

This beneficiary designation is effective upon receipt by Minnesota State Retirement System (MSRS) and supersedes all prior designations. For more information about beneficiary designations, please review *A Guide to Beneficiary Designations*. This guide is available by contacting MSRS or online at www.msrs.state.mn.us.



1. Information about you

Last name	First name	MI	Account ID or SSN
Mailing address			Account extension (if applicable)
City		State	Zip code
Daytime phone number		Alternate phone number	

Check here for address change

2. Primary beneficiary

I hereby designate the following person(s) as primary beneficiary(ies) of my account under the Plan if I should die prior to the liquidation of my account.

Name of primary beneficiary *	Relationship *	Date of birth *	Address *	Percentage *

* Required Fields

Must equal 100 %

3. Contingent beneficiary

In the event there is no primary beneficiary(ies) at my death, I hereby designate the following person(s) as contingent beneficiary(ies) of my account under the Plan.

Name of contingent beneficiary *	Relationship *	Date of birth *	Address *	Percentage *

* Required Fields

Must equal 100 %

4. Required signature

I have completed, understand and agree to all pages of this Beneficiary Designation form and the Beneficiary Guide. I hereby revoke all my prior designations (if any) of primary and contingent beneficiaries.

Participant Signature _____ Date (Required) _____ / ____ / ____
Month Day Year

Beneficiary Designation *Guide*

Privacy Notice

Private data requested on this form will be used by MSRS to process your request. You are not legally required to provide the data requested. However, we may not be able to process your request without sufficient information. Your private data will not be shared with an unauthorized person without written consent except as authorized by federal or state law or a court order.

Effective Date

A beneficiary designation is effective upon receipt by Minnesota State Retirement System. This designation supersedes all prior designations.

A beneficiary must be a natural person, a qualified trust, an estate or a charitable organization.

You may designate more than one beneficiary. You may attach an additional sheet of paper if there is not enough space to list your designated primary or contingent beneficiaries.

Beneficiary(ies) share equally if percentages are not provided.

Death of Primary Beneficiary(ies)

In the event the primary beneficiary(ies) predeceases you, death benefits will pass to the contingent beneficiary(ies). If no beneficiary(ies) survives you, the benefit shall be payable to your surviving spouse or, if none, to your estate.

Failure to Designate Beneficiary(ies)

If you do not designate a beneficiary(ies), the assets are paid to a surviving spouse, or if none, to your estate.

For more information regarding beneficiary designations, please refer to *A Guide to Beneficiary Designations*.

Minor Beneficiary(ies)

In the event of your death, distribution to a minor beneficiary(ies) requires the following before the distribution can occur:

Guardian

A copy of the court documents showing the name, address and telephone number of minor's court appointed guardian, OR

Custodian

A copy of the trust or other documents showing power of appointment under the Uniform Gifts to Minors Act (UGMA) or Uniform Trust to Minors Act (UTMA), whichever is in effect for your state.

Divorce

In the event of dissolution of marriage, your MNDCP beneficiary designation naming your former spouse becomes void unless the divorce decree provides otherwise. You may re-designate your former spouse after the divorce if you wish.

Naming a Trust or Estate

To name a Trust as beneficiary you must provide:

- Name of trust and date trust was established, and
- A copy of the signature and title pages of the Trust document.

Sample wording for trust designation

(Trustee name) as Trustee of the (name of trust) established (date of trust)

To name your Estate as beneficiary you must enter the following in the name field:

"Estate" or "Representative of my Estate"

OFAC

I understand that MSRS is required to comply with the regulations and requirements of the Office of Foreign Assets Control, Department of Treasury (OFAC). As a result, MSRS cannot conduct business with persons in a blocked country or any person designated by OFAC as a specially described national or blocked person. For more information, please visit the OFAC website at treasury.gov/about/organizational-structure/offices/Pages/Office-of-Foreign-Assets-Control.aspx.

Submitting this form

Mail or fax the completed form to the address/fax number indicated below.

A confirmation statement will be mailed to you acknowledging this election.

Send page 1 to:



Minnesota State Retirement System

60 Empire Drive, Suite 300
St. Paul, MN 55103-3000



Fax: 1.888.529.1832



Telephone: 651.296.2761

Toll-free: 1.800.657.5757, option 3