

## Ancestry.com Beneficiary Designation Form

Pursuant to this form, the designator hereby designates upon his or her death to the beneficiary(ies) indicated below any all rights the designator has with respect to (i) awards granted under the Ancelux Topco S.C.A. Equity Incentive Plan, (ii) shares in Ancelux Topco S.C.A. and (iii) units in Anvil MIV LLC. The beneficiary shall be subject to the rights and obligations provided under the applicable plan and/or agreement governing such awards, shares and units.

BENEFICIARY INFORMATION FORM FOR: \_\_\_\_\_  
(NAME)

Check the appropriate box(es):

- I want to name my beneficiary(ies) (use section 1);
- I want to change my beneficiary(ies) (use section 1);
- I am married and have not named my spouse as sole primary beneficiary (use section 2).

### SECTION 1 – DESIGNATION OR CHANGE OF BENEFICIARY(IES)

I hereby designate the following beneficiary to receive any amount payable or exercise any rights upon my death. This overrides any previous designation I have made.

PRIMARY BENEFICIARY:

NAME/ADDRESS	SOCIAL SECURITY NO.	RELATIONSHIP

SECONDARY BENEFICIARY: *(Applies only if primary beneficiary is unable to receive payments or exercise any applicable rights)*

	NAME/ADDRESS	SOCIAL SECURITY NO.	RELATIONSHIP
1.			

Designator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### SECTION 2 – SPOUSE'S WAIVER OF BENEFICIARY RIGHTS

To be completed by your spouse:

I, \_\_\_\_\_, am the legal spouse of \_\_\_\_\_  
(SPOUSE'S NAME) (DESIGNATOR'S NAME)

I understand that by consenting to the designation of another beneficiary I am irrevocably waiving any rights to this benefit. I hereby consent to the designation above.

Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_