

What You Need to Know About



Changing Your Beneficiary or Monthly Benefit After Retirement

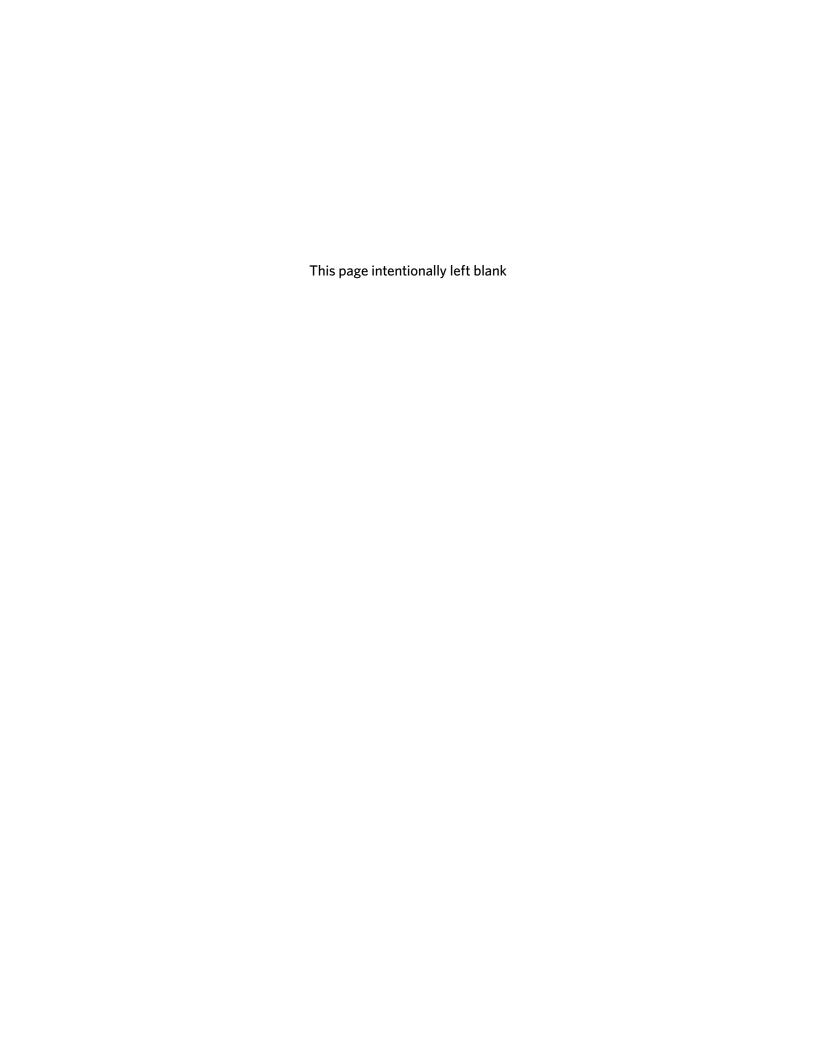
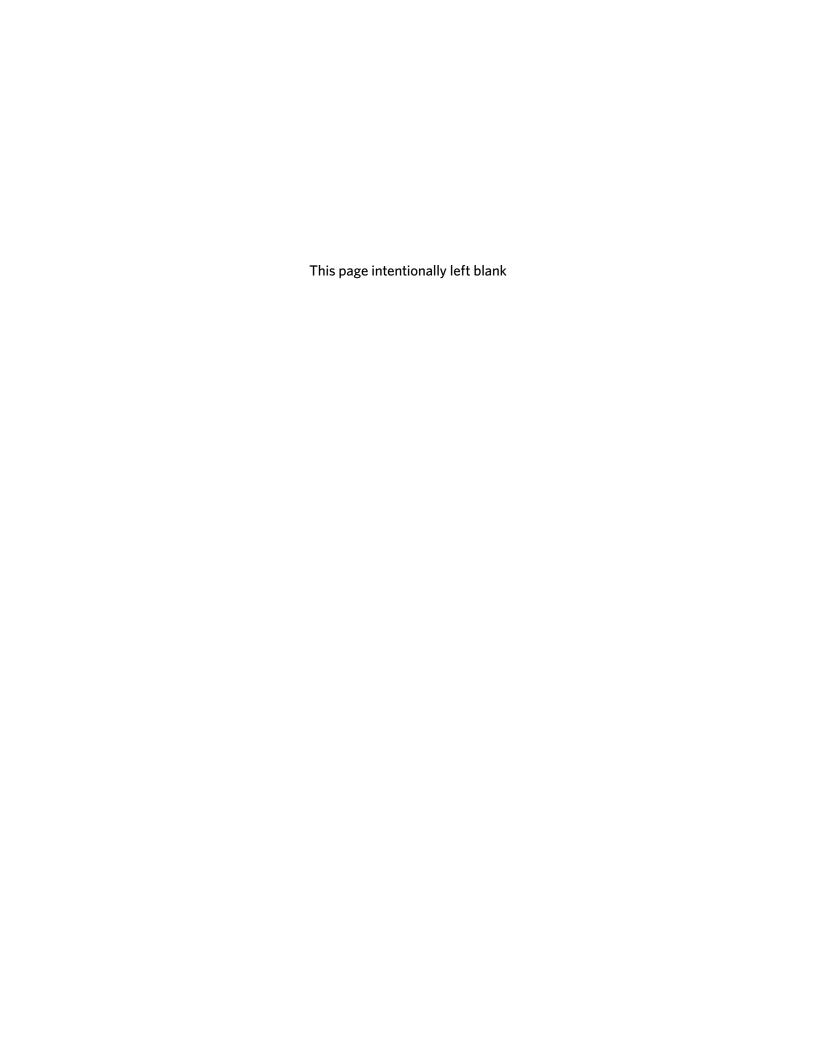


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INTRODUCTION

After you retire, certain life events can impact your CalPERS benefits. This publication explains what you need to consider if one of these events happens to you. Depending on the type of event, you may wish to:

- · Add or change your beneficiary designation,
- · Remove a beneficiary designation, or
- Request a benefit allowance increase.

The changes you're eligible for depend on the life event, the retirement payment option you chose at retirement, and the type of change you want to make.

When you retired, you may have designated a beneficiary (or beneficiaries) to receive a retired lump-sum benefit, a continuing monthly benefit, or both. If it's been more than 30 days since you received your first retirement check, you may be limited on the type of change you can make.

As you read this publication, it will be helpful to know who you named as your beneficiary to receive the retired lump-sum benefit, the retirement payment option you chose, and who you named as your retirement payment option beneficiary, if any. If you do not have this information, you can find it by logging in to your personal myCalPERS account at my.calpers.ca.gov or call us toll free at 888 CalPERS (or 888-225-7377).

ADD OR CHANGE A LUMP-SUM BENEFICIARY

A lump-sum benefit is a one-time payment paid to your named beneficiary (or beneficiaries) upon your death. You can add or change a lump-sum beneficiary at any time. It's important to keep your beneficiary designation up to date.

The different lump-sum benefits are:

· Retired Death Benefit

- The amount paid ranges from \$500 to \$5,000 depending on your employer's contract with us.
- The highest amount contracted will be paid to your beneficiary if you had service with more than one employer.
- If you last worked with another California retirement system that provides a similar benefit, then the CalPERS retired death benefit is not paid.

· Return of Remaining Contributions

If you selected the retirement payment option that provides a lump-sum payout, your remaining member contributions, if any, will be paid to your named beneficiary. In most cases, no member contributions remain after approximately 10 years of retirement, which means no payment will be made to your beneficiary.

• Temporary Annuity Balance

If you elected to receive a temporary annuity when you retired and you die before your temporary annuity payments stop, a lump-sum payment for the current value of the remaining payments will be paid to your beneficiary. See *A Guide to Your CalPERS Temporary Annuity* (PUB 13) for more information about temporary annuity.

If there is not a valid beneficiary designation in effect at the time of your death, lump-sum benefits will be paid to your **statutory beneficiary** in the order determined by law:

- Spouse or domestic partner; or if none,
- Children; or if none,
- Parent(s); or if none,
- Brother(s) and sisters(s); or if none,
- Your probated estate; or if not probated,
- Your trust; or if none,
- Stepchildren; or if none,
- Grandchildren, including step-grandchildren; or if none,
- Niece(s) and nephews(s); or if none,
- · Great-grandchildren; or if none,
- Cousins.

A statutory beneficiary is defined by law rather

than designated in a will, or on an annuity or life insurance policy. An existing lump-sum beneficiary designation is automatically revoked with any of the following:

- Marriage
- Domestic partnership
- Dissolution or annulment of marriage, or termination of a
 domestic partnership. (If you change your designation after
 the start of one of these legal processes, your designation is
 not revoked when the legal process is finalized.)
- · Birth or adoption of a child

Lump-sum benefits may be considered community property, and it is up to the court to make a final determination. If you are legally married or in a domestic partnership, your spouse or domestic partner may be entitled to his or her community property share even if you name someone other than your spouse or domestic partner to receive the benefit.

If you are a **nonmember** or if you marry or establish a registered domestic partnership **after** you retire, your spouse or domestic partner generally does not have a community property interest in your death benefits.

Change your lump-sum beneficiary designation any time through your personal myCalPERS account or complete and mail the *Post-Retirement Lump-Sum Beneficiary Designation* or *Post-Retirement Nonmember Lump-Sum Beneficiary Designation* form. You can find these forms in this publication or on our website at www.calpers.ca.gov.

When Your Changes Take Effect

If you change your lump-sum beneficiary designation in your personal myCalPERS account, and you are required to submit the *Spousal/Domestic Partner Notification* form, your change takes effect once the form is received. Otherwise, your beneficiary designation is effective immediately. If you submit a *Post-Retirement Lump-Sum Beneficiary Designation* or *Post-Retirement Nonmember Lump-Sum Beneficiary Designation* form, the change takes effect when it is processed and we will mail you an acknowledgment letter. Please allow 30 days for us to process your new lump-sum beneficiary designation.

A **nonmember** is the former spouse of a CalPERS member whose awarded interest is transferred into his or her own separate CalPERS account.

ADD OR CHANGE A PAYMENT OPTION BENEFICIARY

When you retired, you chose either a payment option for your lifetime only, or one that would leave a lump-sum benefit, a continuing monthly benefit, or a combination of the two, to a named beneficiary (or beneficiaries). If your circumstances have since changed and you want to make a change to your original selection, you may only do so if you have a qualifying life event. This is called the **Modification of Original Election at Retirement** process.

Qualifying life events may be:

- Marriage
- · Domestic partnership
- · Death of your beneficiary
- Annulment of marriage
- Being awarded your entire CalPERS interest upon
 - Divorce
 - Legal separation
 - Termination of domestic partnership

Good to Know!

- If you named someone as your lifetime beneficiary, then later marry or enter into a domestic partnership with that same person, this is not a qualifying event because he or she is already your lifetime beneficiary.
- If you want to name a new lifetime beneficiary due to marriage or registration of domestic partnership, you must name your new spouse or domestic partner as the lifetime beneficiary.
- If you are a nonmember, then you do not need to be awarded total interest in your CalPERS benefit.
- If you were required by court order at the time of retirement to designate your former spouse or former legally recognized domestic partner as a Court-Ordered Community Property Option 4 beneficiary, you are required to maintain your former spouse or domestic partner as the Court-Ordered Community Property Option 4 beneficiary. You may only change your beneficiary for your portion of the benefit.

When Your Changes Take Effect

If you make an election to change your original retirement selection within 12 months of the qualifying event, the change takes effect the first day of the month following receipt of your completed election document.

Example: Your qualifying event date was May 1, 2021, and you submitted your completed election document on July 15, 2021. The effective date of change would be August 1, 2021.

Your **lifetime beneficiary** is the person you named to receive a continuing monthly benefit upon your death.

If you make an election to change your original retirement selection **more than** 12 months after the qualifying event, the change does not take effect until 12 months after you make the election. By law, both you and your new beneficiary must be living on the **deferred** election effective date or the change cannot be processed.

Example: Your qualifying event date was January 1, 2020, and you submitted your completed election document on February 12, 2021. Your deferred election effective date would be March 1, 2022.

How Your Retirement Allowance Is Impacted

When you add or change a payment option beneficiary through the Modification of Original Election at Retirement process, your current retirement benefit is reduced to fund your new beneficiary's future benefit. How much it's reduced depends on:

- · Your original payment option, and
- Your and your beneficiary's age and life expectancy at the time of election.

Any cost-of-living adjustment and Purchasing Power Protection Allowance is also recalculated using your new lower base allowance.

Estimate Your New Retirement Allowance

Before you can make an election to add or change a payment option beneficiary, you must obtain an estimate of your new retirement allowance. To do this, go to my.calpers.ca.gov and follow the prompts from the Retirement tab to Change Retirement Benefit.

You will be able to create and save estimates based on different life event and beneficiary scenarios. You can then elect to make the change online or you can print and mail us your signed election document. You'll need to submit supporting life event and beneficiary documentation for us to process your request.

If you are unable to create an estimate through your myCalPERS account, call us toll free at **888 CalPERS** (or **888**-225-7377) and we will mail you a *Modification of Option and/or Life Option Beneficiary Estimate Request* form.

Important!

If you choose to modify your original election at retirement, your new election is irrevocable. However, should you have a future qualifying event, such as the death of your beneficiary, you may be able to modify your allowance again and name a new beneficiary.

Base allowance is your monthly retirement allowance prior to any cost-of-living adjustments.

Do You Have a Qualifying Life Event?

Refer to the following charts to see if you're eligible to make a change to your original retirement option. For a description of the retirement options you may be eligible to choose from, see the Retirement Option Reference Charts on pages 16–18.

| Retirement Date <i>Before</i> January 1, 2018 | | |
|--|--|---|
| If your current retirement payment option is | And the life event is | Then you |
| Unmodified AllowanceOption 1 | Death of your current beneficiary Annulment of marriage You are awarded your entire CalPERS interest upon Divorce Legal separation Termination of domestic partnership | Do not have a qualifying life event that allows you to change your retirement payment option. Remember: You can change your Option 1 beneficiary at any time. |
| Unmodified Allowance Option 1 Option 2 Option 2W Option 3 Option 3W Option 4 – 2W & Option 1 combined Option 4 – 3W & Option 1 combined Any other Option 4 types | Non-spouse or non-domestic partner beneficiary disclaims their entitlement to your CalPERS benefits | Do not have a qualifying life event that allows you to change your retirement payment option. Remember: You can change your Option 1 beneficiary at any time. |
| Unmodified Allowance | Marriage* Registration of domestic partnership | Can change your retirement payment option to: Option 1** Option 2 Option 2W Option 3 Option 3W Option 4 – 2W & Option 1 combined** Option 4 – 3W & Option 1 combined ** Any other Option 4 types |

^{*} If you were married at retirement and later divorced, you must have first been awarded 100% of your CalPERS retirement.

^{**} Member contributions are depleted approximately 10 years after retirement. If you have been retired for 10 years or more, there may be no remaining contributions to be paid to a beneficiary.

| Retirement Date <i>Before</i> | January 1, 2018 (continued) | |
|--|--|--|
| If your current retirement payment option is | And the life event is | Then you |
| • Option 1 | Marriage* Registration of domestic partnership | Can change your retirement payment option to: Option 2 Option 2W Option 3W Option 3W Option 4 – 2W & Option 1 combined** Option 4 – 3W & Option 1 combined** Any other Option 4 types |
| Option 2 Option 2W Option 3 Option 3W Option 4 – 2W & Option 1 combined Option 4 – 3W & Option 1 combined Any other Option 4 types | Marriage* Registration of domestic partnership Death of your current lifetime beneficiary Annulment of marriage You are awarded your entire CalPERS interest upon Divorce Legal separation Termination of domestic partnership | Can change your retirement payment option to: Option 1** Option 2 Option 2W Option 3 Option 3W Option 4 – 2W & Option 1 combined** Option 4 – 3W & Option 1 combined** Any other Option 4 types |
| Court-Ordered Community Property Option 4 | Marriage* Registration of domestic partnership Death of your current lifetime beneficiary Annulment of marriage You are awarded your entire CalPERS interest upon Divorce Legal separation Termination of domestic partnership | Can change your retirement payment option to Court-Ordered Community Property Option 4 Option 1** Option 2W Option 3W |

 $^{^*}$ If you were married at retirement and later divorced, you must have first been awarded 100% of your CalPERS retirement.

^{**} Member contributions are depleted approximately 10 years after retirement. If you have been retired for 10 years or more, there may be no remaining contributions to be paid to a beneficiary.

| Retirement Date <i>On or After</i> January 1, 2018 | | |
|---|--|--|
| If your current retirement payment option is | And the life event is | Then you |
| Unmodified Allowance Return of Remaining Contributions Option 1 | Death of your current beneficiary Annulment of marriage You are awarded your entire CalPERS interest upon Divorce Legal separation Termination of domestic partnership | Do not have a qualifying life event that allows you to change your retirement payment option. Remember: You can change your Return of Remaining Contributions Option 1 beneficiary at any time. |
| Unmodified Allowance Return of Remaining Contributions Option 1 100 Percent Beneficiary Option 2 100 Percent Beneficiary Option 2 with Benefit Allowance Increase 50 Percent Beneficiary Option 3 50 Percent Beneficiary Option 3 with Benefit Allowance Increase Flexible Beneficiary Option 4 | Non-spouse or non-domestic partner beneficiary disclaims their entitlement to your CalPERS benefits | Do not have a qualifying life event that allows you to change your retirement payment option. Remember: You can change your Return of Remaining Contributions Option 1 beneficiary at any time. |

| Retirement Date On or After January 1, 2018 (continued) | | |
|---|--|--|
| If your current retirement payment option is | And the life event is | Then you |
| Unmodified Allowance | Marriage* Registration of domestic partnership | Can change your retirement payment option to: Return of Remaining Contributions Option 1** 100 Percent Beneficiary Option 2** 100 Percent Beneficiary Option 2 with Benefit Allowance Increase 50 Percent Beneficiary Option 3** 50 Percent Beneficiary Option 3 with Benefit Allowance Increase Flexible Beneficiary Option 4 |
| Return of Remaining Contributions Option 1 | Marriage* Registration of domestic partnership | Can change your retirement payment option to: • 100 Percent Beneficiary Option 2** • 100 Percent Beneficiary Option 2 with Benefit Allowance Increase • 50 Percent Beneficiary Option 3** • 50 Percent Beneficiary Option 3 with Benefit Allowance Increase • Flexible Beneficiary Option 4 |

 $^{^{\}ast}$ If you were married at retirement and later divorced, you must have first been awarded 100% of your CalPERS retirement.

^{**} You must have had a non-spouse or non-domestic partner beneficiary or have been awarded your entire CalPERS interest upon a divorce, legal separation, or termination of domestic partnership.

| If your current retirement payment option is | And the life event is | Then you |
|---|--|---|
| 100 Percent Beneficiary Option 2 100 Percent Beneficiary Option 2 with Benefit Allowance Increase 50 Percent Beneficiary Option 3 50 Percent Beneficiary Option 3 with Benefit Allowance Increase Flexible Beneficiary Option 4 | Marriage* Registration of domestic partnership Death of your current lifetime beneficiary Annulment of marriage You are awarded your entire CalPERS interest upon Divorce Legal separation Termination of domestic partnership | Can change your retirement payment option to: Return of Remaining Contributions Option 1* 100 Percent Beneficiary Option 2** 100 Percent Beneficiary Option 2 with Benefit Allowance Increase 50 Percent Beneficiary Option 3** 50 Percent Beneficiary Option 3 with Benefit Allowance Increase Flexible Beneficiary Option 4 |
| Court-Ordered Community Property Option 4 Unmodified Allowance Return of Remaining Contributions Option 1 Specific Percentage or Specific Dollar Amount | Marriage* Registration of domestic partnership Death of your current lifetime beneficiary Annulment of marriage You are awarded your entire CalPERS interest upon Divorce Legal separation Termination of domestic partnership | Can change your retirement payment option to Court-Ordered Community Property Option 4: Return of Remaining Contributions Option 1: Specific Percentage or Specific Dollar Amount |

 $^{^{\}ast}$ If you were married at retirement and later divorced, you must have first been awarded 100% of your CalPERS retirement.

^{**} You must have had a non-spouse or non-domestic partner beneficiary or have been awarded your entire CalPERS interest upon a divorce, legal separation, or termination of domestic partnership.

REMOVE A BENEFICIARY

You can remove a lump-sum beneficiary at any time, but you can only remove a lifetime beneficiary under limited circumstances.

If you named your spouse or registered domestic partner as your lifetime beneficiary, you may only remove him or her if you get an annulment in which the court confirms the annulment, divorce, or legal separation, or you terminate your domestic partnership and you are awarded 100% of your CalPERS retirement.* Otherwise, he or she will still receive a monthly lifetime benefit upon your death.

To remove a former spouse or registered domestic partner, send us a written request along with a copy of the court document validating your annulment or the judgment that awarded you full interest in your CalPERS retirement.

If you named someone other than a spouse or registered domestic partner as your lifetime beneficiary, you may remove this beneficiary only if he or she waives entitlement to his or her benefit. The beneficiary must sign a *Non-Spouse or Non-Domestic Partner Disclaimer* form. The signature must be notarized and the form returned to us for approval. Call us toll free at 888 CalPERS (or 888-225-7377) to request this form.

To remove a non-spouse or non-domestic partner, submit a written request along with the completed *Non-Spouse or Non-Domestic Partner Disclaimer* form.

Mail your written request and supporting documents to:

CalPERS Retirement Benefit Services Division P.O. Box 942711
Sacramento, CA 94229-2711

Good to Know!

Removing a lifetime beneficiary does not change your retirement allowance. Also, your past beneficiary designations are maintained in our system for historical purposes; therefore, we are unable to remove the names of your past beneficiary designations from your myCalPERS account.

^{*} If you are a nonmember, then you do not need to be awarded total interest in your CalPERS benefit.

ARE YOU ELIGIBLE FOR A BENEFIT ALLOWANCE INCREASE?

You increase to the Unmodified Allowance only if you elected:

- Option 2 or Option 3 if you retired prior to January 1, 2018, or
- 100 Percent Beneficiary Option 2 with Benefit Allowance Increase, or
- 50 Percent Beneficiary Option 3 with Benefit Allowance Increase if you retired on or after January 1, 2018, and one of the following life events happen:
 - Your current life option beneficiary dies.
 - You are awarded your entire CalPERS interest* upon divorce, legal separation, or termination of your domestic partnership.
 - Your marriage is annulled.
 - Your non-spouse or non-domestic partner disclaims entitlement to his or her benefit. Call us toll free at 888 CalPERS (or 888-225-7377) to request a Non-Spouse or Non-Domestic Partner Disclaimer form. Your beneficiary's signature must be notarized and the form returned to us with your Request for Benefit Allowance Increase form.

You can find the *Request for Benefit Allowance Increase* form in this publication or on our website at www.calpers.ca.gov.

When Your Changes Take Effect

The effective date of your benefit allowance increase adjustment depends on your qualifying life event.

- Death of Your Current Life Option Beneficiary
 - The effective date is the first of the month following your beneficiary's date of death.
- Dissolution of Marriage, Termination of Domestic Partnership, or Legal Separation
 - The effective date is the first of the month after we receive all required legal documentation, not when the event actually occurred.
- Annulment of Marriage
 - The effective date is the first of the month after we receive all required legal documentation, not when the event actually occurred.
- Non-Spouse or Non-Domestic Partner Beneficiary Disclaimer
 - The effective date is the first of the month after we receive an acceptable form.

Our processing time frame is 30 days from the date we receive the required documentation.

your death.

The **Unmodified Allowance**

benefit. This is the amount

had not named a beneficiary

you would have received

when you retired if you

to receive a benefit upon

is the highest retirement

^{*} If you are a nonmember, then you do not need to be awarded total interest in your CalPERS benefit.

HEALTH COVERAGE FOR YOUR BENEFICIARY

If you have CalPERS health coverage for you and your dependents, you must immediately notify us if you:

- Divorce or annul your marriage,
- · Terminate your domestic partnership, or
- Suffer the death of a spouse or domestic partner (or other dependent).

Incorrect health premiums may be deducted from your monthly benefit if you do not notify us of changes that affect coverage for your dependents.

Important!

If you want your new spouse or domestic partner to be eligible for continued health or dental coverage upon your death, you must choose an option that provides him or her an ongoing monthly benefit. Refer to the Retirement Option Reference Charts on pages 16–18 to see which options provide an ongoing monthly benefit to a beneficiary.

Refer to the CalPERS *Health Program Guide* for more information about dependent eligibility and enrollment. You can add or delete your health dependents by logging in to your personal myCalPERS account, or you can complete and mail the *Health Benefits Plan Enrollment for Retirees* form.

All CalPERS health benefit publications and forms are available in the Forms & Publications area of our website at www.calpers.ca.gov.

RETIREMENT OPTION REFERENCE CHARTS

The following charts describe each retirement option and what it provides to your beneficiary upon your death.

| Retirement Date <i>Before</i> January 1, 2018 | |
|---|--|
| Retirement Option | Description |
| Option 1 | Upon your death, provides a lump-sum payout of any remaining member contributions in your account to one or more named beneficiaries. This option does not provide your beneficiary an ongoing monthly benefit. |
| Option 2 | Provides 100 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. If your beneficiary dies before you, or you have another qualifying event, your benefit will increase to the Unmodified Allowance. |
| Option 2W | Provides 100 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. |
| Option 3 | Provides 50 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. If your beneficiary dies before you, or you have another qualifying event, your benefit will increase to the Unmodified Allowance. |
| Option 3W | Provides 50 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. |
| Option 4 | Provides an ongoing monthly benefit of a specific percentage or specific dollar amount of your Unmodified Allowance to one or more named beneficiaries upon your death. |
| Option 4 – 2W & 1 Combined | Provides 100 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. Upon both your deaths, a lumpsum payout of any remaining member contributions in your account will be paid to one or more named secondary beneficiaries. |
| Option 4 – 3W & 1 Combined | Provides 50 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. Upon both your deaths, a lump-sum payout of any remaining member contributions in your account will be paid to one or more named secondary beneficiaries. |

| Retirement Date <i>Before</i> January 1, 2018 (continued) | |
|---|---|
| Retirement Option | Description |
| Option 4 – Specific Dollar | Provides an ongoing monthly benefit specific dollar amount of your retirement allowance to one or more named beneficiaries upon your death. |
| Option 4 – Specific Percentage | Provides an ongoing monthly benefit of a specific percentage amount of your retirement allowance to one beneficiary. |
| Option 4 – Multiple Lifetime Beneficiaries | Provides an ongoing monthly benefit of a specific percentage or specific dollar amount of your retirement allowance to multiple named beneficiaries upon your death. |
| Court-Ordered Community Property Option 4/1 | Provides an ongoing monthly benefit to your nonmember spouse equal to his or her community property interest. For your remaining share, provides a lump-sum payout of any remaining member contributions in your account to one or more named beneficiaries. |
| Court-Ordered Community Property Option 4/2W | Provides an ongoing monthly benefit to your nonmember spouse equal to his or her community property interest. For your remaining share, provides 100 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. |
| Court-Ordered Community Property Option 4/3VV | Provides an ongoing monthly benefit to your nonmember spouse equal to his or her community property interest. For your remaining share, provides 50 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. |

| Retirement Date <i>On or After</i> January 1, 2018 | | |
|---|---|--|
| Retirement Option | Description | |
| Return of Remaining Contributions Option 1 | Upon your death, provides a lump-sum payout of any remaining member contributions in your account to one or more named beneficiaries. This option does not provide your beneficiary an ongoing monthly benefit. | |
| 100 Percent Beneficiary Option 2 | Provides 100 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. Upon both your deaths, a lump-sum payout of any remaining member contributions in your account will be paid to one or more named secondary beneficiaries. | |
| 100 Percent Beneficiary Option 2 with Benefit Allowance Increase | Provides 100 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. If your beneficiary dies before you, or you have another qualifying event, your benefit will increase to the Unmodified Allowance. | |
| 50 Percent Beneficiary Option 3 | Provides 50 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. Upon both your deaths, a lump-sum payout of any remaining member contributions in your account will be paid to one or more named secondary beneficiaries. | |
| 50 Percent Beneficiary Option 3 with Benefit Allowance Increase | Provides 50 percent of the option portion of your ongoing monthly benefit to your named beneficiary upon your death. If your beneficiary dies before you, or you have another qualifying event, your benefit will increase to the Unmodified Allowance. | |
| Flexible Beneficiary Option 4 | Provides an ongoing monthly benefit of a specific percentage or specific dollar amount of your retirement benefit to one or more named beneficiaries upon your death. | |
| Court-Ordered Community Property Option 4/Return of Remaining Contributions Option 1 | Provides an ongoing monthly benefit to your nonmember spouse equal to his or her community property interest. For your remaining share, provides a lump-sum payout of any remaining member contributions in your account to one or more named beneficiaries. | |
| Court-Ordered Community Property Option 4/Specific Percentage or Specific Dollar Amount | Provides an ongoing monthly benefit to your nonmember spouse equal to his or her community property interest. For your remaining share, provides an ongoing monthly benefit of a specific percentage or specific dollar amount of your retirement benefit to one or more named beneficiaries upon your death. | |

INSTRUCTIONS FOR COMPLETING FORMS

Post-Retirement Lump-Sum Beneficiary Designation

Section 1 – Information About You

Enter your full name as it appears on your Social Security card.

If you have changed your name, you must provide us a photocopy of the document validating the change (marriage certificate, court order, etc.). Additionally, the IRS requires us to obtain a photocopy of your updated Social Security card with your new name before we can stop using your former name.

- Enter your Social Security number or CalPERS ID.
- Enter your daytime and alternate phone numbers and your address.

Section 2 – Your Lump-Sum Benefit Type

- Select only one of the check boxes.
- If you want to designate different beneficiaries for the different types
 of lump-sum benefits (Retired Death Benefit, Return of Remaining
 Contributions, or Temporary Annuity Balance), see the instructions
 on the *Post-Retirement Lump-Sum Beneficiary Designation* form for
 more information.

Section 3 – Your Primary Beneficiary Information

- A primary beneficiary is the person you name to receive the lump-sum benefits upon your death.
- If you want to name more than four primary beneficiaries, see the instructions on the *Post-Retirement Lump-Sum Beneficiary Designation* form for more information.
- Your beneficiary can be:
 - Any person regardless of their relationship to you. You cannot designate a guardian to receive benefits for another person.
 - A class of next-of-kin as a group. For example, you can list your "grandchildren" or "siblings" instead of writing out individual names.
 - A corporation that is registered in any state with the Secretary of State.
 - Your estate. CalPERS can only pay to your estate if it is probated.
 - Your trust. Provide the title and date of your trust, and the name and address of the person who has a copy of the document. Do not name the trustee.

If you designate a minor child as your beneficiary and the child is still a minor when the benefit becomes payable, the surviving parent can claim the child's death benefit without a court order if the child is in his or her care. If the child is not in the parent's custody, we will request a court order that appoints someone as guardian of the child's estate. Or you may choose to complete a *California Uniform Transfers to Minors Act – Nomination for Custodian of Minor* form to nominate a custodian to claim any benefits that may become payable to your minor child. Do not name the guardian or custodian as your beneficiary; just name the child.

Find the *Nomination for Custodian of Minor* form in the Forms & Publications area of our website at www.calpers.ca.gov.

Section 4 - Your Secondary Beneficiary Information

- The benefit is paid to your named secondary beneficiary upon the death of your primary beneficiary or beneficiaries.
- If you want to name more than three secondary beneficiaries, see the instructions on the *Post-Retirement Lump-Sum Beneficiary Designation* form.

Section 5 – Spousal Consent to Beneficiary Designation

- You must review and sign this acknowledgment if you are married or in a registered domestic partnership and you name someone other than your spouse or domestic partner as a beneficiary to receive an ongoing monthly benefit or lump-sum benefits that may be payable upon your death.
- If your spouse or registered domestic partner consents to your beneficiary designation, he or she must sign this section.

Section 6 – Your Signature

- Indicate if you are married or have a registered domestic partner.
- This section must be completed or your form will not be processed.

Section 7 – Your Spouse's or Registered Domestic Partner's Signature

- Your spouse or registered domestic partner must sign if you did not designate him or her as the sole primary beneficiary for any payable lump-sum benefits.
- You must complete a Justification of Absence of Spouse's or Registered
 Domestic Partner's Signature form if your spouse or registered domestic
 partner is unable to sign.



Post-Retirement Lump-Sum Beneficiary Designation

888 CalPERS (or 888-225-7377) • TTY: (877) 249-7442 • Fax: (800) 959-6545

Complete this form if you are retired and you wish to designate a beneficiary or change your existing beneficiary designation for lump-sum benefits. For more information regarding lump-sum benefits, refer to the publication *Changing Your Beneficiary or Monthly Benefit After Retirement* (PUB 98).

Please print clearly. We are unable to process this form if there are erasures or corrections. See the last page of this form for detailed instructions.

| Section 1 | Information About You | |
|---|--|--|
| _ | Your Name (First Name, Middle Initial, Last Name) | Social Security Number or CalPERS ID |
| | () () Daytime Phone Alternate Phone | |
| | Address | |
| | City | State ZIP |
| Section 2 | Your Lump-Sum Benefit Type | _ |
| Please see the last | Select one of the check boxes below. | |
| page of this form for instructions on how to name different | ☐ I want to name one or more beneficiaries to receive an equal share or specific lump-sum benefits in the event of my death. | ied percentage (%) of any payable |
| beneficiaries for each payable lump-sum benefit. | ☐ I want to name separate beneficiaries for each of the following payable lump of my death. Select the benefit type that applies to you: | -sum benefits in the event |
| iding dum benefit. | ☐ Retired Death Benefit ☐ Return of Remaining Contributions | ☐ Temporary Annuity Balance |
| Section 3 | Your Primary Beneficiary Information | |
| Please see the last | | |
| page of this form for instructions on how | Name of Primary Beneficiary (First Name, Middle Initial, Last Name) % | Birth Date (mm/dd/yyyy) |
| to name more than | Relationship to You Percentage of Benefit | Social Security Number or CalPERS ID |
| four primary beneficiaries. | Address | |
| If a parcentage (%) is | | |
| If a percentage (%) is entered, make sure the total equals 100%. | City | State ZIP |
| total oqualo 1007. | Name of Primary Beneficiary (First Name, Middle Initial, Last Name) | Birth Date (mm/dd/yyyy) |
| | % | |
| | Relationship to You Percentage of Benefit | Social Security Number or CalPERS ID |
| | Address | |
| | City | State ZIP |
| | y | EII |

Section 3 continues on page 2.

| Name of Member | Social Security Number or CalPERS ID |
|----------------|--------------------------------------|
| | |

| 3, continued | Your Primary Beneficiary | • | |
|--------------|--|---|--|
| | Name of Primary Beneficiary (First Name, M | iddle Initial Leet Name) | Pirth Date (mm/dd/mm) |
| | Name of Filliary beneficiary (First Name, W | uule IIItiai, Last Naille) | Birth Date (mm/dd/yyyy) |
| | Relationship to You | Percentage of Benefit | Social Security Number or |
| | Address | | |
| | City | | State ZIP |
| | | | |
| | Name of Primary Beneficiary (First Name, M | iddle Initial, Last Name) | Birth Date (mm/dd/yyyy) |
| | | <u> </u> | |
| | Relationship to You | Percentage of Benefit | Social Security Number or |
| | Address | | |
| | City | | State ZIP |
| | Your Secondary Benefici | ary Information | |
| last | Name of Secondary Beneficiary (First Name, | Middle Initial Leet Name) | Birth Date (mm/dd/yyyy) |
| | waite of Secondary Beneficiary (First Name, | % | |
| | Relationship to You | Percentage of Benefit | Social Security Number or |
| ary es. | Address | | |
| is | City | | State ZIP |
| the | | | |
| | | | |
| | Name of Secondary Beneficiary (First Name, | Middle Initial, Last Name) | Birth Date (mm/dd/yyyy) |
| | Name of Secondary Beneficiary (First Name, | | Birth Date (mm/dd/yyyy) |
| | Name of Secondary Beneficiary (First Name, Relationship to You | Middle Initial, Last Name) % Percentage of Benefit | Birth Date (mm/dd/yyyy) Social Security Number or |
| | | % | |
| | Relationship to You | % | |
| | Relationship to You | % | |
| | Relationship to You Address | % | Social Security Number or (|
| | Relationship to You Address | Percentage of Benefit | Social Security Number or (|
| | Relationship to You Address City | Percentage of Benefit | Social Security Number or |
| | Relationship to You Address City Name of Secondary Beneficiary (First Name, | Percentage of Benefit Middle Initial, Last Name) | Social Security Number or |
| s 100%. | Relationship to You Address City Name of Secondary Beneficiary (First Name, | Percentage of Benefit Middle Initial, Last Name) | Social Security Number or |

Name of Member

Social Security Number or CalPERS ID

Section 5

Spousal Consent to Beneficiary Designation

You must review and sign this acknowledgment if you are married or in a registered domestic partnership and you name someone other than your spouse or domestic partner as a beneficiary to receive an ongoing monthly benefit or any lump-sum benefits that may be payable upon your death.

Member Acknowledgment

I understand that if I am married or in a registered domestic partnership, my spouse or domestic partner may have community property rights in one or more of the following benefits (if applicable):

- · Retired Death Benefit,
- · Return of any remaining contributions; and/or
- Temporary annuity balance.

If I name someone other than my spouse or domestic partner as my beneficiary for some or all of these benefits and I die before my spouse or domestic partner, he or she may still be entitled to receive his or her community property share of the benefit(s). If I name one or more other individuals as my beneficiary(ies) to receive a benefit listed above, and my spouse or domestic partner does not consent at this time by signing below, CalPERS will award 50% of the community property share of such benefit to my spouse or domestic partner in the event of my death unless he or she waives his or her community property interest in such benefit at the time the benefit becomes payable, and CalPERS will award the remaining 50% of the community property share, plus any separate property share, of such benefit to the named beneficiary(ies).

Spouse's or Registered Domestic Partner's Consent

I hereby voluntarily and irrevocably consent to each of the beneficiary designation(s) by my spouse/registered domestic partner in this form. I acknowledge and understand that I am not obligated to consent and, if I do consent, and my spouse or registered domestic partner dies before me and has named a beneficiary other than me, some or all of the following benefits will be paid to a beneficiary other than me in accordance with the beneficiary designation(s):

- · Retired Death Benefit,
- · Return of any remaining contributions; and/or
- Temporary annuity balance.

I understand that I may have community property or other rights in these benefits, and I hereby voluntarily waive and release any rights I may have to these benefits. I understand that I do not have to sign this consent and that if I do sign my consent is irrevocable. I acknowledge that I have received a complete explanation of each benefit listed above (if applicable), and I have had the opportunity to consult with an attorney or other professional concerning this waiver.

Your spouse or registered domestic partner should sign this consent if he or she consents to each of your beneficiary designations after reviewing this section.

| 'our | Spouse's | or | Domestic | Partner's | Signature |
|------|----------|----|----------|-----------|-----------|

Date (mm/dd/yyyy)

| Name of Member | Social Security Number or CalPERS ID |
|----------------|--------------------------------------|

Section 6

Before submitting your completed form, be sure to make a copy to keep with your important retirement information.

Your Signature

By this beneficiary designation, I hereby revoke any previous designation I have filed. I understand that my marriage or domestic partnership, final dissolution or annulment of my marriage or the termination of my domestic partnership, or the birth or adoption of a child subsequent to the date this form is filed with CalPERS will automatically void this designation. I understand that a designation filed **after** the initiation of dissolution or annulment of marriage or legal termination of domestic partnership will **not** be revoked when the legal process is finalized.

| be revoked when the legal | process is finalized. | |
|---|--|--------------------------------------|
| ☐ Are you legally married | or in a registered domestic partnership? | □ Yes □ No |
| If no, please indicate: | □ Never Married or in Domestic Partnersh □ Divorced, Annulled, or Domestic Partne □ Widowed | • |
| unless you have designate | , your spouse or registered domestic partner d him or her as the sole primary beneficiary bmit the <i>Justification for Absence of Spo</i> | of any lump-sum benefits. Otherwise, |
| I certify, under penalty of p my knowledge. | erjury, that the information submitted hereo | n is true and correct to the best of |
| | | I |
| Your Signature | | Date (mm/dd/yyyy) |
| | | |

Section 7

Your Spouse's or Registered Domestic Partner's Signature

Per Government Code section 21261, I acknowledge that I am aware of the designation made by my spouse or registered domestic partner. I also hereby state that I am the current spouse or registered domestic partner.

| Signature of Spouse or Registered Domestic Partner | Date (mm/dd/yyyy) |
|--|---|
| | , |
| | |
| | |
| Date of Marriage or Registered Domestic Partnership (mm/dd/yyyy) | |

Mail to:

Post-Retirement Lump-Sum Beneficiary Designation — Instructions for Completing Form

Section 1

Information About You

· Complete all fields.

Section 2

Your Lump-Sum Benefit Type

- · Select only one of the check boxes.
- If you want to designate different beneficiaries for the different types of lump-sum benefits, you will need to complete a
 new form for each type of designation. You can print a blank form from www.calpers.ca.gov, make a copy of a blank
 Post-Retirement Lump-Sum Beneficiary Designation form, or call us to request a new form.

Retired Death Benefit - The amount paid ranges from \$500 to \$5,000 depending on your employer's contract with us.

Return of Remaining Contributions - Your remaining member contributions, if any, will be paid to your named beneficiary if you elected a retirement payment option that provides this benefit.

Temporary Annuity Balance - If you elected to receive a temporary annuity when you retired and you die before your temporary annuity payments stop, a lump-sum payment for the current value of the remaining payments will be paid.

Section 3

Your Primary Beneficiary Information

• To name additional primary beneficiaries, attach a blank sheet of paper with your additional beneficiary information.

Provide the same beneficiary information as required on this form and be sure to indicate that the beneficiary is primary.

Sign and date the paper and include your Social Security number or CalPERS ID.

Section 4

Your Secondary Beneficiary Information

- The benefit you elected is paid to your named secondary beneficiary upon the death of your primary beneficiary or beneficiaries.
- To name additional secondary beneficiaries, attach a blank sheet of paper with your additional beneficiary information.
 Provide the same beneficiary information as required on this form and be sure to indicate that the beneficiary is secondary. Sign and date the paper and include your Social Security number or CalPERS ID.

Section 5

Spousal Consent to Beneficiary Designation

 If you did not name your spouse or registered domestic partner as your lump-sum beneficiary, you must read and sign the Member Acknowledgment. Your spouse or registered domestic partner must read the Spouse's or Registered Domestic Partner's Consent.

Section 6

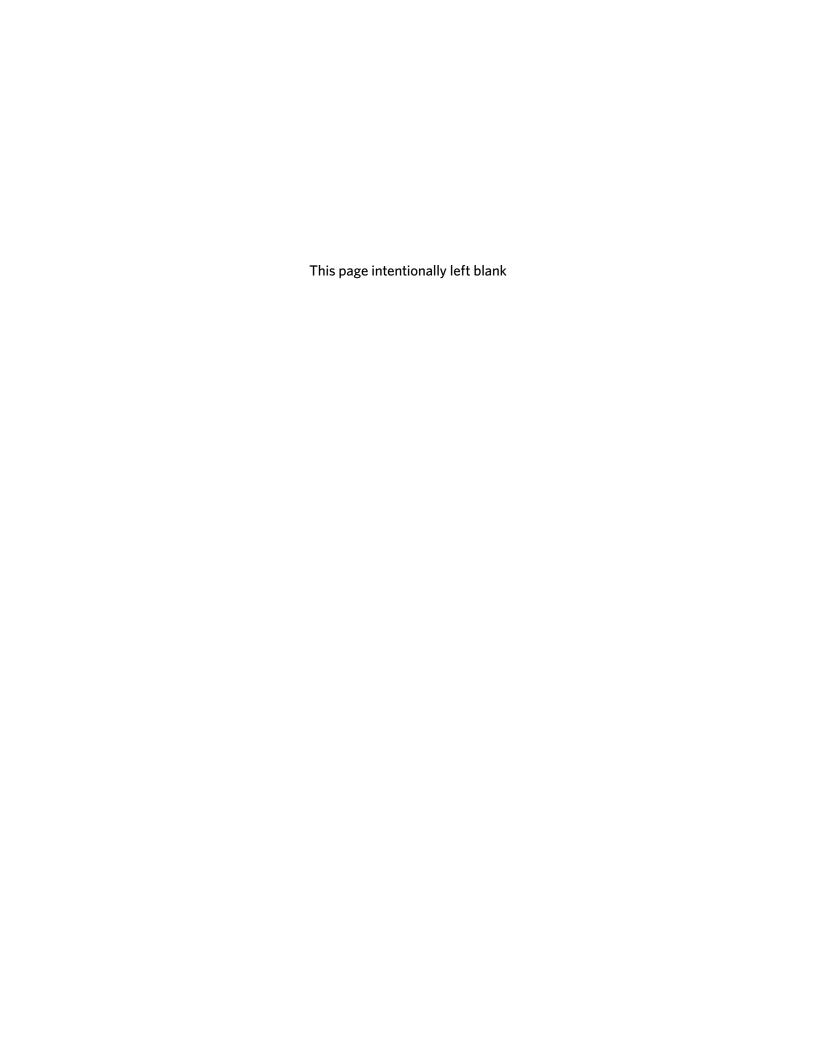
Your Signature

- Indicate if you are married or in a registered domestic partnership.
- · Sign in the required field.

Section 7

Your Spouse's or Registered Domestic Partner's Signature

- Your spouse or registered domestic partner must sign if you did not designate him or her as the sole
 primary beneficiary for any lump-sum benefits.
- You must complete a Justification of Absence of Spouse's or Registered Domestic Partner's Signature
 form if your spouse or registered domestic partner is unable to sign this form. You can print this form
 from www.calpers.ca.gov or call 888 CalPERS (or 888-225-7377).





Justification for Absence of Spouse's or Registered Domestic Partner's Signature

888 CalPERS (or 888-225-7377) • TTY: (877) 249-7442

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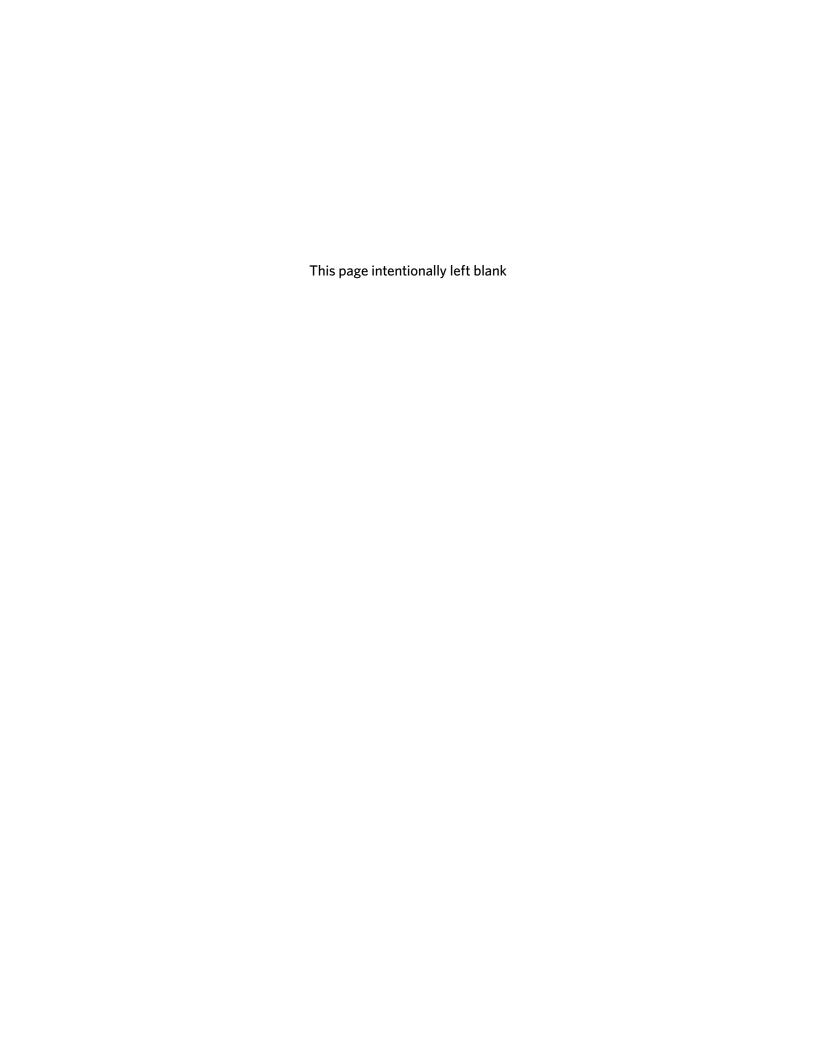
Member Information

| Name of Member (First Name, Middle Initial, Last Name) | |
|---|---|
| Pursuant to Government Code section 21261, an election of optio change in beneficiary shall contain the signature of the current spretirement payment option provides him or her 100 percent of the also named as the sole beneficiary for any lump-sum benefits. | onal settlement, designation of beneficiary, or pouse or registered domestic partner unless the |
| If a spouse's or registered domestic partner's signature is r the retirement application or beneficiary designation form, by the member. | • |
| ☐ By checking this box, I indicate that I am married or have a ror registered domestic partner did not sign this form because | |
| I do not know and have taken all reasonable steps to def or registered domestic partner; or | termine the whereabouts of my spouse |
| ☐ My spouse or registered domestic partner has been advited to sign the written acknowledgment; or | ised of the application and has refused |
| ☐ My spouse or registered domestic partner is incapable o of an incapacitating mental or physical condition; or | of executing the acknowledgment because |
| $\hfill \square$ My spouse or registered domestic partner has no identified in the benefit; ${\bf or}$ | iable community property interest |
| ☐ My spouse or registered domestic partner and I have exe agreement that makes the community property law inap | |
| Information Certification | |
| I certify under penalty of perjury that the foregoing information is | |
| Cianatura of Mambar | Data (mm/dd/mm/) |

Section 2

Signature of Member Date (mm/dd/yyyy)

Mail to:



Post-Retirement Nonmember Lump-Sum Beneficiary Designation

Section 1 – Information About You

• Enter your full name as it appears on your Social Security card.

If you have changed your name, you must provide us a photocopy of the document validating the change (marriage certificate, court order, etc.). Additionally, the IRS requires us to obtain a photocopy of your updated Social Security card with your new name before we can stop using your former name.

- Enter your Social Security number or CalPERS ID.
- Enter your daytime and alternate phone numbers and your address.

Section 2 – Your Lump-Sum Benefit Type

- Select only one of the check boxes.
- If you want to designate different beneficiaries for the different types
 of lump-sum benefits (Prorated Allowance or Return of Remaining
 Contributions), see the instructions on the *Post-Retirement Nonmember Lump-Sum Beneficiary Designation* form for more information.

Section 3 – Your Primary Beneficiary Information

- A primary beneficiary is the person you name to receive the lump-sum benefits upon your death.
- If you want to name more than four primary beneficiaries, see the instructions on the *Post-Retirement Nonmember Lump-Sum Beneficiary Designation* form for more information.
- Your beneficiary can be:
 - Any person regardless of their relationship to you. You cannot designate a guardian to receive benefits for another person.
 - A class of next-of-kin as a group. For example, you can list your "grandchildren" or "siblings" instead of writing out individual names.
 - A corporation that is registered in any state with the Secretary of State.
 - Your estate. CalPERS can only pay to your estate if it is probated.
 - Your trust. Provide the title and date of your trust, and the name and address of the person who has a copy of the document. Do not name the trustee.

Prorated Allowance is a lump-sum payment equal to your retirement allowance divided by the number of days in the month of your death, then multiplied by the number of days you lived.

If you designate a minor child as your beneficiary and the child is still a minor when the benefit becomes payable, the surviving parent can claim the child's death benefit without a court order if the child is in his or her care. If the child is not in the parent's custody, we will request a court order that appoints someone as guardian of the child's estate. Or you may choose to complete a *California Uniform Transfers to Minors Act – Nomination for Custodian of Minor* form to nominate a custodian to claim any benefits that may become payable to your minor child. Do not name the guardian or custodian as your beneficiary; just name the child.

Find the *Nomination for Custodian of Minor* form in the Forms & Publications area of our website at www.calpers.ca.gov.

Section 4 – Your Secondary Beneficiary Information

- The benefit is paid to your named secondary beneficiary upon the death of your primary beneficiary or beneficiaries.
- If you want to name more than three secondary beneficiaries, see the instructions on the *Post-Retirement Nonmember Lump-Sum Beneficiary Designation* form.

Section 5 – Your Acknowledgment and Signature

• This section must be completed or your form will not be processed.



Post-Retirement Nonmember Lump-Sum Beneficiary Designation

888 CalPERS (or 888-225-7377) • TTY: (877) 249-7442 • Fax: (800) 959-6545

If you receive a monthly benefit as part of a community property settlement, complete this form if you wish to designate a beneficiary or change your existing beneficiary designation for lump-sum benefits. For more information regarding lump-sum benefits, refer to the publication *Changing Your Beneficiary or Monthly Benefit After Retirement* (PUB 98).

Please print clearly. We are unable to process this form if there are erasures or corrections. See the last page of this form for detailed instructions.

| Section 1 | Information About You | | | | | |
|--|---|--|--|--|--|--|
| | Your Name (First Name, Middle Initial, Last Name) | Social Security Number or CalPERS ID | | | | |
| | () | obolal occurry Number of Gall End ID | | | | |
| | Daytime Phone Alternate Phone | | | | | |
| | | | | | | |
| | Address | | | | | |
| | | State ZIP | | | | |
| | Sily | State En | | | | |
| Section 2 | Your Lump-Sum Benefit Type | | | | | |
| Please see the last page | Select one of the check boxes below. | | | | | |
| of this form for instructions on how to name different | ☐ I want to name one or more beneficiaries to receive an equal share or specified percentage (%) of any payable lump-sum benefits in the event of my death. | | | | | |
| beneficiaries for each payable lump-sum benefit. | I want to name separate beneficiaries for each of the following payable lump-sum benefits in the event of my death: | | | | | |
| iump-sum benent. | ☐ Prorated Allowance ☐ Return of Remaining Contributions | | | | | |
| Section 3 | Your Primary Beneficiary Information | | | | | |
| Please see the last | | | | | | |
| page of this form for | Name of Primary Beneficiary (First Name, Middle Initial, Last Name) | Birth Date (mm/dd/yyyy) | | | | |
| instructions on how to name more than | Relationship to You Percentage of Benefit | Social Security Number or CalPERS ID | | | | |
| four primary | 1 | , | | | | |
| beneficiaries. | Address | | | | | |
| If a percentage (%) is | | | | | | |
| entered, make sure the | City | State ZIP | | | | |
| total equals 100%. | | | | | | |
| | Name of Primary Beneficiary (First Name, Middle Initial, Last Name) | Birth Date (mm/dd/yyyy) | | | | |
| | | | | | | |
| | Relationship to You Percentage of Benefit | Social Security Number or CalPERS ID | | | | |
| | Advaga | | | | | |
| | Address | | | | | |
| | City | State ZIP | | | | |
| | | | | | | |

Section 3 continues on page 2.

Pu Security

| r name and Social nber or CalPERS ID | Name of Normanhar | ļ Sasie | I Coourity Number or ColDEDC ID | | |
|---|--|----------------------------|--------------------------------------|--|--|
| e top of every page | Name of Nonmember | Socia | Social Security Number or CalPERS ID | | |
| on 3, continued | Your Primary Beneficiary | Information, continued | | | |
| | Name of Primary Beneficiary (First Name, Mi | ddle Initial Leet Name) | Pirth Data (mm/dd/mm/) | | |
| | Name of Filmary beneficiary (First Name, Wi | • | Birth Date (mm/dd/yyyy) | | |
| | Relationship to You | Percentage of Benefit | Social Security Number or CalPE | | |
| | Address | | | | |
| | City | | | | |
| | Name of Primary Beneficiary (First Name, Mi | ddle Initial, Last Name) | Birth Date (mm/dd/yyyy) | | |
| | | / % | | | |
| | Relationship to You | Percentage of Benefit | Social Security Number or CalPE | | |
| | Address | | | | |
| | City | | State ZIP | | |
| | 5.1.5 | | 5.00 | | |
| Please see the last page of this form for | Your Secondary Beneficial Name of Secondary Beneficiary (First Name, | | Birth Date (mm/dd/yyyy) | | |
| instructions on how | I | / % | | | |
| to name more than three secondary | Relationship to You | Percentage of Benefit | Social Security Number or CalPE | | |
| beneficiaries. | Address | | | | |
| a percentage (%) is | City | | State ZIP | | |
| entered, make sure the total equals 100%. | | | | | |
| | Name of Secondary Beneficiary (First Name, | Middle Initial, Last Name) | Birth Date (mm/dd/yyyy) | | |
| | I | % | | | |
| | Relationship to You | Percentage of Benefit | Social Security Number or CalPE | | |
| | Address | | | | |
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| | Oity | | State ZIF | | |
| | Name of Occasions 2 - 17 in 175 in 175 | Medic lewel (act News) | Pinh Pate (/ / / / / | | |
| | Name of Secondary Beneficiary (First Name, | | Birth Date (mm/dd/yyyy) | | |
| | Relationship to You | Percentage of Benefit | Social Security Number or CalPE | | |
| | | - | | | |

Page 2 of 3

State

ZIP

Address

City

Name of Nonmember

Social Security Number or CalPERS ID

Section 5

Before submitting your completed form, be sure to make a copy to keep with your important retirement information.

Your Acknowledgement and Signature

Should I survive all of the persons named, I understand that the benefits payable upon my death will be paid to my statutory beneficiaries, or to such other beneficiary or beneficiaries that I may hereafter designate in writing to CalPERS, all in accordance with applicable provisions of law.

By this beneficiary designation, I hereby revoke any previous designation I have filed. I understand that my marriage or domestic partnership, final dissolution or annulment of my marriage or the termination of my domestic partnership, or the birth or adoption of a child subsequent to the date this form is filed with CalPERS will automatically void this designation.

I certify, under penalty of perjury, that the information submitted hereon is true and correct to the best of my knowledge.

| Your Signature | Date (mm/dd/yyyy) |
|----------------|-------------------|

Mail to:

Post-Retirement Nonmember Lump-Sum Beneficiary Designation — Instructions for Completing Form

Section 1

Information About You

· Complete all fields.

Section 2

Your Lump-Sum Benefit Type

- · Select only one of the check boxes.
- If you want to designate different beneficiaries for the different types of lump-sum benefits, you will need
 to complete a new form for each type of designation. You can print a blank form from www.calpers.ca.gov,
 make a copy of a blank Post-Retirement Nonmember Lump-Sum Beneficiary Designation form, or call us
 to request a new form.

Prorated Allowance - This is a lump-sum payment equal to your retirement allowance divided by the number of days in the month of your death, then multiplied by the number of days you lived.

Return of Remaining Contributions - Your remaining member contributions, if any, will be paid to your named beneficiary if you elected a retirement payment option that provides this benefit.

Section 3

Your Primary Beneficiary Information

• To name additional primary beneficiaries, attach a blank sheet of paper with your additional beneficiary information.

Provide the same beneficiary information as required on this form and be sure to indicate that the beneficiary is primary.

Sign and date the paper and include your Social Security number or CalPERS ID.

Section 4

Your Secondary Beneficiary Information

- The benefit you elected is paid to your named secondary beneficiary upon the death of your primary beneficiary
 or beneficiaries.
- To name additional secondary beneficiaries, attach a blank sheet of paper with your additional beneficiary information.
 Provide the same beneficiary information as required on this form and be sure to indicate that the beneficiary is secondary.
 Sign and date the paper and include your Social Security number or CalPERS ID.

Section 5

Your Acknowledgement and Signature

· Sign in the required field.

Request for Benefit Allowance Increase

Section 1 – Information About You

Enter your full name as it appears on your Social Security card.

If you have changed your name, you must provide us a photocopy of the document validating the change (marriage certificate, court order, etc.). Additionally, the IRS requires us to obtain a photocopy of your updated Social Security card with your new name before we can stop using your former name.

- Enter your Social Security number or CalPERS ID.
- Enter your complete mailing address.
- Enter your retirement date.

Section 2 – Qualifying Life Events

Check the box that applies to you. You must submit the appropriate documentation or your request will not be processed.

- Death of current life option beneficiary Submit a copy of the death certificate.
- Dissolution or legal separation of marriage, or termination of domestic
 partnership Submit the entire endorsed filed court order that awards
 you 100% of your CalPERS benefit. The copy of the court order must be
 complete and should contain a legible filed stamp and the judge's signature.
- Annulment of marriage Submit a copy of the court document validating the annulment.
- Non-spouse/Non-domestic partner disclaimed his or her benefit –
 Submit the completed *Non-Spouse or Non-Domestic Partner*Disclaimer of CalPERS Benefits form. Call us toll free at 888 CalPERS
 (or 888-225-7377) to request this form.

Section 3 – Certification of Participant

You must sign this form or your request will not be processed.



Request for Benefit Allowance Increase

888 CalPERS (or 888-225-7377) • TTY: (877) 249-7442

To use this form, you must have elected one of the following retirement payment options and have an eligible qualifying event:

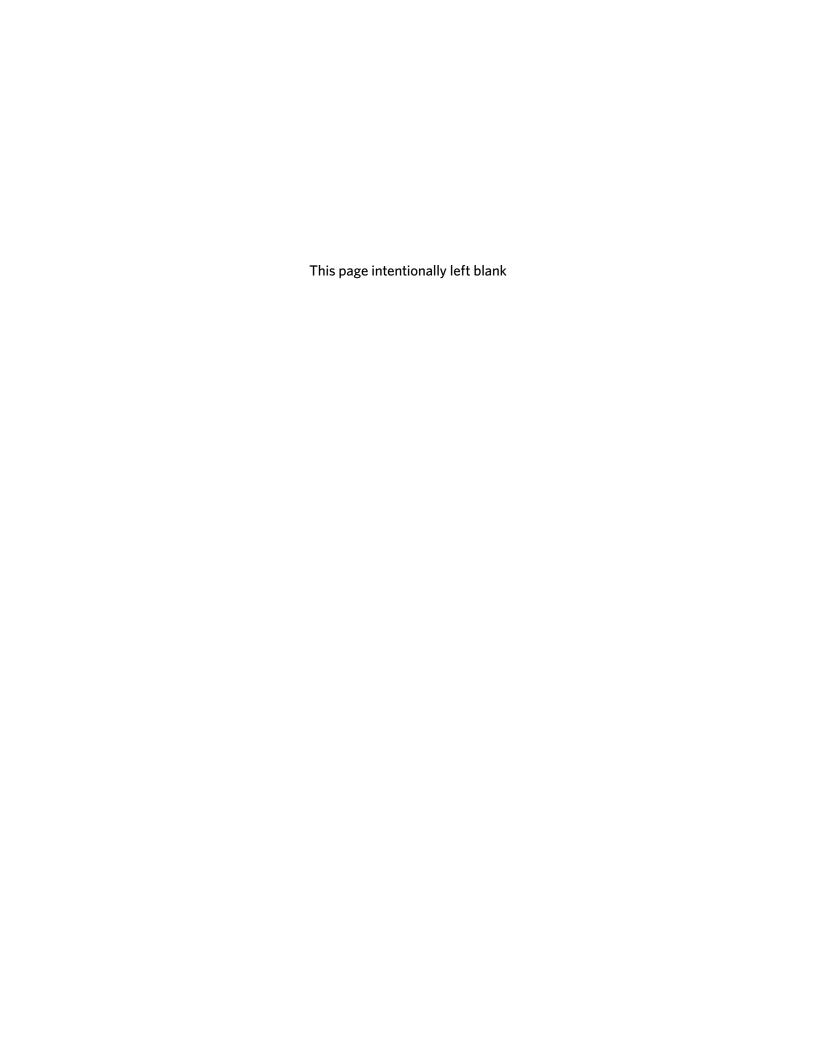
- Option 2 or Option 3 if you retired prior to January 1, 2018.
- 100 Percent Beneficiary Option 2 with Benefit Allowance Increase or 50 Percent Beneficiary Option 3 with Benefit Allowance Increase if you retired on or after January 1, 2018.

For more information about qualifying life events, please refer to the publication *Changing Your Beneficiary or Monthly Benefit After Retirement* (PUB 98).

| Section 1 | Information About You | | | | | |
|---|---|----------------------|-------------------|--|--|--|
| Provide your name as it appears on your Social Security card. | Your Name (First Name, Middle Initial, Last Name) | Number or CalPERS ID | | | | |
| Social Security Card. | Address | - | | | | |
| | City | State | ZIP | | | |
| | Your Retirement Date (mm/dd/yyyy) | | | | | |
| Section 2 | Qualifying Life Events | | | | | |
| If you are a nonmember, | Choose the qualifying event: | | | | | |
| you do not need to be awarded total interest | ☐ Death of current life option beneficiary (provide copy of the certified death certificate) | | | | | |
| in your CalPERS benefit | L | 1 | | | | |
| to request a benefit | Beneficiary's Name (First Name, Middle Initial, Last Name) | Date of De | ath (mm/dd/yyyy) | | | |
| allowance increase. | $\ \square$ Divorce, legal separation, or annulment from spouse who is your life option beneficiary | | | | | |
| | ☐ Divorce (provide a copy of the endorsed-filed court order that awards you 100% of your CalPERS benefit) | | | | | |
| | Legal separation (provide a copy of the endorsed-filed court order that awards you 100% of your CalPERS benefit) | | | | | |
| | $\hfill \square$ Annulment (provide a copy of the court document that confirms the annul | ment) | | | | |
| | | 1 | | | | |
| | Former Spouse's Name (First Name, Middle Initial, Last Name) | Date Effec | tive (mm/dd/yyyy) | | | |
| | ☐ Dissolution or termination of domestic partnership from domestic partner who is your life option beneficiary (submit a copy of the endorsed-filed court order that awards you 100% of your CalPERS benefit) | | | | | |
| | | 1 | | | | |
| | Former Registered Domestic Partner's Name (First Name, Middle Initial, Last Name) | Date Effect | tive (mm/dd/yyyy) | | | |
| | ☐ Non-spouse/non-domestic partner disclaimed entitlement to his or Non-Spouse or Non-Domestic Partner Disclaimer of CalPERS Benefit form) | her CalPERS benet | it (submit the | | | |
| Section 3 | Certification of Participant | | | | | |
| | I hereby certify under penalty of perjury that the foregoing information is true and correct. | | | | | |
| | | | | | | |
| | Signature of Participant | Date (mm/ | dd/yyyy) | | | |
| | () | | | | | |
| | Daytime Phone Alternate Phone | Ilternate Phone | | | | |

Mail to:

CalPERS Retirement Benefit Services Division • P.O. Box 942711, Sacramento, California 94229-2711



FREQUENTLY ASKED QUESTIONS

I recently married. Will my new spouse automatically receive a monthly benefit upon my death?

No. You must elect to modify your original retirement selection and name your spouse as your new lifetime beneficiary. Otherwise, you can designate your spouse to receive a lump-sum benefit only.

I recently entered into a registered domestic partnership and added my partner as a dependent on my health plan. Will her health coverage continue when I die?

If you named your domestic partner to receive a continuing monthly benefit upon your death, health coverage will continue. If not, your partner will lose health coverage when you die. To name your domestic partner for a lifetime benefit, you must modify your original retirement selection and name your partner as your new lifetime beneficiary.

How do I remove my former spouse as my lifetime beneficiary?

We need your written request with a copy of the entire court document validating your annulment or a copy of the entire court order showing you were awarded 100% of your CalPERS benefit.

How do I remove my non-spouse (or non-domestic partner) as my lifetime beneficiary?

Your non-spouse or non-domestic partner must disclaim entitlement to any future benefit and must complete the *Non-Spouse or Non-Domestic Partner Disclaimer of CalPERS Benefits* form. You must forward the completed form with a written request for us to remove the non-spouse or non-domestic partner as your beneficiary.

If I remove my non-spouse lifetime beneficiary, can I change my retirement option and name a new beneficiary?

No. If your non-spouse (or non-domestic partner) disclaims entitlement to your CalPERS benefit, you may only ask us to remove him or her as your lifetime beneficiary. Disclaiming a benefit is not a qualifying life event that allows you to change your retirement payment option and name someone new.

I have a nonmember account and recently divorced. Do I have to be awarded 100% of my CalPERS benefit in order to make changes to my retirement benefit?

No. Your nonmember account was awarded to you from a previous marriage (or domestic partnership) and it is considered your sole and separate property. You do not need to be awarded your entire CalPERS interest to change your retirement option or beneficiary.

I'm a retired member of the Judges' Retirement System (JRS). Upon the death of my spouse or another qualifying life event, do I have the right to change my retirement option?

As a retiree of JRS or JRS II, you may have the right to change or modify your retirement option upon a qualifying life event. For additional information on how to request to change your retirement option, contact the Judges' Retirement System at (916) 795-3688.

I'm a retired member of the Judges' Retirement System II (JRS II) and recently divorced. Do I have the right to make changes to my retirement benefits? You may have the right to make changes to your retirement benefits if you were awarded 100% of your JRS II retirement benefit. Contact the Judges' Retirement System at (916) 795-3688 to discuss the options available to you, the required documents, and the process to request a change.

BECOME A MORE INFORMED MEMBER

CalPERS Website

Visit www.calpers.ca.gov for information on all our benefits and services. You can also sign up to receive email newsletters and alerts.

myCalPERS

Log in at my.calpers.ca.gov to access real-time details and balances of your CalPERS accounts. With myCalPERS you can:

- View, print, and save current and past statements.
- Ask a question by sending us a secure message.
- Order and download member publications.
- Search for health plans available in your area and confirm which dependents are covered on your health plan.
- Estimate your future retirement benefit and save estimates to view later.
- · Send account information to third parties, such as banks.
- Apply for service retirement.
- Change your beneficiary designation.
- Request service credit cost information and view the status of your request.
- Elect and pay for your service credit purchase, review your elected service credit details, and request payoff information.
- Retirees can update contact information, set up direct deposit, change tax withholdings, and view annual tax statements.

CalPERS Education

Whether you're in the early stages of your career or getting ready to retire, visit the **Education** section in myCalPERS to:

- Take online classes to help you understand your benefits.
- Register for instructor-led classes and download class materials.
- Register to attend a CalPERS Benefits Education Event at a location near you.
- Schedule a one-on-one appointment at your nearest CalPERS Regional Office.

Experience CalPERS Through Social Media

f Facebook: www.facebook.com/myCalPERS

Twitter: www.twitter.com/CalPERS

Instagram: www.instagram.com/CalPERS

• YouTube: www.youtube.com/CalPERS

LinkedIn: www.linkedin.com/company/CalPERS

Reach Us by Phone

Call us toll free at **888 CalPERS** (or **888**-225-7377). Monday through Friday, 8:00 a.m. to 5:00 p.m.

TTY: (877) 249-7442

Visit Your Nearest CalPERS Regional Office

Fresno Regional Office

10 River Park Place East, Suite 230 Fresno, CA 93720

Glendale Regional Office

Glendale Plaza 655 North Central Avenue, Suite 1400 Glendale, CA 91203

Orange Regional Office

500 North State College Boulevard, Suite 750 Orange, CA 92868

Sacramento Regional Office

Lincoln Plaza East 400 Q Street, Room 1820 Sacramento, CA 95811

San Bernardino Regional Office

650 East Hospitality Lane, Suite 330 San Bernardino, CA 92408

San Diego Regional Office

7676 Hazard Center Drive, Suite 350 San Diego, CA 92108

San Jose Regional Office

181 Metro Drive, Suite 520 San Jose, CA 95110

Walnut Creek Regional Office

Pacific Plaza 1340 Treat Boulevard, Suite 200 Walnut Creek, CA 94597

Visit the CalPERS website for directions to your local office.

Regional Office hours are Monday through Friday, 8:00 a.m. to 5:00 p.m.

PRIVACY NOTICE

The privacy of personal information is of the utmost importance to CalPERS. The following information is provided to you in compliance with the Information Practices Act of 1977 and the Federal Privacy Act of 1974.

Information Purpose

The information requested is collected pursuant to the Government Code (sections 20000 et seq.) and will be used for administration of Board duties under the Retirement Law, the Social Security Act, and the Public Employees' Medical and Hospital Care Act, as the case may be. Submission of the requested information is mandatory. Failure to comply may result in CalPERS being unable to perform its functions regarding your status. Please do not include information that is not requested.

Social Security Numbers

Social Security numbers are collected on a mandatory and voluntary basis. If this is CalPERS' first request for disclosure of your Social Security number, then disclosure is mandatory. If your Social Security number has already been provided, disclosure is voluntary. Due to the use of Social Security numbers by other agencies for identification purposes, we may be unable to verify eligibility for benefits without the number.

Social Security numbers are used for the following purposes:

- 1. Enrollee identification
- 2. Payroll deduction/state contributions
- 3. Billing of contracting agencies for employee/employer contributions
- 4. Reports to CalPERS and other state agencies
- 5. Coordination of benefits among carriers
- 6. Resolving member appeals, complaints, or grievances with health plan carriers

Information Disclosure

Portions of this information may be transferred to other state agencies (such as your employer), physicians, and insurance carriers, but only in strict accordance with current statutes regarding confidentiality.

Your Rights

You have the right to review your membership files maintained by the System. For questions about this notice, our Privacy Policy, or your rights, please write to the CalPERS Privacy Officer at 400 Q Street, Sacramento, CA 95811 or call us at 888 CalPERS (or 888-225-7377).

CalPERS is governed by the Public Employees' Retirement Law and the Alternate Retirement Program provisions in the Government Code, together referred to as the Retirement Law. The statements in this publication are general. The Retirement Law is complex and subject to change. If there is a conflict between the law and this publication, any decisions will be based on the law and not this publication. If you have a question that is not answered by this general description, you may make a written request for advice regarding your specific situation directly to the CalPERS Privacy Officer at 400 Q Street, Sacramento, CA 95811.



888 CalPERS (or 888-225-7377) www.calpers.ca.gov

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