

DOC0106113629

RiverSource Life Insurance Company RiverSource Life Insurance Co. of New York Return completed form to: 70129 Ameriprise Financial Center Minneapolis, MN 55474-9900

RiverSource

RiverSource Beneficiary(ies) Identification and Location Assistance Form

Decedent's	Client ID
Dooddonto	

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- i) Use this form for a deceased client or a deceased beneficiary.
 - Provide information for <u>all</u> known lawful children of the decedent (both living and deceased). Because "lawful children" was used in the beneficiary designation, the claim cannot be processed without the information requested on this form.
 - By definition, lawful children are children legally born to or legally adopted by the decedent.
 - This form must be signed by one of the beneficiaries, or the spouse of the decedent, or the Executor of the decedent's estate. The Executor must provide a letter of representation from the court.
 - Please return this form to the address above.

Part 1

t 1 Decedent's Information

-) If decedent did not have any lawful children, enter decedent's name below and skip to Part 3.
- To report living lawful children, complete Part 2.
- To report deceased lawful children or deceased beneficiary, complete the requested information for each lawful child of the deceased child beneficiary in Part 2.

Decendent's First Name	MI	Last Name
State of Residence		
What is the total number of lawful children for this deceased individ	ual?	

Part 2 Lawful Children of the Decedent Named in Part 1

(i) Provide the required information for the decedent's lawful children.

- By definition, lawful children are legally born to or legally adopted by the decedent and have survived the decedent.
- Attach separate pages for additional children, if necessary.
- If the decedent has lawful children who are deceased, complete the requested information for each lawful child of the deceased child beneficiary.

First Lawful Child of the Decedent

Name		
Date of Birth	Tax Identification Number (TIN) Email Address	
Residential Address	City	State

Sign in Part 4 - Acknowledgements and	© 2021 RiverSource Life Insurance Company
Signature	All rights reserved

Only RiverSource Life Insurance Co. of New York is authorized to sell insurance and annuities in New York





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ZIP Code Telephone Number	Is this lawful child liv	ving or deceased CLiving (Deceased Date of Death	
What is the total number of lawful child If a lawful child beneficiary has died and deceased beneficiary's lawful children	nd the beneficiary designation inclu		, provide the required information fo	or the
1. Lawful Child Name of Deceased L	awful Child Beneficiary		Date of Birth	
Telephone Number	Tax Identification Number (TIN)	Email Address		
Residential Address		City		
State ZIP Code				
2. Lawful Child Name of Deceased L	awful Child Beneficiary		Date of Birth	
Telephone Number	Tax Identification Number (TIN)	Email Address		
Residential Address		City		
State ZIP Code				
Second Lawful Child				
Name				
Date of Birth	Tax Identification Number (TIN)	Email Address		
Residential Address	Cit	у		State
ZIP Code Telephone Number	Is this lawful child liv	ving or deceased CLiving (Deceased Date of Death	
What is the total number of lawful children (living and deceased) for this deceased individual? If a lawful child beneficiary has died and the beneficiary designation includes the language "per stirpes", provide the required information for the deceased beneficiary's lawful children.				
1. Lawful Child Name of Deceased L	awful Child Beneficiary		Date of Birth	
Telephone Number	Tax Identification Number (TIN)	Email Address		



Residential Address	City	
State ZIP Code		
2. Lawful Child Name of Deceased Lawful Child Beneficiary	Date of Birth	
Telephone Number Tax Identification Number (TIN)	Email Address	
Residential Address	City	
State ZIP Code		
Third Lawful Child		
Name		
Date of Birth Tax Identification Number (TIN)	Email Address	
Residential Address Cit	y	State
ZIP Code Telephone Number Is this lawful child live	ving or deceased CLiving C Deceased Date of Death	
What is the total number of lawful children (living and deceased) for this of If a lawful child beneficiary has died and the beneficiary designation inclu deceased beneficiary's lawful children.		the
1. Lawful Child Name of Deceased Lawful Child Beneficiary	Date of Birth	
Telephone Number Tax Identification Number (TIN)	Email Address	
Residential Address	City	
State ZIP Code		
2. Lawful Child Name of Deceased Lawful Child Beneficiary	Date of Birth	
Telephone Number Tax Identification Number (TIN)	Email Address	
Residential Address	City	
State ZIP Code		



Fourth Lawful Child				
Name				
Date of Birth	Tax Identification Number (TIN)	Email Address		
Residential Address	Cit	ty		State
ZIP Code Telephone Number	Is this lawful child li	ving or deceased CLiving C	Deceased Date of Death	
What is the total number of lawful child If a lawful child beneficiary has died ar deceased beneficiary's lawful children 1. Lawful Child Name of Deceased L	nd the beneficiary designation inclu		rovide the required information for Date of Birth	or the
Telephone Number	Tax Identification Number (TIN)	Email Address		
Residential Address		City		
2. Lawful Child Name of Deceased L Telephone Number	awful Child Beneficiary Tax Identification Number (TIN)	Email Address	Date of Birth	
Residential Address		City		
State ZIP Code				
Fifth Lawful Child				
Name				
Date of Birth	Tax Identification Number (TIN)	Email Address		
Residential Address	Ci	ty		State
ZIP Code Telephone Number	Is this lawful child li	ving or deceased CLiving C	Deceased Date of Death	
What is the total number of lawful child If a lawful child beneficiary has died ar deceased beneficiary's lawful children	nd the beneficiary designation inclu		rovide the required information f	or the



1. Lawful Child Name of Dece	ased Lawful Child Beneficiary	Date of Birth	
Telephone Number	Tax Identification Number (TIN)	Email Address	
Residential Address		City	
State ZIP Code			
2. Lawful Child Name of Dece	ased Lawful Child Beneficiary	Date of Birth	
Telephone Number	Tax Identification Number (TIN)	Email Address	
Residential Address		City	
State ZIP Code			

Part 3 Obituary

• Provide an obituary listing the decedent's lawful children.

○ There was no obituary.

○ The names of the children in the attached obituary differ from the children listed on this form because:

○ The names of the children in the attached obituary match from the children listed above in Part 2



Part 4 Acknowledgements and Signature

By signing this document I attest that the information provided in this document is true and accurate and that I have correctly identified all living and deceased children legally born to or legally adopted by the decedent. I understand that this information is used, in part, by the Company to process insurance and annuity claims and to distribute death benefit proceeds to the rightful beneficiaries. I understand that each beneficiary will still be required to submit claim forms and any other documentation required by the Company in order to process the claims.

First Name	MI Last Name	
Client ID		
Relationship to the Decedent C Lawful Child		
O Beneficiary		
○ Spouse of the decedent		
C Executor of decedent's estate		
Phone Number		
Signature		Date (MMDDYYYY)
X		