



Choosing the Contributory Death Benefit for Retired Members



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Section A. Please review y	our	personal i	nformation.				
FIRST NAME	МІ						SSN
MAILING ADDRESS							MEMBER ID
CITY		STATE	ZIP CODE	Т	ELEPHONE	NO.	DATE OF BIRTH
RETIREMENT SYSTEM						EFFECTIVE	RETIREMENT DATE
Section B. Please review a	sum	nmary of t	he Contribu	itory D	eath Bene	fit for Re	tired Members.
If this optional coverage is chosen, spouse, or if not survived by a spous Should a covered member's death o member has made the required more death occur prior to the first day of monthly contributions, a lump-sun rannually, shall be payable. Section C. If declining, ple	e, to to cour of ly of he may read a second	he administron or after the contributions of the contribution of t	e first day of the anim -sum of the 4th notes member's the formation. The your signates are the formation of the	or of the ne month payment on the tal continuation.	member's es n following the coverage of bution to ge	tate, or colle e 24th mont shall I e pay which mem	ector of funds for the estate. The of coverage for which the lable Should the member's by has made the required er st, at 6.5% compounded
I acknowledge that I am declining	g my c	only lifetime o	opportunity to c	hoose th	his optional c	overage und	der this Retirement System.
Signature							_ Date
I choose core age under the core understand that the Retirement I understand that the Retirement	Syste	ory Denti Bo	must receive	this for	n by	ıbr	de e acomont n.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O
governing the Retirement System I understand that the monthly contributions are due on the 25th	n shou contrik	ild my age c outions will	hange by the e	ffective	date of cover	age of this b	enefit.
I understand that if my benefit is			reason I will no	nt have t	he choice to	reinstate it	
I understand that I cannot name in Section E, is the beneficiary of my administrator or executor of n	a ben f this b	neficiary, and i	that my survivif I do not have	ing spo	use at my de se at the time	ath, not ned	
Signature							Date
Section E. Please tell us a	bout	vour curr	ent marital	status			
What is your marital status? Sing						rated (not d	ivorced) for months
If you are married or separated, plea			· ·	as of the			n Section D.
FIRST NAME	MI	LAST NAME			SSN (IF	KNOWN)	DATE OF BIRTH
MAILING ADDRESS				CITY			STATE ZIP CODE

Please submit this form to the address below or fax it to (919) 508-5350. Thank you.

N.C. Department of State Treasurer, Retirement Systems Division 325 North Salisbury Street, Raleigh, North Carolina 27603-1385 (919) 807-3050 in the Raleigh area or (877) 627-3287 toll free www.myncretirement.com

REV 20071009

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Guides to Choosing the Contributory Death Benefit for Retired Members

North Carolina Retirement Systems

Guide A. What is the Contributory Death Benefit?

What is the Contributory Death Benefit?

The Contributory Death Benefit is an optional benefit that gives the retiree an opportunity to provide a one-time death benefit, up to the amount of \$10,000. It is entirely optional, and retirees who choose to participate pay for the cost of the coverage.

Who is eligible?

You are eligible to participate in the Contributory Death Benefit if you are retiring for the first time in one of the following retirement systems:

- •Teachers' and State Employees' Retirement System
- Local Governmental Employees' Retirement System
- Consolidated Judicial Retirement System
- Legislative Retirement System

The Retirement Systems Division must receive your Form 333 (Choosing the Contributory Feath Briefit) Lithin, 0 calculated days of the effective retirement data of your first retirement whether a disability or service at the service of the system. If you are retiring from more than one system, a roun 330 is required or each system. Retirement law allows you only one opportunity to choose this coverage under each retirement system.

Recipients of benefits under the Disability Income Plan of North Carolina are not eligible to participate until they convert to a service retirement.

Who is the beneficiary?

The law has designated your spouse at the time of your death as the recipion of the benefit. If you have no spouse, the benefit will be haid to you legal representative (usually the administrator or the executor of your estate, or collector of funds for your estate). The law does not allow you to choose any other beneficiary. Regardless, this benefit may help those who survive you to cover funeral costs and make transitions. Please ask your spouse or executor of your estate to report your death to the Retirement Systems Division with your death certificate.

What amount will be payable at my death?

The amount payable at your death depends on how soon your death follows your effective date of participation in the Contributory Death Benefit. If your death occurs on or after the two-year or 24-month anniversary of your effective date of participation, the full \$10,000 will be paid.

If your death occurs prior to the two-year anniversary, your beneficiary will receive the total of the contributions you have made plus interest at 6.5% per year.

When does coverage become effective?

The effective date of coverage is determined by when the Retirement Systems Division receives your Form 333. If your

form is received on or before the 15th day of the month, your effective date of coverage will be the first day of the month. If your form is received after the 15th of the month, your effective date of coverage will be the first day of the following month.

What is the cost of participation?

The rate you must pay is based on your nearest age at the effective date of coverage. The Retirement Systems Division will deduct this amount from each monthly retirement benefit until your death.

The following table gives the monthly rate for life for those from age 50 to age 80. The rates for those over the age of 80 are available upon request.

available upon request.							
Age at Effective	Monthly Rate	Age at Effective	Age at Effective Monthly Rate				
Date	for Life_	Date _	for Life				
L ss than		6 -	\$ 22				
5	8	66	24				
51	9	67	26				
52	10	68	27				
53	10	69	29				
54	11	70	31				
55	12	71	33				
56 f	r S ² ub	m3 is	35				
57 C			51311				
58	14	74	40				
59	15	75	43				
60	16	76	46				
61	17	77	49				
62	18	78	52				
63	20	79	56				
64	21	80	59				

The Retirement Systems Division reserves the right to change this rate structure for members who retire in the future and choose coverage.

Please continue to the next page.



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North Carolina Retirement Systems

Guide B. If I do choose the Contributory Death Benefit, what happens?

How will I pay for this benefit?

If there are sufficient funds in your retirement benefit, the required contribution amount will be deducted from your monthly benefit. If there are not sufficient funds in your retirement benefit, the Retirement Systems Division will send you a bill each month. Your payment is due on the 25th of each month in the form of a check or money order. The law does not allow payments in advance of the month due, automatic deductions from a bank account, or cash or credit card payments. Your first monthly contribution is due in the month coverage becomes effective, and is due and payable each month thereafter. If your benefit is cancelled due to failure to make timely payments, your contributions will not be refunded, and you will not have the choice to resume participation.

May I cancel coverage later. If I dr, v hat n pp et s?

You may request in writing that or coverage e can elled a any time. However, once you cancel your coverage, you will not have the choice to reinstate your coverage under this Retirement System. Cancellations are effective the month that written request is received if received on or before the 10th of

the month. Otherwise, cancellations are effective the following month. If the Retirement Systems Division receives this request within 90 days of the effective date of participation, then your contributions will be refunded to you. Otherwise, you will not receive a refund of your contributions.

What happens to the contributions?

The contributions are placed in the Contributory Death Benefit Trust for Retired Members separate and apart from any other trust funds. The Department of State Treasurer invests the funds for the sole purpose of paying the benefits and expenses of the Benefit. The amount due the beneficiary is not based on the performance of the funds. The North Carolina Department of State Treasurer of which the Retirement Systems Division is a part solely administers all aspects of the Contributory Death Elemenit.

How will my beneficia voca m the tenefit?

Vibon the Division receives your Form 333, we will send you a Certificate of Coverage and further guidance for you and for your beneficiary on contacting the Division to claim the benefit. The certificate does not need to be presented to claim the benefit.

Guide C. Disclaimer

The availability and amount of all benefits that the retiree might be eligible to receive in governed by Retirement System law. The information provided in this juide cannot alter movific, or otherwise change the controlling Retirement System law or other governing legal 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 hereil. In the event of a conflict between this in o mation and retirement System law, Retirement System law governs.