

FUND REGISTRATION FORM FOR BENEFICIARY DESIGNATION

Please note that BOTH SIDES of this form must be completed

The Building Trades United Pension Trust Fund – Milwaukee & Vicinity Return completed form to: PO Box 530 ● 500 Elm Grove Road, Room 300 ● Elm Grove, WI 53122-0530 (262)784-7880 or (800)433-8570

PARTICIPANT INFORMATION:								
Last Name	First Name	МІ	Social Security Number					
Address	City, State, Zip		Phone N	umber				
Date of Birth		Sex □ Male	Trade	Lo	cal Number			
		□ Iviale □ Female						
Signature (Beneficiary Designations are n	ot valid without your signature.)	Date					
I understand that by completing this form, all prior designations are revoked. I further understand that if my spouse is listed as my beneficiary for either the Death Benefit or Pre-Retirement Survivor Benefit, and we divorce, the beneficiary designation is void on the date of divorce unless I re-designate my ex-spouse as beneficiary on a Fund Registration Form after divorce.								
SPOUSE'S INFORMATION (IF MA								
Last Name	First Name	MI	Date of Birth					
Social Security Number			Date of Marriage					
PRIMARY BENEFICIARY (IES) FOU (Please name the person or persons you wish to be the list more than one primary beneficiary, the total designati divided equally among your designated beneficiaries. If	beneficiary(ies) for any Death Benefit that r ion must equal 100%. Please use whole p	nay be payable ercentages only	. If no percen	ntages are specified, the	proceeds will be			
Primary Beneficiary's Name and Address		Relation to You	nship	Date of Birth	Percentage (Total must equal 100%)			
Name								
Address								
City, State & Zip								
Name								
Address								
City, State & Zip								
Name								
Address								
City, State & Zip								
SECONDARY BENEFICIARY(IES) (Secondary beneficiaries will only receive a benefi								
Secondary Beneficiary's Name and Addre			nship to	Date of Birth	Percentage (Total must equal 100%)			
Name								
Address								
City, State & Zip								
Name								
Address								
City, State & Zip								
The beneficiary(ies) listed or	n this side are for any DEATH	BENEFIT t	hat may l	be payable follow	ving			

your death. Be sure to complete the reverse side of this form to designate your beneficiary(ies) for any PRE-RETIREMENT SURVIVOR BENEFIT that may be payable following your death.



If you are married and there is a Pre-Retirement Survivor Benefit payable following your death, it is automatically paid to your spouse, regardless of whom you name as beneficiary(ies) for this benefit. If you are married and divorce, the beneficiary designation is void on the date of divorce, unless you re-designate your ex-spouse as beneficiary on a Fund Registration Form after the divorce. If you are not married, and do not name a beneficiary(ies) for Pre-Retirement Survivor Benefits, it will be paid to whomever you have named as Death Benefit beneficiary(ies).

If you wish to name the same Primary and Secondary beneficiary(ies) for the Pre-Retirement Survivor Benefit as you

have listed for the Death Benefit, please check and initial here:

Initials

PRIMARY BENEFICIARY(IES) FOR PRE-RETIREMENT SURVIVOR BENEFIT

(Please name the person or persons you wish to be the beneficiary(ies) for any Pre-Retirement Survivor Benefit that may be payable from the Pension Fund in the event of your death. If you list more than one primary beneficiary, the total designation must equal 100%. Please use whole percentages only. If no percentages are specified, the proceeds will be divided equally among your designated beneficiaries. If you wish to name more than 3 primary beneficiaries, please attach a separate sheet with the required information.)

Primary Beneficiary's Name and Address	Relationship to You	Date of Birth	Percentage (Total must equal 100%)
Name			
Address			
City, State & Zip			
Name			
Address			
City, State & Zip			
Name			
Address			
City, State & Zip			

SECONDARY BENEFICIARY(IES) FOR PRE-RETIREMENT SURVIVOR BENEFIT (Secondary beneficiaries will only receive a benefit if there are no surviving primary beneficiaries.)						
Secondary Beneficiary's Name and Address	Relationship to You	Date of Birth	Percentage (Total must equal 100%)			
Name						
Address						
City, State & Zip						
Name						
Address						
City, State & Zip						

Additional Information Regarding Naming a Beneficiary:

- If you should die without naming a beneficiary and there is a lump sum Death Benefit payable, it will be paid to the first of those who survive you in the following order: your spouse; your surviving children and descendants of your deceased children; your parents; your brothers and sisters. If none of these survive you, the Death Benefit will be paid to the administrator or executor of your estate, unless payable under WI Stat. 109.03(3) or 867.01 through 867.03.
- If you are married, your beneficiary for any Pre-Retirement Survivor Benefit that may be payable is automatically your surviving spouse. If you are not married and die without designating a Pre-Retirement Survivor beneficiary, any benefit payable will go to the person(s) you named as your Death Benefit beneficiary(ies). If you have not named a Death Benefit beneficiary(ies), or your named beneficiary(ies) pre-deceases you, the Survivor Benefit will be paid to the first of those who survive you in the following order: your surviving children and descendants of your deceased children; your parents; your brothers and sisters. If none of these survive you, the Death Benefit will be paid to the administrator or executor of your estate, unless payable under WI Stat. 109.03(3) or 867.01 through 867.03.
- If your spouse is named as your Death Benefit or Pre-Retirement Survivor beneficiary, and you divorce, the beneficiary designation is void on the date of divorce. If you want your ex-spouse to remain as beneficiary, a new Pension Fund Registration Form must be completed after the divorce to re-designate your ex-spouse as your beneficiary for Death Benefits or Pre-Retirement Survivor Benefits.
- You may designate your Estate or a Trust as your beneficiary. Indicate "My Estate" or "John Doe, Irrevocable Trust dated MM/DD/YYYY" as the beneficiary.