



Service address:
RiverSource Life Insurance Co. of New York
70129 Ameriprise Financial Center, Minneapolis, MN 55474-9900



Spousal Continuation of Death Benefit Riders Selection

This form should be used for RiverSource Life Insurance Co. of New York. This form must be submitted in addition to the Death Claim Statement Form 38111 when the following circumstances are met:

Deceased's Client ID
[Redacted] 001

- The account is a *RiverSource*® Retirement Advisor Variable Annuity (RAVA), *RiverSource*® Retirement Advisor Advantage Variable Annuity (RAVA advantage), *RiverSource*® Retirement Advisor Select Variable Annuity (RAVA Select), *RiverSource*® Retirement Advisor Advantage Plus Variable Annuity (RAVA Advantage Plus), or *RiverSource*® Retirement Advisor Select Plus Variable Annuity (RAVA Select Plus) *RiverSource* Retirement Advisor 4 Advantage® Variable Annuity (RAVA 4 Advantage), *RiverSource* Retirement Advisor 4 Select® Variable Annuity (RAVA 4 Select), *RiverSource* Retirement Advisor 4 Access® Variable Annuity (RAVA 4 Access).
- The death beneficiary on the contract is the spouse.
- The owner of the contract is deceased.
- The spouse is electing spousal continuation as the settlement option on the Death Claim Statement Form.
- The contract contains at least one of the following Death Benefit Riders: Maximum Anniversary Value (MAV), Maximum 5th Year Anniversary (MAV5), or Return of Purchase Payment (ROPP).
- RAVA, RAVA Advantage and RAVA Select: The spouse and annuitant (if different than the owner) are 75 or younger as of the contract issue date.
- RAVA Advantage Plus and RAVA Select Plus: The spouse is age 75 or under as of the contract issue date (except for Return of Purchase Payment rider).

Part 1 Existing Account Identification (As it appears on the Insurance and Annuity Death Claim Statement, Form 38111)

Deceased's Name
[Redacted]

RiverSource Life Insurance Co. of New York Policy/Annuity Number(s):
Is the existing Account Number:
 Account Number [Redacted] 005

Is the existing Account Number:
 Account Number [Redacted] 005

Part 2 Claimant Rider Information

Important information concerning spousal continuation of contracts that contain Death Benefit Riders:

Contracts and riders continued under the spousal continuation option are adjusted as outlined below. You may be eligible to continue some of the death benefit riders. Please indicate whether you wish to continue the riders for which you are eligible.

Contracts with MAV Rider:

The death benefit otherwise payable becomes the new contract value as of the date of spousal continuation. If the rider is also continued, this new contract value will be treated as the initial MAV under the terms of the rider going forward. If you or the annuitant (if different than the owner on RAVA, RAVA Advantage and RAVA Select) are age 76 or older, as of the contract issue date, you cannot continue the MAV Rider.

Do you wish to continue this rider? Yes No

Claimant Rider Information continued on next page..

Sign on Page 2



Claimant Rider Information Continued

Contracts with MAV5 Rider (RAVA Advantage Plus, RAVA Select Plus, RAVA 4 Advantage, RAVA 4 Select and RAVA 4 Access only):

The death benefit otherwise payable becomes the new contract value as of the date of spousal continuation. If the rider is also continued, this new contract value will be treated as the initial MAV5 under the terms of the rider going forward. If you are age 76 or older as of the contract issue date, you cannot continue the MAV5 Rider.


Do you wish to continue this rider? Yes No

Contracts with ROPP Rider (RAVA Advantage Plus, RAVA Select Plus, RAVA 4 Advantage, RAVA 4 Select and RAVA 4 Access only):

If you were age 76 or older as of the contract issue date, you may continue this rider if it was included in the original contract by paying the annual rider charge of .20%, or you may drop the rider at this time. If you drop the rider at this time it may not be added later. The death benefit otherwise payable becomes the new contract value as of the valuation date of spousal continuation.

Do you wish to continue this rider? Yes No

Part 3 Authorization

 Must be signed by surviving spouse or fiduciary.

Surviving Spouse Name

[Redacted name field]

Surviving Spouse Signature

X _____

Date (MMDDYYYY)

If signing as Fiduciary, in what capacity are you acting?

Power Of Attorney Conservator/Guardian Other _____