of birth helps us identify minor children and provide descriptions of benefits available. The Social Security number will let us find the person if he or she does not know to contact us for the benefit. The relationship of the person to you controls the forms of payment that the Plan can offer. If the person is not a relative, simply write, "Friend."
- Name only people, your estate, a trust, or a charity.
- To name your estate, simply write, "Estate."
- To name a trust, provide the name and address of the trustee and the title of the trust agreement. For example, if your name were James Jones and your will provided for a trust to be administered by the First National Bank, the box should read as shown below.

Primary Beneficiary(ies)	:					
Name	Social Security No.	Date of Birth	Relationship	Percentage %		
1. First National Bank, or its s	1. <u>First National Bank, or its successor, as Trustee under the Trust under the Will of James Jones,</u>					
2. <u>including any amendments to</u>	o the Trust	First National Ba	ank			
3		P.O. Box 900				
4		Smallville, PA 17	199			
				100%		

- If you neglect to fill in the percentages, the death benefit will be divided equally among the primary beneficiaries that survive you. If no primary beneficiaries survive you, the death benefit will be divided equally among the persons named as the contingent beneficiaries.
- Unequal divisions should be shown as follows:

Primary Beneficiary(ies):				
Name	Social Security No.	Date of Birth	Relationship	Percentage %
1. Mary Elizabeth Smith Jones	555-55-5555	06/15/1947	Wife	75%
2. Martha May Jones Oliver	888-55-8888	09/12/1980	Daughter	25%
3				
4.				
		_		100%

- The percentages in the Primary Beneficiary box must add up to 100%. The percentages in the Contingent Beneficiary box must add up to 100%.
- Pro rata designation To name more than one person and then provide that if someone dies, the survivors are to share the benefit among them, print "pro rata" in the box. If pro rata is used, the contingent beneficiaries will only receive a benefit if none of the primary beneficiaries survive you. If you name more than one person in a box, this is what the Plan will do if you write nothing more.

	imary Beneficiary(ies):	Cooled Coougity No.	Data of Dirth	Dolotionahin	Derechtege 9/
iva	ime	Social Security No.	Date of Birth	Relationship	Percentage %
1.	Martha May Jones Oliver	888-55-8888	09/12/1980	Daughter	25%
2.	Frederick Blake Jones	999-55-9999	12/1/1975	Son	25%
3.	Lisa Lee Jones	777-55-7777	11/10/1995	Daughter	50%
4.					
	Pro Rata			100%	

720_A131.DOC:12/8/2009

In this example, if Frederick dies, Martha and Lisa will divide the benefit with Martha receiving onethird and Lisa receiving two-thirds. Frederick's children will receive nothing.

• Per stirpes designation – To name more than one person and also provide that if one person dies, that person's share is to be paid to the person's children or that person's estate, print "per stirpes" in the box. If per stirpes is used, you may wish to leave the contingent beneficiary box blank or name the persons who would receive the benefit if the per stirpes designation became effective.

Primary Beneficiary(ies): Name	Social Security No.	Date of Birth	Relationship	Percentage %
1. <u>Martha May Jones Oliver</u>	888-55-8888	09/12/1980	Daughter	25%
2. Frederick Blake Jones	999-55-9999	12/1/1975	Son	25%
3. <u>Lisa Lee Jones</u>	777-55-7777	11/10/1995	Daughter	50%
4				
	Per Stirpes			100%

Contingent Beneficiary(ies):				
Name	Social Security No.	Date of Birth	Relationship	Percentage %
	-		•	

In this example, if Frederick dies, Martha will receive 25%, Lisa will receive 50%, and Frederick's children will receive his 25%.

If You Fail to Complete a Valid Form – If you fail to properly designate a beneficiary, or if all of the beneficiaries you indicate predecease you, the Plan will distribute your benefit in accordance with the Plan document's default provision.

If There Has Been a Divorce – If there is a qualified domestic relations order in force with respect to you, your Beneficiary Designation form will apply only to any death benefit not required to be paid to the alternate payee under the order.

720_A131.DOC:12/8/2009 2