



# Beneficiary Designation

## Purpose of the Form

- Use this form to designate beneficiaries to receive your PERSI Base Plan and Choice 401(k) Plan death benefits.
- Note:** For purposes of your death benefits, the designation(s) in this form supersede all other arrangements, and will be honored regardless of those arrangements, including a last will and testament or trust document. However, death benefits are still subject to community property law.

## Instructions

- Read **About Form RS115**, attached.

**Note:** If your address has changed, you must submit form RS110, *Member Mailing Address Change*, with this form.

Member Social Security Number	Member PERSI ID Number*

\* A PERSI ID is only required for members with multiple PERSI accounts.

Member Information			
Name – First, Middle, Last			
Mailing Address	Street or P.O. Box		
	City	State	Zip Code
Daytime Phone Number (include area code)		Email Address	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married

Primary Beneficiary or Beneficiaries					
Name	Social Security or Tax ID Number	Date of Birth	Relationship to You	Benefit %	Nominate a custodian under the Idaho UTMA
				.0%	<input type="checkbox"/> Check this box and go to page 2.
				.0%	<input type="checkbox"/> Check this box and go to page 2.
				.0%	<input type="checkbox"/> Check this box and go to page 2.
				.0%	<input type="checkbox"/> Check this box and go to page 2.

Secondary Beneficiary or Beneficiaries					
Name	Social Security or Tax ID Number	Date of Birth	Relationship to You	Benefit %	Nominate a custodian under the Idaho UTMA
				.0%	<input type="checkbox"/> Check this box and go to page 2.
				.0%	<input type="checkbox"/> Check this box and go to page 2.
				.0%	<input type="checkbox"/> Check this box and go to page 2.
				.0%	<input type="checkbox"/> Check this box and go to page 2.

Member Acknowledgment	
I understand the instructions and information under "About Form RS115." I revoke all previous PERSI beneficiary designations and request that any PERSI benefits payable after my death be made as indicated herein. I may change this designation by filing a new form. This designation applies to my PERSI Base and Choice 401(k) Plan accounts.	
Signature	Date – mm/dd/yyyy



**Beneficiary Designation (continued)**

Member Name – First, Middle, Last	Social Security Number
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**Custodian Nominations for Minor Beneficiaries under the Idaho Uniform Transfers to Minors Act**

- Use this section to nominate custodians and substitute custodians for minor beneficiaries under the Idaho Uniform Transfers to Minors Act. Attach a copy of this page if nominating custodians for more than 4 minor beneficiaries.

**Instructions**

- Write the minor beneficiary’s name in the top box.
- Write the custodian’s name, Social Security number, address, and telephone number in the appropriate boxes. You can nominate a substitute custodian to serve in the event the nominated custodian is unable. List each minor beneficiary separately, even if you are nominating the same custodian for all minor beneficiaries.

<b>Minor Beneficiary Name:</b>			
<b>Custodian Information</b>		<b>Substitute Information</b>	
Name:		Name:	
SSN:		SSN:	
Address:		Address:	
City, St, Zip:		City, St, Zip:	
Telephone:		Telephone:	

<b>Minor Beneficiary Name:</b>			
<b>Custodian Information</b>		<b>Substitute Information</b>	
Name:		Name:	
SSN:		SSN:	
Address:		Address:	
City, St, Zip:		City, St, Zip:	
Telephone:		Telephone:	

<b>Minor Beneficiary Name:</b>			
<b>Custodian Information</b>		<b>Substitute Information</b>	
Name:		Name:	
SSN:		SSN:	
Address:		Address:	
City, St, Zip:		City, St, Zip:	
Telephone:		Telephone:	

<b>Minor Beneficiary Name:</b>			
<b>Custodian Information</b>		<b>Substitute Information</b>	
Name:		Name:	
SSN:		SSN:	
Address:		Address:	
City, St, Zip:		City, St, Zip:	
Telephone:		Telephone:	

# About Form RS115

## Instructions

- 1 Complete the form and sign in blue or black ink.
  - If your address has changed, you must submit form RS110, *Member Mailing Address Change*, with this form.
- 2 Use whole percentages only.
- 3 If more space is needed, attach an additional signed and dated sheet of paper.
- 4 If any designated beneficiary is a minor, complete page 2 if you choose to nominate an adult custodian to receive the funds for the minor. PERSI cannot pay a death benefit directly to a minor beneficiary.
- 5 Send the form to PERSI.

**Note:** The form is not valid unless signed, dated, and on file with PERSI.

## Types of Beneficiaries

- **Primary beneficiary or beneficiaries.** The first person or persons to receive death benefits when you die. If you select one person only, he or she receives 100% of the benefits.
- **Secondary beneficiary or beneficiaries.** Person or persons to receive death benefits if no primary beneficiary or beneficiaries are alive when you die.
- **Default beneficiary.** If PERSI does not have a beneficiary designation on file, death benefits are paid by law to the following: (1) To your surviving spouse. (2) If you have no surviving spouse, to your estate. If you agree with this default distribution and you have not previously submitted a beneficiary designation form, you do not need to designate a beneficiary or submit this form. However, payment of death benefits could be delayed if PERSI has no designation on file.

## Notes About Designating Beneficiaries

- For purposes of your death benefits, the designation(s) in this form supersede all other arrangements, and will be honored regardless of those arrangements, including a last will and testament or trust document. However, death benefits are still subject to community property law.
- Percentages must be in whole numbers. Do **not** use partial numbers. For example, use 33% not 33⅓%.
- Choose your beneficiaries carefully. Your PERSI funds might be your largest financial asset.
- If you select two or more people as primary or secondary beneficiaries, indicate what percentage each is to receive (the percentages must equal 100%).
- You must list your children separately.
- If you are designating one or more minors as beneficiary, you should specify how you want your death benefit transferred if you die before the beneficiary reaches legal age of majority. PERSI cannot disburse the money to a minor, so if you don't nominate a custodian on this form, a court may have to appoint an adult to serve as conservator of the funds. This form provides an easy and inexpensive way to transfer death benefits to a minor through the Idaho Uniform Transfers to Minors Act (UTMA). This law enables you to nominate a custodian, and substitute custodian, for your minor beneficiary, and authorizes PERSI to pay your death benefit to the custodian. To nominate a custodian for a minor beneficiary, fill out page 2 of this form.
- If you use the UTMA to nominate a custodian for your minor beneficiary, be aware that the legal age of majority under the UTMA is 21, even though the statutory age of majority in Idaho is 18. If you die before your beneficiary is 21 years of age, the money will go to and remain in the custodian's care until the beneficiary reaches age 21.
- Always provide full names (Mary Elizabeth Smith, **not** Mary Smith). For a married woman, use her full name (Mary Elizabeth Smith, **not** Mrs. Bob Smith). Include the relationship to you.
- This beneficiary designation is for PERSI Base Plan and Choice 401(k) Plan death benefits **only**. Any designations you make for a will or an insurance policy do not substitute for the PERSI beneficiary designation.
- Submit a new *Beneficiary Designation* (RS115) to PERSI if your marital status changes.
- Complete a *Member Name Change* (RS111) if your name changes. If you are an active member, (working for a PERSI employer and making contributions) give the form to your payroll clerk. If not, send the form to PERSI.
- You can change your designations at any time by submitting a new *Beneficiary Designation* (RS115) to PERSI.
- If you make an error, initial and date any corrections.

### Minor Children, Trusts, Wills, and Charities as Beneficiaries

- **Minor children.** To designate a minor child as a primary or secondary beneficiary, you should consider transferring the money to a custodian for the child under the provisions of the Idaho Uniform Transfers to Minors Act (UTMA). Using PERSI form RS115 page 2 meets the UTMA requirements.
- **Trusts.** If you want to designate your Living Trust, show the date of the trust agreement and the name(s) of the Trustee(s). If a bank or trust company is the Trustee, attach a separate document containing the Trustee's address. Provide PERSI with a copy of the trust's registration, if available. The trust must have a tax ID number.
- **Wills.** Write "the Executor of my Estate" or "the Administrator of my Estate" to designate your estate as beneficiary. Do not name the executor, because the executor will be appointed later by the court.
- **Charities.** You can name a specific charity as beneficiary. For more information about payment of death benefits to charities, PERSI recommends that you consult with a qualified attorney.

### Example 1

Primary Beneficiary or Beneficiaries					
Name	Social Security or Tax ID Number	Date of Birth	Relationship to You	Benefit %	Nominate a custodian under the Idaho UTMA
Phillip Lee Thompson	000-01-0011	07-11-1937	Spouse	100.0%	<input type="checkbox"/> Check this box and go to page 2.
					<input type="checkbox"/> Check this box and go to page 2.

Secondary Beneficiary or Beneficiaries					
Name	Social Security or Tax ID Number	Date of Birth	Relationship to You	Benefit %	Nominate a custodian under the Idaho UTMA
John Allen Smith	000-08-0025	01-09-1997	Son	80.0%	<input type="checkbox"/> Check this box and go to page 2.
Rebecca Joan Smith	000-02-0220	01-02-1958	Sister	20.0%	<input type="checkbox"/> Check this box and go to page 2.

### Example 2

Primary Beneficiary or Beneficiaries					
Name	Social Security or Tax ID Number	Date of Birth	Relationship to You	Benefit %	Nominate a custodian under the Idaho UTMA
Sally Jones	000-03-0033	08-21-1994	Daughter	34.0%	<input checked="" type="checkbox"/> Check this box and go to page 2.
Alice Jones	000-04-0044	11-14-1991	Daughter	33.0%	<input checked="" type="checkbox"/> Check this box and go to page 2.
Andrew Jones	000-05-0055	02-29-1987	Son	33.0%	<input type="checkbox"/> Check this box and go to page 2.

Secondary Beneficiary or Beneficiaries					
Name	Social Security or Tax ID Number	Date of Birth	Relationship to You	Benefit %	Nominate a custodian under the Idaho UTMA
The administrator of my estate			Estate	100.0%	<input type="checkbox"/> Check this box and go to page 2.
					<input type="checkbox"/> Check this box and go to page 2.