

# Beneficiary Form and Agreement



www.acorns.com

Please complete and email this form to support@acorns.com. If you have any questions, please feel free to email our customer support team at support@acorns.com.

### What is this form?

Use this form to designate a beneficiary on your Acorns Securities, LLC account. Use this form to establish or update the beneficiaries on a Transfer on Death (TOD) registration.

### What's a beneficiary?

A beneficiary is the person designated to be the recipient of the funds in your Acorns account in the event of your death.

### Can I update my beneficiary designations?

Yes. At any point you can send in a new form to update a designated beneficiary.

## 1. Your Account Information

First Name  Last

Social Security Number  OR Account Number  Phone Number

## 2. Designated Beneficiary

Name of beneficiary/trust

Name of trustee (if applicable)

Street Address

Suite / Apartment  City  State  Zip Code

Date of Birth (MM/DD/YYYY)  Relationship  Phone Number

Social Security Number  OR Tax ID Number

## 3. Disclosures

You may want to review this document with a tax, financial, or legal adviser. This form cancels any existing beneficiary information. This Agreement creates a transfer on death ("TOD") registration for an account upon the death of an individual account holder. The assets in the Account subject to the TOD will be transferred to beneficiaries designated in the Form. The beneficiary designation and disposition of assets made in this form will take precedence over any disposition contained in other documents such as a will, trust, premarital or other legal document.

Governing Law: This Agreement and its enforcement are governed by the laws of the State of California, except with respect to its conflicts-of-law provisions. The Agreement shall inure to the benefit of Acorns Securities, LLC and Acorns Advisers, LLC and its successors and assigns, whether by merger, consolidation or otherwise, and shall be binding upon the heirs, personal representatives, successors and assigns of the account holder and the beneficiaries designated by the account holder.

#### 4. Signature

By signing below, you:

Affirm that upon receiving written instruction, the account will be distributed to the beneficiary designated on this form in the event of your death.

Affirm that the beneficiary information provided on this form replaces any prior beneficiary information that may be on record for the indicated account(s).

Affirm that you have received, read, understood, and agree to be bound by the terms and conditions of this Beneficiary Form and Agreement, as is currently in effect and as may be amended in the future.

Agree that Acorns has no obligation to locate or notify any beneficiary or to independently verify any information submitted by any person claiming an interest in your account.

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Print Name

X

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Signature

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Date

**Please complete and email this form to:**

**support@acorns.com**