... MassMutual

Annuity Contract Change Request

Use this form to make a Name, Ownership, Beneficiary, Annuitant, and/or Premium Payor change. Use form FR1208 to make a change to a contract with MassMutual Lifetime Income ProtectorSM or MassMutual Lifetime Payment PlusSM. Address changes can be made by contacting our Service Center.

A Personal Information::::::::::::::::::::::::::::::::::::
1. Contract number:
2. Owner/Plan full legal name (If individual: First, MI, Last, Suffix):
3. Taxpayer Identification Number (SSN / ITIN / EIN):
4. Phone number: Extension: Home Work Mobil
5. Email address:
6. Joint Owner full legal name (If applicable):
7. Annuitant/Participant full legal name (If different from owner):
8. Plan contact name (If applicable):
a. Phone number:
B Change Request ::::::::::::::::::::::::::::::::::::
Type of change (Select all that apply):
□ Name change (Complete section C) □ Ownership change (Complete section D)
☐ Beneficiary change (Complete section E) ☐ Annuitant change (Complete section F)
☐ Premium Payor change (Complete section G)
C Name Change ::::::::::::::::::::::::::::::::::::
Documentation of the name change must be submitted with request. Acceptable documentation includes: certified copy of divorc decree, marriage certificate and court order. If the change is due to inaccurate information provided on the application, a copy of Government issued identification is acceptable. If the change is a life event, your beneficiary may also need to be changed.
1. Name being changed (Select one):
Owner Joint Owner
☐ Annuitant ☐ Joint Annuitant (MassMutual Envision SM , MassMutual Odyssey Select SM & MassMutual Stable Voyage SM only)
Beneficiary
2. Current full legal name (First, MI, Last, Suffix):
3. New full legal name (First, MI, Last, Suffix):
4. Reason for change (Select one):
☐ Marriage/Divorce ☐ Court order
Correction Other (explain):

Massachusetts Mutual Life Insurance Company (MassMutual) and its subsidiaries: C.M. Life Insurance Company and MML Bay State Life Insurance Company: 1295 State Street, Springfield, MA 01111-0001.

	Ownership Change ::::::::::::::::::::::::::::::::::::
•	For MassMutual Envision contracts with MassMutual RetirePay sM in effect: (1) Changes to the Owner may terminate RetirePay; and (2 Changes to the Owner will not result in a change of the Covered Person.
(As a result of an ownership change, the new Owner may have the right to update the Annuitant and Beneficiary. If section F - Annuitar Change and section E - Beneficiary Change are not updated, the existing Annuitant and Beneficiary information will remain unless the new owner is a non-natural entity or ownership is being changed from a qualified plan.
	The beneficiary must be updated when changing ownership from a Qualified plan to the participant or when changing ownership on a trus owned contract. If the Owner is a non-natural person other than a Trust, the Owner will be the beneficiary.
	For MassMutual RetireEase sM , MassMutual RetireEase Select sM , RetireEase Choice sM and SPIA Contracts, you may submit the Incom Payment form to update the Payee and tax withholding information for the Scheduled Periodic Payments. If the form is not submitted th existing Payee and tax withholding information will remain the same.
•	Any existing automatic programs on the contract will remain unchanged unless otherwise requested. Contact our Service Center for more information
1.	Type of ownership change (Select all that apply):
[New individual Owner (Complete question 2 if the current owner is a trust)
[Change owner from a qualified plan to the Participant as owner of a (Only applies to a contract owned by a qualified plan.) (Select one IRA (Beneficiary change required)
	☐ Roth IRA (Beneficiary change required)
	☐ Nontransferable former Qualified Plan annuity (default)
l	Add new Joint Owner
l	Remove the following Joint Owner:
[Corporation as new Owner (Corporate Resolution, Certification of Corporate Resolution or Articles of Incorporation must be submitted Partnership, Limited Liability Company (LLC) or Limited Partnership as new Owner (Form F7833 - Certification of Partnership is required)
[Trust as new Owner (Complete question 2. Form F6734- Certification of Trust Agreement is required) This change may be subject to income tax. Complete question 2 and see section J - Disclosures for information.
2. (Ownership changes involving a Trust (Select one):
[Ownership change does not meet the criteria indicated in section <i>J - Disclosures Ownership changes involving Trusts</i> . Any gain in the contract will be reported to the IRS as taxable (<i>Default</i>)
[Ownership change meets the criteria indicated in section <i>J - Disclosures</i> and will be treated as a non-taxable change of ownership
N	ew Ownership Information (Select type)

	contract will be reported to the IRS as taxable (Default)
	Ownership change meets the criteria indicated in section <i>J - Disclosures</i> and will be treated as a non-taxable change of ownership
	New Ownership Information (Select type)
3	Full legal name (If individual: First, MI, Last, Suffix):
	Gender (Select one): Male Female
	Date of birth/Trust (mm/dd/yyyy):
	Taxpayer Identification Number (SSN / ITIN / EIN):
	Legal address. Do not use PO Box (Street, Apt. or Suite #, City & State or Country, ZIP/Postal Code):
9	. Phone number: Home \(\subseteq \text{Work} \subseteq \text{Mobile}
10	Email address:
11.	Type of citizenship (Select one):
	Resident U.S. citizen Non-resident U.S. citizen Resident alien Non-resident alien U.S. Legal Entity
	If U.S. citizen, skip 11a and 11b. If alien, continue to question 11a and attach copy of visa.
	If U.S. citizen, skip 11a and 11b. If alien, continue to question 11a and attach copy of visa.a. Country of citizenship:

13. Cost Basis (Provide when ownership of a non-qualified contract is transferred from a business entity): \$_

E	Beneficiary	Chango:											•						•			•			•					•			•	• •						
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- Unless otherwise indicated, all named beneficiaries will be considered primary beneficiaries. Refer to your Contract for more information.
- In the event of death of a Joint Contract Owner/Participant (MassMutual Equity EdgeSM, MassMutual EvolutionSM, MassMutual Odyssey[®], MassMutual Odyssey PlusSM, MassMutual Odyssey SelectSM, MassMutual Stable VoyageSM, MassMutual Transitions[®], MassMutual Transitions SelectSM, MassMutual RetireEaseSM, MassMutual RetireEaseChoiceSM, Panorama Passage[®], and Panorama Premier only), the surviving Joint Contract Owner, if any, will be treated as the primary beneficiary and any other beneficiaries will be treated as contingent.
- For MassMutual Envision contracts with RetirePay in effect, the Joint Covered Person will be considered the primary beneficiary and any other
 beneficiary designation will be treated as a contingent beneficiary. However, the beneficiary may be changed if the Joint Covered Person is
 no longer the spouse, domestic partner, or civil union partner of the owner. Such a change will result in the Annual Lifetime Benefit Amount
 (ALBA) being available only for the lifetime of the owner, but the ALBA will continue to be calculated using the joint life rates in effect on the
 issue date. If you are changing a beneficiary in connection with a divorce, provide a copy of the divorce decree or contact the Service Center.
- For Non-Qualified Deferred Compensation Plan and Qualified Plan owned contracts, the plan must be designated as primary beneficiary.
- Notary stamp is required in section H when there is a change to the irrevocable beneficiary.
- Spousal consent is required in section H if changing a beneficiary on a qualified contract subject to ERISA to a person other than a spouse (if married).
- Issue per stirpes is only applicable if the beneficiary is a natural person.
- Restricted Beneficiary Designation is for use with non-qualified and IRA contracts only. See section J for additional information and available products.

p			
1a. Beneficiary (Select one): Primary Conting			1
Type (Select one):	rust	☐ Estate of the Insured ☐	Other Entity
Full legal name:			
Mailing address:			
Phone number:	Extension:	Home	☐ Work ☐ Mobile
Date of birth/Trust (mm/dd/yyyy):		Gender (Select one):	ale Female
Taxpayer Identification Number (SSN / ITIN / EIN):			
Relationship to Owner:		Distribution:	%
Issue per stirpes?	Irrevocable Beneficia	ry: 🗌 Yes 🗌 No (Default,	
UTMA/UGMA Custodian (This is not applicable if Issu to act as custodian): the Uniform Gifts/Transfers to Minor Act of (State when		shall be custo	minority, (Name of adult dial for said child under
Restricted Beneficiary Designation: Yes N	lo (Default, skip restriction e	elections below)	
Settlement Option (Select one):			
Period Certain: (Specify numbers)	ber of years 10-30)		
Single Life with Period Certain:	(Specify number of years	s 10 or 20)	
☐ Single Life			
Payment Frequency (Select one):	efault) 🗌 Quarterly 🗌	Semi-Annually \square Annually	
Beneficiary Restriction Information:			
Full Restriction. I direct that the total death benefit	t payable to this beneficiary b	pe applied as the settlement option	n elected above. (Default)
Partial Restriction. I direct that no more than the remainder be applied as the settlement optio	-	election of the beneficiary, be pa	aid in a lump sum and

Beneficiary Change continued • • •		
1b. Beneficiary (Select one): ☐ Primary ☐ Co	ntingent	
Type (Select one):	☐ Trust ☐ Trust under Will	☐ Estate of the Insured ☐ Other Entity
Full legal name:		
Mailing address:		
Phone number:	Extension:	Home Work Mobile
Date of birth/Trust (mm/dd/yyyy):		Gender (Select one):
Taxpayer Identification Number (SSN / ITIN / EIN)	'):	
Relationship to Owner:		Distribution:%
Issue per stirpes?	Irrevocable Beneficia	ary: Yes No (Default)
to act as custodian):		
the Uniform Gifts/Transfers to Minor Act of (State	_	•
Restricted Beneficiary Designation: Yes		elections below)
Settlement Option (Select one):		
Period Certain: (Specify r	•	40 00)
☐ Single Life with Period Certain:	(Specify number of years	3 10 or 20)
☐ Single Life Payment Frequency (Select one): ☐ Monthly	v (Default) Duarterly D	Comi Annually Annually
Beneficiary Restriction Information:	y (Delauli) 🗀 Qualterly 🗀	3em-Amuany — Amuany
	enefit navable to this beneficiary	be applied as the settlement option elected above. (Default
		e election of the beneficiary, be paid in a lump sum and
the remainder be applied as the settlement		scientian of the bonomicary, so paid in a famp sum and
1c. Beneficiary (Select one): Primary Co	ntingent	
Type (Select one): Named Individual(s)		☐ Estate of the Insured ☐ Other Entity
Full legal name:		•
Mailing address:		
Phone number:	Extension:	☐ Home ☐ Work ☐ Mobile
	EXIGNOIN.	
(,,,,,,		Gender (Select one):
Taxpayer Identification Number (SSN / ITIN / EIN)):	
Relationship to Owner:		Distribution:%
Issue per stirpes?		ary: Yes No (Default)
utmA/ugma Custodian (This is not applicable if to act as custodian): the Uniform Gifts/Transfers to Minor Act of (State		bove): During the named child's minority, (Name of adulting shall be custodial for said child unde
	_	•
Restricted Beneficiary Designation: Yes Settlement Option (Select one):	→ No (Delault, Skip restriction	elections below)
	number of years 10-30)	
	(Specify number of years	: 10 or 20)
Single Life With Period Certain.	(Openly humber of years	5 10 01 20)
Payment Frequency (Select one): Monthly	v (Default) Duarterly	Semi-Annually Annually
Beneficiary Restriction Information:	, is ordary in equations in	2 Committee of Millians
Full Restriction. I direct that the total death be	enefit payable to this beneficiary	be applied as the settlement option elected above. (Default,

1d Denoficiary (Colort analy Drivery Occution	nont	
1d. Beneficiary (Select one): ☐ Primary ☐ Conting Type (Select one): ☐ Named Individual(s) ☐ T	-	Estate of the Incured Other Entity
		-
· ·		
Mailing address:		
Phone number: Date of birth/Trust (mm/dd/yyyy):	Extension:	
Taxpayer Identification Number (SSN / ITIN / EIN):		
Relationship to Owner:		Distribution:%
the state of the s	ue per stirpes is selected ab	ove): During the named child's minority, (Name of adult shall be custodial for said child under
Restricted Beneficiary Designation: Yes Settlement Option (Select one):	No (Default, skip restriction of	elections below)
Period Certain: (Specify number)	er of vears 10-30)	
☐ Single Life with Period Certain:	•	10 or 20)
☐ Single Life		
Payment Frequency (Select one):	efault) 🗌 Quarterly 🗀	Semi-Annually Annually
Beneficiary Restriction Information:		
		be applied as the settlement option elected above. (Default) election of the beneficiary, be paid in a lump sum and
the remainder be applied as the settlement option		election of the beneficiary, be paid in a fulfip sufficient
 Pay is elected at the Annuity Date.) Individually owned qualified contracts Contracts owned by a non-natural person Contracts that are receiving annuity payments Type of Annuitant change (Select one): Annuit Voyage only) 		on other than an Installment Refund provided by Retire- (Joint Annuitant allowed with Odyssey Select & Stable
 Full legal name (First, MI, Last, Suffix): Gender (Select one):		ry, ZIP/Postal Code):
 Gender (Select one):	ite #, City & State or Countr	
 Gender (Select one):	ite #, City & State or Countr	Apt. or Suite #, City & State or Country, ZIP/Postal Code):
 Gender (Select one):	estion 6 (PO Box or Street, Extension:	Apt. or Suite #, City & State or Country, ZIP/Postal Code):

G Premium Payor Change ::::::::::::::::::::::::::::::::::::					
The premium payor is the individual or entity that makes premium payments (
New Premium Payor Information:					
. Name (If individual: First, MI, Last, Suffix):					
2. Taxpayer Identification Number (SSN / ITIN / EIN):					
3. Address (PO Box or Street, Apt. or Suite #, City & State or Country, ZIP/Postal Co	ode):				
H Agreements & Signatures : : : : : : : : : : : : : : : : : : :	•••••				
Taxpayer Certification. By my signature, I, the Owner/Participant, certify under penary correct Taxpayer Identification Number; (2) I am not subject to backup withholding; 4) the FATCA code entered on this form (if any) indicating that I am exempt from FATC fincorrect.	(3) I am a U.S. person (including U.S. resident alien); and				
Note: While we are required by the IRS to include item 4 above, FATCA does not apply to included the ability to enter an exemption code. If you have indicated that you are not a U.S. on the Form W-8.					
The Internal Revenue Service (IRS) does not require your consent to any provequired to avoid backup withholding.	vision of this document other than the certifications				
Marital Status. (Required for annuitant and/or beneficiary changes, all Keogh (H.R. 10) by my signature below, I, the Owner/Annuitant, certify that I am (Select one):	and former Qualified Plan (individually-owned) contracts).				
Single, divorced/legally separated, widowed or unable to locate my spouse.					
Married and my Plan is <u>not</u> subject to ERISA (Consult with your employer if you ar	re uncertain whether your Plan is subject to ERISA).				
\square Married and my Plan <u>is</u> subject to ERISA (Signature of spouse and Notary stam	np/seal also required).				
consent to the changes designated on this form and certify that the information accept liability for the accuracy of the information on this form.	shown on this form is complete and accurate and that				
Current Owner Signature(s)					
Signature of Current Owner:					
Printed name:	Date:				
Title (If applicable):					
Signature of Current Joint Owner:					
Printed name:	Date:				
Title (If applicable):					
New Owner Signature(s) (If applicable)					
Signature of New Owner:					
Printed name:					
Title (If applicable):					
Signature of New Joint Owner:					
Printed name:					
Title (If applicable):					
in approable.					



Annuitant (If applicable)	
Signature of Annuitant:	
Printed name:	Date:
rrevocable Beneficiary Signature & Notary Stamp	o/Seal (If applicable)
plete this section for the Irrevocable Beneficiary as and credit unions.	if there is an Irrevocable Beneficiary change. Notary services are offered at
Signature of Irrevocable Beneficiary being remove	od:
Printed name:	Date:
(mm/dd/yyyy)	(full legal name)
onally appeared before me and is known to me and/owill and accord.	or satisfactorily proved to me to be the person who signed this document of his/he
Signature of Notary Public:	
State/County where signed:	Affix Notary Stamp/Seal
My commission expires (mm/dd/yyyy):	
ousal Consent & Notary Stamp/Seal (Required filividually-owned) contracts)	for beneficiary changes on all ERISA TSA, Keogh (H.R. 10) & former Qualified
above named Owner/Participant, certify that I am:	☐ Married ☐ Single ☐ Divorced/Separated ☐ Unable to locate spo
	Owner/Participant's election to make the requested change from a Keogh (H.R. 10 nderstand and acknowledge that I am waiving any legal right to this contract as p
Signature of Spouse:	
Printed name:	Date:
(mm/dd/yyyy)	(full legal name)
, , , , , , , , , , , , , , , , , , , ,	or satisfactorily proved to me to be the person who signed this document of his/he
onally appeared before me and is known to me and/owill and accord.	
will and accord.	
will and accord.	Affix Notary Stamp/Seal



■ Submission Instructions ::::::

For more information or general questions, use the resources below or for additional information regarding your contract, visit www.MassMutual.com. Once you have reviewed and completed the Annuity Contract Change Request, return pages 1 - 7 for processing. We will only accept responsibility for forms that are sent using the information below.

Phone:

1-800-272-2216 Monday through Friday 8 a.m. – 8 p.m. Eastern Time Mail:

MassMutual PO Box 9067 Springfield, MA 01102-9067 Overnight Mail:

MassMutual 1295 State Street Springfield, MA 01111-0001 Email:

ANNfax@MassMutual.com

Fax:

Attention: Annuity Hub 1-866-329-4272

Retain this original and the fax machine confirmation statement for your files.

Customer Identification To help the government fight the funding of terrorism and money laundering activities, the Federal law requires all financial institutions to obtain, verify and record information about our customers. This form asks for your name, address, date of birth and other information that will allow us to identify you. Similarly, this form also asks for identifying information and/or documents for ownership changes on behalf of an entity, rather than an individual (e.g. trusts, corporations). If you cannot provide the information or documentation we require, we may be unable to process this ownership change.

Owner Change. In certain states, an ownership change is subject to the Company's underwriting rules.

- Ownership changes may result in a taxable transaction. You should consult with your tax advisor prior to making this change.
 - The Plan is responsible for tax reporting when changing ownership from a Qualified plan.
 - When changing ownership from a Corporate-owned Non-Qualified contract, the Corporation is responsible for tax reporting.
 - When changing ownership from a Corporate-owned Non-Qualified contract, provide cost basis information that should be applied to the individual's contract. If this information is not provided, all future distributions from the contract will be reported as "taxable amount not determined."
- Ownership changes may not be permitted on certain tax qualified contracts.
- Parties to a civil union or domestic partnership recognized under state law are not recognized as spouses under federal tax law. Adverse tax consequences may apply to transactions between such parties.
- A conversion into a Roth IRA will subject the Fair Market Value (FMV) of the contract being converted to income tax. Generally, the FMV is equal to the cash value (without surrender charges) of the contract. If the contract has an additional benefit, such as death benefit or guaranteed withdrawal benefit, the FMV of the contract may be significantly greater than the cash value.

Ownership Changes Involving Trusts. If you indicated in Section D question 2 that an ownership change involving a trust is a non-taxable ownership change, you are certifying to the following:

 Change from Trust Owned to Individually Owned Contract: The new Owner named is considered the beneficial owner of the assets of the trust. The change of ownership between the trust and the new owner is not a taxable change of ownership under Internal Revenue Code Section 72(e).

- Change from Individually Owned to Trust Owned Contract: The change of ownership between the individual and the new trust is not a taxable change of ownership under Internal Revenue Code Section 72(e).
- Change from Trust Owned to a new Trust Owned Contract: The
 current trustee is requesting that ownership of this contract be
 transferred to the new trust named in section D. The trustee is considered the owner of the assets of both trusts for purpose of Internal
 Revenue Code Sections 671-679 or the beneficial owner of the assets of both trusts is the same individual(s).

Joint Ownership. Joint ownership is only allowed on non-qualified contracts.

Joint ownership is available on LifeTrust, MassMutual Equity EdgeSM, MassMutual EvolutionSM, MassMutual Odyssey[®], MassMutual Odyssey PlusSM, MassMutual Odyssey SelectSM, MassMutual RetireEase SelectSM, MassMutual RetireEase ChoiceSM, MassMutual Stable VoyageSM, MassMutual Transitions[®], MassMutual Transitions SelectSM, Panorama Passage[®], and Panorama Premier contracts.

MassMutual Odyssey, Panorama Passage, and Panorama Premier only allow joint ownership between spouses, except in certain states.

MassMutual Envision contracts with RetirePay in effect. Changes to the Contract Owner(s) will terminate your benefit except:

- If the new Owner assumes full ownership of the Contract and is essentially the same person (e.g. an individual ownership changed to a personal revocable trust, a change to a court appointed guardian representing the Owner during the Owner's lifetime, etc.).
- If the assignment is for an exchange under Section 1035 of the Code (i.e. the rider may continue during the temporary assignment period and not terminate until the Contract is actually surrendered).
- If the Contract is transferred to a spouse (or domestic partner or civil union partner for non-qualified contracts) and the new Owner was a Covered Person as of the RetirePay issue date.
- If the Contract is transferred to a spouse (or domestic partner or civil union partner for non-qualified Contracts) or to a former spouse in connection with a divorce and the new Owner was a Covered Person as of the RetirePay Issue Date.

J Disclosures continued • •

New Contract Owner. The new owner may request a copy of the Annuity contract. The Beneficiary must be updated when ownership is changed on a Trust owned contract or when ownership is changed from a Qualified Plan to the participant. Any existing automatic programs on the contract will remain unchanged unless otherwise requested.

Beneficiary Change. If there are any discrepancies between this form and the contract, the contract will prevail.

If there are multiple beneficiaries, only the age of the oldest can be used for purposes of determining payment amounts, unless separate accounts have been established in accordance with the Treasury Regulations Section 1.401(a)(9) and other guidance published by the IRS.

Trust under Will. The then acting Trustee of the Trust under the Insured's Will that is probated. If no Will of the insured is probated or if there is no trust in effect under the Will that is probated, proceeds will be paid to the Contingent Beneficiary, if living, otherwise to the owner or the estate of the owner.

Issue Per Stirpes. This means that if a Beneficiary dies before the Owner, any amount that would have been paid to that Beneficiary, will be paid in one sum and in equal shares to the surviving children of that Beneficiary, if any, before any other Contingent Beneficiary.

For selected Entities (e.g. trusts, corporations), it includes the successors or assigns of the Designated Entity.

UTMA/UGMA. The Law of the named state which applies to a transfer of property to a minor whether it be entitled Uniform Transfers to Minors Act or Uniform Gifts to Minors Act. Custodial arrangements are not available in the state of Vermont and Puerto Rico.

Irrevocable Beneficiary. An irrevocable beneficiary is one whose consent is required before a contract owner can change the beneficiary and/or exercise contract rights. For all annuity contracts, consent from the irrevocable beneficiary is required to make changes to the beneficiary arrangement. For some contracts (Foundation, Flex IV, Flex Extra, SPIA, and LifeTrust), the irrevocable beneficiary's consent is required before a contract owner can exercise contract rights.

Restricted Beneficiaries. A restricted payout plan allows you to designate and restrict the form of death benefit payment to be made to your beneficiaries in the event of your death before the Annuity Date. Beneficiary designation with restricted payout may be made on the following products:

- MassMutual EnvisionSM
- MassMutual EvolutionSM
- MassMutual Equity EdgeSM
- MassMutual Odyssey SelectSM
- MassMutual Stable VoyageSM
- MassMutual Odyssey PlusSM
- MassMutual RetireEaseSM
- MassMutual RetireEase SelectSM
- MassMutual Transitions SelectSM

Beneficiaries may not change the payout instructions as designated by the owner unless it is necessary to comply with Internal Revenue Code (IRC) requirements. This means that in certain circumstances beneficiaries may be able to elect a different settlement option than the one elected on this form.

If you have purchased a Non-Qualified contract: Section 72(s) of the IRC requires that, at the death of any holder, annuity payments to a non-spouse Beneficiary must begin within twelve months of the date of death or the entire death benefit must be distributed within five years of the date of death.

If you have purchased a Qualified contract: Section 401(a)(9) of the IRC requires that, at the death of the participant, annuity payments to a non-spouse beneficiary must begin by December 31 of the year following the year of death or the entire death benefit must be distributed by December 31 of the year containing the fifth anniversary of the date of death (other rules may apply depending on whether the participant has reached his or her required beginning date). If the settlement option chosen does not satisfy Section 401(a)(9) at the time of the participant's death, we reserve the right to amend the settlement option so that it will comply with the required minimum distribution rules.

For an IRA, placing any restrictions on your surviving spouse may have the unintended and adverse impact on your spouse's ability to treat the account as his/her own IRA. Please consult your tax, estate, or financial advisor.

Annuitant Change. In certain states, an annuitant change is subject to the Company's underwriting rules at the time of change. The annuitant cannot be changed on a contract owned by a non-natural person or on most tax-qualified plans.

Annuitant changes are allowed on MassMutual Envision (without RetirePay), MassMutual Evolution, MassMutual Odyssey, MassMutual Odyssey Plus, MassMutual Odyssey Select, MassMutual Stable Voyage, MassMutual Transitions, MassMutual Transitions Select, Panorama Passage, and Panorama Premier contracts only. For MassMutual Envision contracts with RetirePay in effect, if you reach your Annuity Date and choose an Annuity Option other than an Installment Refund Option provided by RetirePay, then you may change the Annuitant(s).

General Provisions

- The Company is only responsible to perform according to the terms of the contract, and is not responsible for carrying out the terms of any trust or any trust agreement outside of this policy.
- If no custodian is designated, any money payable to a minor will be paid to the court appointed guardian of the estate of the minor.
 Only the legal guardian of the minor can exercise any rights given to a minor.
- If a revocable trust is the owner, and the trust is not in effect at the
 death of the Insured, the proceeds shall be paid to the designated
 grantor(s) equally, otherwise to the estate of whichever said
 grantors is the last to die.
- If there is no living or existing beneficiary, the proceeds will be paid to the owner or the owner's estate.
- If Distribution Amounts/Percentages are designated, and a beneficiary predeceases the Owner, no longer exists or is no longer entitled to payment, that amount/percentage will be distributed to the surviving beneficiaries in that class as per the ratio designated (excluding per stirpes designations).