

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

Page 1 of 2

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.

Sect	tion A. Tell us ab	out yo	urself.			Check	if there	are an	y changes	s to your contact information.
First Na	me	M.I.	Last N	lame					Suffix	SSN (Last 4 digits)
Mailing Address				e-Mail Ad	Idress					Member ID
City				State	ZIP		Telephon	е		Date of Birth
Sect	ion B. Select you	ır bene	ficiary	(ies) fo	r Return of	Undistri	buted (Contr	ibutions.	. See Guides for assistance.
	First Name*		M.I.	Last Na					of Birth*	
	Address				City		S	tate ZI	Р	Select a Beneficiary Type (Select one)
1	Relationship					Social Secur	ity Number*			Principal Contingent
	E-Mail Address					Telephone				
Effective Industria not accea a month	y list one or multiple principal ben- payable in the event you are kille e July 1, 2018, if you are killed in tal Comission, and you have one a epted a return of undistributed con ly lifetime benefit (known as the S as a return of Undistributed Contr	d in the line the line of du and only one tributions, y urvivorship	of duty. ty as deterr principal be our living be	nined by the neficiary that neficiary ma	North Carolina t is eligible and has y choose to receive	·		A for mo	re information a	aries, check the box at left and complete Page 2.
			*REQUIRED FIELD							
I hereby a shall considered to	stitute a release of the Retiremen	make pay System fro (ies) desigr	ment(s) to the m any furthe nated on this	ne beneficiary er obligation s form in acc	on my account. I un cordance with the i	nderstand that b nformation prov	y completin ided. In add	g and sig ition, I ur	ning this form I nderstand that	s shall be a complete discharge of any claim and acknowledge having read the attached Guides. the Retirement System may not accept this form
Signat	ture								Date_	
Sec	tion D. Have this	form	notariz	zed. <i>Im</i>	properly no	tarized fo	rms will	not b	e accept	ed.
State of _	Cou	nty of					N	/ly Comm	ission Expires	
l,	,	a notary pu	blic for said	State and Co	ounty, do hereby					
certify tha	at		_ personall	y appeared b	pefore me					
this date	and acknowledge the due executi	on of this fo	rm.							
Witness	my hand and official seal this the _s		_ day of		,	20				REV 20211215



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

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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 s	select additional beneficiaries. You do not n	eed to rep	eat any benefici	aries listed	on Page 1.					
	First Name*	M.I.	Last Name*		Date of Birth*		th*			
	Address	City		State	ZIP	Select a Beneficiary Type (Select one)				
2	Relationship				Social Security Number	.*		Principal Contingent		
	E-Mail Address				Telephone					
3	First Name*	M.I.	Last Name*			Date of Birth*				
	Address		City		State	ZIP	Select a Beneficiary Type (Select one)			
	Relationship		Social Security Number	.*	1	Principal Contingent				
	E-Mail Address		Telephone							
4	First Name*	M.I.	Last Name*			Date of Bir	th*			
	Address			City		State	ZIP	Select a Beneficiary Type (Select one)		
	Relationship				Social Security Number	*		Principal Contingent		
	E-Mail Address		Telephone							
5	First Name*	ne* M.I. Last Name*				Date of Bir				
	Address	City		State	ZIP	Select a Beneficiary Type (Select one)				
	Relationship				Social Security Number	.*	'	Principal Contingent		
	E-Mail Address				Telephone					
6	First Name*	M.I.	Last Name*			Date of Bir	th*			
	Address	City		State	ZIP	Select a Beneficiary Type (Select one)				
	Relationship		Social Security Number*			Principal Contingent				
	E-Mail Address		Telephone							

*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 cobeneficiaries 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.

