



The United States Life Insurance Company in the City of New York (USL), New York, New York

Member of American International Group, Inc.

- Fixed Life Service Center - P. O. Box 4373, Houston, TX 77210-4373
Variable Life Service Center - P. O. Box 4880, Houston, TX 77210-4880

Instructions for completing this form are listed on the back.

1. CONTRACT IDENTIFICATION

Check Here if New Address

CONTRACT No.:
OWNER: SSN/TIN OR EIN:
ADDRESS: PHONE No.:
EMAIL ADDRESS (optional):
INSURED/ANNUITANT (if other than Owner):

2. NEW OWNER(S)

A. PRIMARY

NEW OWNER'S NAME:
SSN/TIN OR EIN:
Address:
Phone No.:

B. CONTINGENT

NEW OWNER'S NAME:
SSN/TIN OR EIN:
Address:
Phone No.:

3. SIGN HERE FOR ABOVE REQUEST

The Company is requested and directed to recognize that the present owner(s) of the Contract has hereby designated the new owner(s) (the "Owner") of the Contract. The Owner designated above shall have sole ownership and control of the Contract during the lifetime of the Insured/Annuitant and shall be entitled to all ownership rights. See back for details.

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number, 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 back-up 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. person (including a U.S. resident alien).

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 or dividends on your tax return.

The Internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup withholding.

Signature of Current Owner Date Signature of New Owner Date

Signature of Current Co-owner Date Signature of New Co-Owner Date
(or other party having interest in contract) (or other party having interest in contract)

RETURN COMPLETED FORM TO THE ADDRESS OF THE COMPANY CHECKED ABOVE.

