

Teachers' Retirement System of Oklahoma

P.O. Box 53524 Oklahoma City, OK 73152-3524 <u>mytrs.trs.ok.gov</u> 405-521-2387

INSTRUCTIONS FOR COMPLETING BENEFICIARY DESIGNATION FORM 2A

This beneficiary form applies to active and non-retired members of the Teachers' Retirement System of Oklahoma (TRS). If you are retired and wish to update or make changes to your beneficiary designation, please use Beneficiary Designation Form 2R. The beneficiary designations you make on this form revoke and replace all prior beneficiary designations with TRS. Your designations do not become effective until this form is **signed by you** and **received** by TRS. Do not alter this form. **Remember to keep a copy of your completed form for your records.**

It is very important that you provide the **full legal name**, **address**, **relationship**, **date of birth**, **and Social Security number of each beneficiary you designate**. This information is essential in ensuring that your named beneficiaries can be located and receive your intended benefit amount. The Beneficiary Designation Form has two Sections: Member Account and Death Benefit.

Section 1. Member Account - Upon the death of a member who has not retired, the designated beneficiary (ies) shall receive the member's account balance as provided by law. Provided, if more than one primary beneficiary is named, the beneficiary shall not have the option to choose Option 2 (joint annuitant) retirement, if applicable, upon the member's death. If you have more than four primary beneficiaries, use a copy of this page. IF NO BENEFICIARY IS NAMED IN SECTION 2, THE DESIGNATED BENEFICIARY/IES IN SECTION 1 WILL BE PAID THE DEATH BENEFIT.

Section 2. Death Benefit - Upon the death of an active (in-service) member who has not retired, TRS will pay to a beneficiary an \$18,000 death benefit as provided by law. The member may designate the same beneficiary(ies) listed in Section 1 or a different beneficiary(ies) to receive the death benefit. Provided, if the beneficiary in Section 2 differs from the sole beneficiary of the member's account in Section 1, no beneficiary shall have the option to choose Option 2 (joint annuitant) retirement, if applicable, in lieu of the death benefit. IF NO BENEFICIARY IS NAMED IN SECTION 2, THE DEATH BENEFIT SHALL BE PAID TO THE BENEFICIARY/IES NAMED IN SECTION 1.

Each Section has three parts: Member Information, Primary and Contingent Beneficiary Designation, and Signature. **Please** print clearly in ink.

Member Information – Provide your full legal name and SSN or Member ID.

Primary Beneficiary Designation – You can designate one or more primary beneficiaries. All primary beneficiaries share equally unless you note otherwise. If multiple primary beneficiaries are named and a primary beneficiary dies before or simultaneously with you, the remaining primary beneficiary(ies) will be entitled to equal shares of the deceased beneficiary's designated benefit amount.

Contingent Beneficiary Designation – You can designate one or more contingent beneficiaries. Contingent beneficiaries receive benefits only in the event all primary beneficiaries die before or simultaneously with you. All contingent beneficiaries share equally unless you note otherwise on your form. If multiple contingent beneficiaries are named and a contingent beneficiary dies before or simultaneously with you, the remaining contingent beneficiary(ies) will be entitled to equal shares of the deceased beneficiary's designated benefit amount.

Signature— You must sign and date each page of the form.

Mail completed Beneficiary Designation Forms to: Teachers' Retirement System of Oklahoma P.O. Box 53524 Oklahoma City, OK 73152

NON-RETIRED BENEFICIARY DESIGNATION-MEMBER ACCOUNT

Member Name			Member SSN or TRS Member	ID	
SECTION 1 –MEM member's account ba			of a member who has not retired, the	ne designated beneficiary(is	es) shall receive the
designated primary benamed and no percerone primary benefici upon the member's door NOT SIGN AND	peneficiary, his/her ntage distribution i ary is named, the leath. If you have ro D RETURN A SEC SIGNATION, YO	r interest shall pass s noted, any proce beneficiary shall n more than four prin CTION 2 BENEFIC	mportant to clearly indicate your past to the surviving primary beneficieds payable to such beneficiaries woot have the option to choose Optionary beneficiaries, use a copy of the CIARY DESIGNATION WHEN Y BENEFICIARY DESIGNATION	ary(ies). If multiple primare will be divided equally. Pro on 2 (joint annuitant) retirer is page to list additional bery COU SIGN AND RETURN	ry beneficiaries are vided, if more than ment, if applicable, neficiaries. IF YOU THIS SECTION 1
Name	Date of Birth	SSN	Address	Relationship	Share (must equal 100%)
beneficiary(ies) livin	g at the member's	death. If multiple	eeds are paid to contingent benefic contingent beneficiaries are name ally. If you have more than four co	d and no percentage distrib	oution is noted, any
to list additional bene	eficiaries. I hereby				
Name	Date of Birth	SSN	Address	Relationship	Share (must equal 100%)
expressly reserve the and return a Section 2 Section 1 beneficiaries	right to make other 2 beneficiary design 3 for the Section 2 de	r and further chang ation at the same ti eath benefit which w	these elections, I hereby revoke all ges at any time I may elect as provid- me I sign and return a Section 1 ben- vill revoke all prior death benefit desi- aid as provided by Oklahoma law.	ed by law. I understand tha eficiary designation, I am ch	t if I do not sign oosing to use my
Member's Signature	y death, any amour				·
Welliber 8 Signature	y death, any amoun		Date		·
	Under Oklahoma		Date Id (younger than 18 years of age) is	s designated as beneficiary,	it will be necessary

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by Oklahoma law, and shall not be liable for the validity of the beneficiary designation.

NON-RETIRED BENEFICIARY DESIGNATION-DEATH BENEFIT

Member Name			Member SSN or TRS Member	ID	
an \$18,000 death ber beneficiary(ies) to recthe member's account benefit. If no beneficial SIGN AND RETURBENEFICIARY DESBENEFIT. A. PRIMARY I designated primary benamed and no percent	nefit as provided beive the death be t, no beneficiary s ary is named in S RN A SECTION SIGNATION, Y BENEFICIARY(eneficiary, his/he tage distribution	l by law. The menefit. Provided, shall have the opection 2, the dean 2 BENEFICOUR SECTION IES): It is very interest shall pris noted, any pro-	of an active (in-service) member who tember may designate the same bend if the beneficiary for the \$18,000 destion to choose Option 2 (joint annuitate the benefit shall be paid to the beneficiary DESIGNATION WHEN YOU I BENEFIC	eficiary(ies) listed in Section ath benefit differs from the ent) retirement, if applicable, ary(ies) named in Section 1 DU SIGN AND RETURN NS WILL BE USED FOR imary beneficiary(ies). Updary(ies). If multiple prima will be divided equally. If years and section in the section	on 1 or a differe sole beneficiary in lieu of the dea . IF YOU DO NON A SECTION R YOUR DEAT
Name	Date of	SSN	Address	Relationship	Share (must
beneficiary(ies). Con	ntingent beneficia	aries do not shar	eeds are paid to contingent beneficial	mary beneficiaries are livir	ng at the member
			and no percentage distribution is note ingent beneficiaries, use a copy of this		
Name	Date of Birth	SSN	Address	Relationship	Share (must equal 100%)
me and expressly re	serve the right t	to make other a	making these elections, I hereby re and further changes at any time I n h, any amount due me shall be paid	nay elect as provided by l	aw. If there is a
Member's Signature					
			child (younger than 18 years of age) is ent is made.	s designated as beneficiary,	it will be necessa

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TRS shall not be responsible for determining the competency of any member to designate/change beneficiaries, except as otherwise provided

by Oklahoma law, and shall not be liable for the validity of the beneficiary designation.