# Beneficiary Designation – Funeral Home

**Retiree Death Benefits** 

515-116F-20 04

This form allows you to designate a funeral home as your primary beneficiary and to elect which benefits it should receive. **If you are not naming a funeral home, do not complete this form.** Visit the forms page of the OPERS website at **www.opers.ok.gov/forms**, or contact OPERS for the correct version of the form. Upon your death as an OPERS retiree, there are three possible benefits that may be paid according to this designation: \$5,000 Death Benefit, excess accumulated contributions, and/or the final monthly benefit payment. Parts 3 and 4 of this form allow you to name primary and contingent beneficiaries for applicable benefits not designated or paid to the funeral home in Part 2. You may change your beneficiaries in the future by completing a new *Beneficiary Designation* form. Please print clearly in ink and return the original form to OPERS at the address below.

PA	RT 1 - MEMBER INFORM	ATIC	N				
Name (First, Middle, Last)				Social Security num	Social Security number		
Maili	ng address (Street or P.O. Box, City, Sta	te, Zip+4	.)				
Personal email address					Daytime telephone number		
PART 2 - DESIGNATING A FUNERAL HOME AS PRIMARY BEN							
Full legal name of funeral home		Address, City, State, Zip+4		l ax identifi	Tax identification number (TIN)		
l wis	sh to name the funeral home ab	ove as	my primary beneficiary for the follow	ving retiree death be	nefits (Please o	check only one):	
\$5,000 death benefit only							
All retiree death benefits (\$5,000 death benefit, excess accumulated contributions and final monthly benefit, if applicable)							
Provide beneficiary information in Parts 3 and 4 for any benefits not paid to the named funeral home.							
PART 3 - PRIMARY BENEFICIARY DESIGNATION							
	Full legal name of person(s), trust or institution		Address, City, State, Zip+4	Relationship to member	Date of birth	Social Security number or TIN	
1.							
2.							
3.							
4.							
Pai	RT 4 -CONTINGENT BENE	FICIA	RY DESIGNATION (Will only rece	eive benefits if all prin	mary beneficia	ries are deceased.)	
	Full legal name of person(s), trust or institution		Address, City, State, Zip+4	Relationship to member	Date of birth	Social Security number or TIN	
1.							
2.							
3.							
4.							
Mark here if you need to designate additional beneficiaries than the space above allows. You can obtain an Additional Beneficiary Designation page from OPERS at www.opers.ok.gov/forms or by calling (800) 733-9008.							
Ра	RT 5 - SIGNATURE						
Reti	rement System. I have read the	instru	designations for retired member deat ctions and understand this form super by the Oklahoma Public Employees Ro	rsedes and revokes a			
Signature Date							



# **Beneficiary Designation**

Retiree Death Benefits - Funeral Home

# **Beneficiary Designation Instructions & Information**

This form is to be used only by retired members of the Oklahoma Public Employees Retirement System (OPERS) who wish to name a funeral home as a beneficiary to receive one or more of the following death benefits:

#### 1. \$5,000 Death Benefit

Your beneficiary is entitled to a taxable lump-sum cash payment (currently \$5,000) upon your death.

### 2. Excess Accumulated Employee Contributions

If you chose the Maximum Retirement Benefit Option at retirement and pass away before receiving in retirement benefits the balance of contributions you paid in to OPERS, the difference between your accumulated contributions and the cumulative monthly retirement benefits would be paid according to this designation.

### 3. Final Monthly Benefit Payment

If applicable, your final monthly benefit payment may be paid according to this designation.

**NOTE:** If you are naming a funeral home as your beneficiary for excess accumulated contributions or the final monthly benefit payment, if applicable, be aware these payments may exceed your funeral costs.

#### Whom Can You Name as Beneficiary?

You can choose:

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

#### **Primary Versus Contingent Beneficiaries**

- 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.
- Contingent beneficiaries only receive benefits in the event all primary beneficiaries die before or simultaneously with the member. All contingent beneficiaries share equally, unless otherwise noted on the form.

#### **Designating an Institution as Beneficiary**

To name an institution (charity, church, etc.), please provide all of the information requested in Parts 3 and/or 4.

### **Designating a Trust as Beneficiary**

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 Beneficiary**

A minor can be named as your beneficiary. However, it is often very difficult and sometimes costly for the minor beneficiary to receive payment, especially if the amount to be paid exceeds \$10,000. Before you designate a minor as beneficiary, contact OPERS for more details.

Each time you complete a beneficiary form, it cancels all prior beneficiary designations with OPERS for these death benefits. Your designations do not become effective until this form is signed and received in the OPERS office. This beneficiary form will not update any life insurance or SoonerSave beneficiaries you may have.

# 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 contingent. Each piece of information helps ensure the named beneficiary is located and the proper person or institution receives the correct distribution.

## **Naming Additional Beneficiaries**

If you need to name more beneficiaries than space allows on this form, use an *Additional Beneficiary Designation* page. This page must be received with your completed *Beneficiary Designation* form to be valid. You can <u>download an additional page</u> at **www.opers.ok.gov/forms** or contact OPERS to receive one by mail.

For more information, you may reach OPERS at the contact information below. When you have completed and signed this form, please return the original form to OPERS at the address below.