North Carolina
Total Retirement Plans

Form **2FR**

Designating Beneficiary(ies) for the Firefighters' and Rescue Squad Workers' Pension Fund

Department of State Treasurer, Retirement Systems Division
3200 Atlantic Avenue • Raleigh, NC 27604 •
web: www.myNCRetirement.com
phone: 919-814-4590 • fax: 919-855-5800

Complete all sections of this form and read the attached Guides. After completing and signing this form before a notary public, send it to the address above. This form is not valid until it has been properly completed, notarized, and received by our office prior to your death. Forms submitted with erasures, strike overs, or white-outs in Sections B through E may not be accepted.

Section A. Tell us about yourself.

☐ Check if there are any changes to your contact information.

First Name	M.I.	Last Name	Suffix	SSN (Last 4 digits)

Mailing Address	e-Mail Address	Member ID

City	State	ZIP	Telephone	Date of Birth

Section B. Select your beneficiary(ies) for Return of Undistributed Contributions. ***See Guides for assistance.***

1

First Name*	M.I.	Last Name*	Date of Birth*

Address	City	State	ZIP

Relationship	Social Security Number*

E-Mail Address	Telephone

Select a Beneficiary Type *(Select one)*
☐ Principal
☐ Contingent

You may list one or multiple principal beneficiaries, but be aware of how yours choice will affect benefits payable in the event you are killed in the line of duty.

Effective July 1, 2018, if you are killed in the line of duty as determined by the North Carolina Industrial Comission, and you have one and only one principal beneficiary that is eligible and has not accepted a return of undistributed contributions, your living beneficiary may choose to receive a monthly lifetime benefit (known as the Survivorship Benefit), rather than a one-time payment (known as a return of Undistributed Contributions).

☐ If you are designating more beneficiaries, check the box at left and complete Page 2.

Read Guide A for more information about beneficiary(ies) elections and potential impacts on your benefits.

***REQUIRED FIELD**

Section C. Certify your selections.

I hereby authorize the Board of Trustees to make payment(s) to the beneficiary(ies) I have designated on this form. I acknowledge that the payments shall be a complete discharge of any claim and shall constitute a release of the Retirement System from any further obligation on my account. I understand that by completing and signing this form I acknowledge having read the attached Guides. I reserve the right to change the beneficiary(ies) designated on this form in accordance with the information provided. In addition, I understand that the Retirement System may not accept this form with any erasures, strike overs, or white-outs in Sections B through E. I certify by my signature that I have completed this form in its entirety.

Signature _____ Date_____

Section D. Have this form notarized. ***Improperly notarized forms will not be accepted.***

State of _____ County of _____ My Commission Expires _____

I, _____, a notary public for said State and County, do hereby

certify that _____ personally appeared before me

this date and acknowledge the due execution of this form.

Witness my hand and official seal this the _____ day of _____ , 20_____

Signature of Notary _____

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This page is intended as a supplement to Page 1, and is optional. If you have more beneficiaries to designate, complete this page and submit with Page 1. Please note that forms submitted with erasures, strike overs, or white-outs in Sections B through E may not be accepted.

Section E. Select your additional beneficiary(ies). (Optional) ***See Guides for assistance. *REQUIRED FIELD***

Please select additional beneficiaries. You do not need to repeat any beneficiaries listed on Page 1.

2

First Name*	M.I.	Last Name*	Date of Birth*
Address	City	State	ZIP
Relationship	Social Security Number*		
E-Mail Address	Telephone		

Select a Beneficiary Type *(Select one)*
☐ Principal
☐ Contingent

3

First Name*	M.I.	Last Name*	Date of Birth*
Address	City	State	ZIP
Relationship	Social Security Number*		
E-Mail Address	Telephone		

Select a Beneficiary Type *(Select one)*
☐ Principal
☐ Contingent

4

First Name*	M.I.	Last Name*	Date of Birth*
Address	City	State	ZIP
Relationship	Social Security Number*		
E-Mail Address	Telephone		

Select a Beneficiary Type *(Select one)*
☐ Principal
☐ Contingent

5

First Name*	M.I.	Last Name*	Date of Birth*
Address	City	State	ZIP
Relationship	Social Security Number*		
E-Mail Address	Telephone		

Select a Beneficiary Type *(Select one)*
☐ Principal
☐ Contingent

6

First Name*	M.I.	Last Name*	Date of Birth*
Address	City	State	ZIP
Relationship	Social Security Number*		
E-Mail Address	Telephone		

Select a Beneficiary Type *(Select one)*
☐ Principal
☐ Contingent

***REQUIRED FIELD**

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Form **2FR Guides**
Designating Beneficiary(ies) for the Firefighters' and Rescue Squad Workers' Pension Fund

Guide A. What **are the benefits available by designating beneficiaries on Form 2FR?**

Return of (Undistributed) Contributions Benefit
Effective July 1, 2018, if any firefighter or rescue squad worker dies, except if the individual is killed in the line of duty, contributions made by you or on your behalf to the Pension Fund, plus any amount you paid to purchase retirement credit, will be distributed to the beneficiary(ies) you designate. Your beneficiary(ies) is entitled to these contributions whether or not you are in active service at the time.

Any beneficiary must meet the requirements in Guide B. You may change your beneficiary(ies) for this benefit at any time by completing a new Form 2FR.

You may list one or multiple principal beneficiaries, but be aware of how your choice may affect benefits payable in the event you are killed in the line of duty.

See your Retirement Benefits handbook located on our website at www.myNCRetirement.com for further information.

- If you choose to designate one principal beneficiary, you may designate one or multiple contingent beneficiary(ies).
- If you list multiple beneficiaries in any case, you may not assign percentages of the Return of Contributions to any individual; the benefit will be divided equally among multiple beneficiaries.

Survivorship Benefit
Effective July 1, 2018, if you are killed in the line of duty as determined by the North Carolina Industrial Commission, and you have one and ONLY one principal beneficiary that is eligible and has not accepted a return of undistributed contributions, your living beneficiary may choose to receive a monthly lifetime benefit (known as the Survivorship Benefit), rather than a one-time payment (known as a return of Undistributed Contributions). It is important to note that your estate for the Survivorship Benefit.

Guide B. What is the Guaranteed Refund?

The Guaranteed Refund feature provides that if you die before exhausting the total of your remaining undistributed contributions, any remaining portion will be paid in a lump sum payment to the beneficiary(ies) you designate.

If all of your undistributed contributions have been exhausted, your monthly benefit will continue, if applicable, but the Guaranteed Refund will not be payable.

Guide C. What are the different types of beneficiary(ies) I can select?

A **principal beneficiary** will be the first person(s) that you select to receive a benefit payment after your death. You may choose one or multiple principal beneficiaries. A **contingent beneficiary** will be the person(s) who will be paid only if all principal beneficiaries are deceased at the time of your death. You do not have to select any contingent beneficiaries, but if you do, you must select a principal beneficiary. Please see Guide A for information on multiple beneficiaries and potential impacts to your benefit.

You have the option to designate as a beneficiary:

- **One** living person.
- More than one living person to share the benefit equally.
- Your estate. Write ESTATE in the Last Name box under Section B.

Here are some guidelines you should follow when selecting beneficiaries:

- You must supply the name, Social Security number and date of birth for each beneficiary listed.
- Although there is no limit to the number of principal and contingent beneficiaries you may choose, **you must choose at least one principal beneficiary** before a contingent can be chosen.
- If you list multiple beneficiaries, you may not assign percentages of the benefit to any individual; the benefit will be divided equally among the beneficiaries.
- If you elect multiple beneficiaries, they will only be eligible for the Undistributed Contributions and the Survivorship Benefit will not be an option.
- If you elect you estate a principal beneficiary, your estate will only be eligible for the Undistributed Contributions and the Survivorship Benefit will not be an option.
- Your beneficiary(ies) cannot be an unborn child, a pet, a church, or institution.
- You don't need permission from the beneficiary(ies) to make or change the designation; however, if a court order directs you to designate someone as a beneficiary, you must comply with the order.
- You don't have to make your beneficiary(ies) aware of this designation.
- You don't have to name relatives as beneficiary(ies).

Guide D. How is this benefit paid to my beneficiary(ies)?

After your death is reported and a certified copy of the death certificate is received, the Retirement Systems Division will determine what benefits are payable. Any benefit will be paid to your principal beneficiary(ies), but if your principal beneficiaries are deceased at the time of your death, the benefit will be paid to any contingent beneficiary(ies). If you chose multiple co-beneficiaries and one is deceased at the time of your death, the benefit will be paid to the surviving co-beneficiary(ies).

If a beneficiary is a minor, payment will be made to the qualified guardian of the minor, the Clerk of Courts in the county where the minor lives, or the minor after he/she reaches the age of majority. (Generally, the age of majority in North Carolina is 18.)

If you named your estate as your beneficiary, or if no named principal or contingent beneficiary is alive at your death, payment will be made to your legal representative (usually your estate).

The availability and amount of all benefits that the retiree might be eligible to receive is governed by Retirement System law. The information provided in this guide cannot alter, modify, or otherwise change the controlling Retirement System law or other governing documents in any way, nor can any right accrue to the retiree or beneficiary by reason of any information provided or omission of information provided herein. In the event of a conflict between this information and Retirement System law, Retirement System law governs.