

# **Benefciary Designation**

FOR OFFICE USE ONLY

Defned Beneft Members (PERS I/II/III, TRS I/II, JRS, EPORS)

Toll-Free: (800) 821-2251 alaska.gov/drb Division of Retirement and Benefts P.O. Box 110203 Juneau, AK 99811-0203 Juneau: (907) 465-4460 TDD: (907) 465-2805 Fax: (907) 465-3086

This form allows you to designate a person or institution as your primary and secondary beneficiaries for receipt of retirement funds. Please print clearly in ink and return the original form to the Alaska Division of Retirement and Benefits at the address above.

#### **SECTION I. MEMBER INFORMATION**

Please indicate your retirement system:						
Public Employees' Retirement System (PERS)	Teachers' Reti	Teachers' Retirement System (TRS)				
Judicial Retirement System (JRS)	Elected Public Offcers' Retirement System (EPORS)		ORS)			
NAME (FIRST / MI / LAST)		SOCIAL SECURITY NUMBER				
MAILING ADDRESS	CITY	CITY		ZIP + 4		
MARITAL STATUS	E	MAIL ADDRESS				
Married Never marrried Divorced	Widowed					

	I	

### Whom Can You Name as Benefciary?

You can choose:

- A living person.
- An institution.
- Your estate.
- A trust.
- Any combination of these options.

#### Primary Versus Secondary Benef ciaries

- Primary beneficiaries are "first in line" to receive benefits in the event of your death. All primary beneficiaries share equally, unless otherwise noted on the form.
- Secondary beneficiaries only receive benefits in the event all primary beneficiaries die before or simultaneously with the member. All secondary beneficiaries share equally, unless otherwise noted on the form.

#### Information to Provide

Each time you complete a new form, it is important you provide the full legal name, address, relationship, date of birth and Social Security number of each individual person (or taxpayer identification number (TIN) of each institution) you designate. You must also designate whether the beneficiary is primary or secondary. Each piece of information helps ensure the named beneficiary is located and the proper person or institution receives the correct distribution.

#### Designating an Institution as Benef ciary

To name an institution (charity, church, etc.), please provide all of the information requested in Parts 2 and/or 3.

#### Designating a Trust as Benefciary

To designate a trust as beneficiary, you should provide the name of the trust and the date the trust was created in the space provided for naming a beneficiary. Please also provide a copy of the Memorandum of Trust with your beneficiary designation.

#### Designating a Minor as Benefciary

A minor can be named as your benef ciary. When no custodian has been named, and the amount the amount the minor will receive is more than \$5,000, payment is guided by the Alaska Uniform Transfers to Minors Act. The Alaska Uniform Transfers to Minors Act AS 13.46.010-999 permits transfers of property and money to a person nominated as a custodian for a minor. The custodian must obtain a conservatorship prior to payment of the funds. This is true even if the custodian is the parent or legal guardian of the minor.

#### Naming Additional Benefciaries

If you need to name more beneficiaries than space allows on this form, use an page. This page must be received with your completed Beneficiary Designation form to be valid. You can download an additional page at **Alaska.gov/drb** or contact the Division to receive one by mail.

## **IMPORTANT NOTICE**

If you are married, **your spouse is automatically your 100% primary benef ciary unless they consent to another benef ciary.** Your spouse's written consent may be waived if:

- You were not married to your spouse during any part of your PERS or TRS employment;
- You have been married for less than 2 years and you have established that you and your spouse are not living together; or
- Your spouse cannot be located.

Your spouse may waive entitlement to benefts by completing and signing the

form (gen054)located on the Division of Retirement and Benefits website at  $% \left( {{\left[ {{{\rm{D}}_{\rm{T}}} \right]}_{\rm{T}}}} \right)$  .

Each time you complete a benef ciary form, it cancels all prior benef ciary designations with the Division for these death benef ts. Your designations do not become effective until this form is signed and received in the Division off ce. This benef ciary form will not update any life insurance benef ciaries you may have.

For more information, please contact the Membeu 3