



# INSTRUCTIONS FOR CONTRACT CHANGE OR OWNERSHIP AUTHORIZATION REQUEST

If you want to make changes or assign a new owner to your contract, we need your signature.

You need to print, complete and sign this form to begin your change request for your life insurance, health insurance or annuity contract. Make sure:

- The notary and executed by dates are the same.
- If you're transferring contract ownership, you complete the citizenship information.
- If you're designating ownership authorization for an entity-owned contract, the country of registration is provided.

We can't process your request without this information.

After completing and signing the form, you can return it to us one of three ways: by upload, mail or fax.

### Upload the completed and signed form through the USAA Mobile App or usaa.com:

From the USAA Mobile app:

1. Select the profile icon with your initials.
2. Select "Inbox" (Android only).
3. Select "Send documents to USAA."
4. Select "Upload other documents."
5. Follow the screen prompts.

From usaa.com:

1. Log on to your account.
2. Select the profile icon with your initials.
3. Select "Inbox."
4. Select "Send documents to USAA."
5. Select "Upload Documents."
6. Select "Life & Health Insurance/Annuities."
7. Select "Next."
8. Follow the screen prompts.

### You can also mail to:

USAA Life Insurance Company  
USAA Life Insurance Company of New York  
9800 Fredericksburg Road  
San Antonio, TX 78288

### Or you can fax to:

210-498-3243 within the United States  
877-435-7099 from outside the United States

### Questions?

Call toll-free in the United States:

Life Insurance and Fixed Annuities	800-531-8722
Life Claims and Benefits	800-531-8455
Medicare and TRICARE	800-531-6978
Variable Products Service	800-531-4265

**INSTRUCTIONS ONLY  
DO NOT RETURN THIS PAGE**



## ADD SUCCESSOR OWNER OF LIFE INSURANCE OR ANNUITY CONTRACT

### CURRENT CONTRACT INFORMATION

Contract Owner \_\_\_\_\_ DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Contract Number \_\_\_\_\_ USAA Number \_\_\_\_\_ SSN \_\_\_\_\_  
 Daytime Phone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Insured's/Annuitant's Name (if other than owner) \_\_\_\_\_

**REVISED CONTRACT INFORMATION** As owner of the aforementioned contract, I request the following change(s):

**IMPORTANT INFORMATION: Federal law requires us to obtain, verify and record your name, address, date of birth and other information that will allow us to identify you when you open an account and in certain other circumstances.**

**Successor Owner** USAA No. (if available) \_\_\_\_\_ SSN/TIN \_\_\_\_\_  
 Name \_\_\_\_\_ DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Physical Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Required to be completed by successor owner.**

Citizenship:  U.S.  Resident Alien  Non-Resident Alien  
 Specify Country, if other than U.S.: \_\_\_\_\_  
 Passport/Alien ID Number: \_\_\_\_\_

**IF SUCCESSOR IS AN ENTITY:** (Corporation, Trust, Partnership, etc.)

An Ownership Authorization Form must be submitted to designate individual(s) authorized to exercise ownership rights.

### Internal Revenue Service Certification For Beneficiary *Substitute IRS Form W-9*

**NOTE:** The following certification is required by the Internal Revenue Service (IRS) and does not affect your insurability.

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

**SIGNATURE(S) AS REQUIRED**

_____ Current Contract Owner	_____ Date	_____ Successor Owner	_____ Date
_____ Irrevocable Beneficiary (if any)	_____ Date	_____ Collateral Assignee (if any)	_____ Date

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*Before any contract change request, it is important that you consult your attorney or tax advisor concerning any legal or tax implications.*

**Ownership**

SUCCESSOR OWNER: If the Owner is different from the Insured, a Successor Owner can be named. Upon the death of the Owner, ownership shall pass to the Successor Owner. In the event the Successor Owner is not living at the death of the Owner, ownership passes as set out in the contract.

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**Irrevocable Beneficiary/Collateral Assignee**

If you have designated an Irrevocable Beneficiary on your contract, or if any portion of this contract has been assigned as collateral for a loan, the signature(s) of the Irrevocable Beneficiary and/or Collateral Assignee are required\* to make a change of ownership. You will find signature lines for an Irrevocable Beneficiary and Collateral Assignee on this form.

\*Irrevocable Beneficiaries on annuity contracts ONLY - **unless otherwise specifically provided in the contract, or as required by law**, owner's rights are **unrestricted**; with the exception of beneficiary changes, which require a signature authorization from the Irrevocable Beneficiary.