



INSTRUCTIONS FOR COMPLETING BENEFICIARY DESIGNATION FORM 2R

This beneficiary form applies to retired members of the Teachers' Retirement System of Oklahoma (TRS). If you are not retired and wish to update or make changes to your beneficiary designation, please use Beneficiary Designation Form 2A. 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.**

You are required to provide the **full legal name, address, relationship, date of birth, and Social Security number (SSN) of each beneficiary you designate**. Incomplete or incorrect forms will not be accepted. If a beneficiary resides in another country and does not have a SSN, please indicate that on the form.

The Beneficiary Designation Form has two Sections: Member Account and Death Benefit.

Section 1. Member Account for Max, Option 1, and Option 4 Retirement Only - DO NOT complete this Section if you are selecting Option 2 or Option 3 Retirement. Upon the death of a retired member, the designated beneficiary(ies) shall receive the member's account balance, if any, as provided by law.

Section 2. Death Benefit - Upon death of a retired member, TRS shall pay to a designated beneficiary(ies) the sum of \$5,000 as a death benefit. This beneficiary may be the same person(s) named in Section 1, or the member may designate some other person(s) to receive this benefit.

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**

RETIRED BENEFICIARY DESIGNATION-MEMBER ACCOUNT

Member Name _____

Member SSN or TRS Member ID _____

SECTION 1 – MEMBER ACCOUNT FOR MAX, OPTION 1, AND OPTION 4 RETIREMENT ONLY. DO NOT COMPLETE THIS SECTION IF YOU ARE SELECTING OPTION 2 OR OPTION 3 RETIREMENT. Upon the death of a retired member, the designated beneficiary(ies) shall receive the member's account balance, if any, as provided by law.

A. **PRIMARY BENEFICIARY OR BENEFICIARIES:** It is very important to clearly indicate your primary beneficiary(ies). Upon the death of any designated primary beneficiary, his/her interest shall pass to the surviving primary beneficiary(ies). If multiple primary beneficiaries are named and no percentage distribution is noted, any proceeds payable to such beneficiaries will be divided equally. If you have more than four primary beneficiaries, use a copy of this page to list additional beneficiaries.

I hereby designate:

Name	Date of Birth	SSN	Address	Relationship	Share (must equal 100%)

B. **CONTINGENT BENEFICIARY OR BENEFICIARIES:** Proceeds are paid to contingent beneficiary(ies) only if there is no surviving primary beneficiary(ies) living at the member's death. If multiple contingent beneficiaries are named and no percentage distribution is noted, any proceeds payable to such beneficiaries will be divided equally. If you have more than four contingent beneficiaries, use a copy of this page to list additional beneficiaries.

I hereby designate:

Name	Date of Birth	SSN	Address	Relationship	Share (must equal 100%)

Revoking Previous Designation of Beneficiary: By making these elections, I hereby revoke all other former designations made by me and expressly reserve the right to make other and further changes at any time I may elect as provided by law. If there is no designated beneficiary living at the time of my death, any amount due me shall be paid as provided by Oklahoma law.

Member's Signature _____

Date _____

The member's signature must appear exactly as the name appears on the top of this form.

Minor Beneficiary: Under Oklahoma law, if a minor child (younger than 18 years of age) is designated as beneficiary, it will be necessary that a guardian be appointed by the court before payment is made.

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.

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RETIRED BENEFICIARY DESIGNATION-DEATH BENEFIT

Member Name _____

Member SSN or TRS Member ID _____

SECTION 2 – DEATH BENEFIT: Upon death of a retired member, TRS shall pay to a designated beneficiary(ies) the sum of \$5,000 as a death benefit. This beneficiary may be the same person(s) named in Section 1, or the member may designate some other person(s) to receive this benefit.

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