Member Information Form—Defined Benefit Plan(s)

This form provides information to Colorado PERA in order to set up your PERA Defined Benefit (DB) Plan account if you are a new PERA member. This form can also be used to update personal information already on file with PERA.

If you are a retiree receiving a monthly benefit, do not complete this form. PERA will not update your account based on this form. To make any beneficiary changes, please complete a *Retiree Named Beneficiary Change Form* and return it to PERA.

New Members

Upon receipt of the attached form, PERA will establish a DB Plan account for you.

Being a PERA member means that while you're working, a percentage of your paycheck will automatically go into your retirement account. Your employer also contributes to PERA. We then invest those dollars on your behalf. When you retire, you will get money from PERA every month for the rest of your life, or you can take those dollars with you if you leave this job before retirement.

Please complete this form and return it to your personnel office. See copera.org for current contribution rates and more information about your PERA benefits.

Changing Information

If you are changing information already on file with PERA, send this form to PERA and provide your employer with a copy. Changes made on this form take effect upon receipt of the completed form at PERA.

If you have changed your name since sending your initial *Member Information Form,* PERA also requires a new copy of your completed form W-9.

To change your address, phone number, email, or to sign up for electronic delivery of PERA information, log into your PERA account on copera.org with your User ID and password. You may also call PERA's Customer Service Center at 800-759-7372.

Changing PERA Life Insurance, PERAPlus 401(k) and 457 Plans, or PERA DC Plan Information

- If you are enrolled in PERA-sponsored life insurance and have changed employers, notify your new employer to deduct your life insurance premium. If you want to change your life insurance beneficiary(ies), call Unum toll-free at 866-277-1649 or go to copera.org and log into your PERA account using your User ID and password and select "Life Insurance" under the "Account Home" menu.
- If you have a PERAPlus 401(k)/457 Plan, or PERA DC Plan account, and need to change your name, address, or phone number, complete the *PERA Account(s) Address Change Form.*
- If you need to make beneficiary changes to your PERAPlus 401(k)/457 Plan, or PERA DC Plan, complete the respective *PERAPlus 401(k), PERAPlus 457,* or *PERA DC Plan Beneficiary Designation* form. You can obtain the forms online at coperaplus.org or by calling 833-4-COPERA (833-426-7372). You can also make beneficiary changes by logging into your account at Empower using your User ID and password, and navigating to the plan you wish to update on the right side of the screen. From there, select "Beneficiaries" under the "Account Overview" menu and follow the prompts to add or update your beneficiary information. Beneficiary information will need to be updated across each plan separately. Any change in marital or civil union status, including divorce, annulment, or any dissolution or declaration of invalidity of your marriage, does not nullify your designation of a named beneficiary.
- If you have a PERAPlus 401(k) Plan account and are transferring from or are currently employed by another PERA employer and actively contributing, notify your new employer's payroll office so that contributions may continue through your new employer.

Member Information Form—Defined Benefit Plan(s) Instructions

Please read all of the following information before completing the form beginning on page 3:

- Type or print in black ink and sign the form. Please do not send photocopies of the form or staple, tape, or glue items to it.
- As a result of the merger between PERA and the Denver Public Schools Retirement System (DPSRS), you may have two DB Plan accounts with PERA—one under the PERA benefit structure and one under the DPS benefit structure. If you have two DB Plan accounts, changes under the "Member Information" section will be made to both DB Plan accounts (if applicable).
- If you need to list additional named beneficiaries, complete the "Additional Named Beneficiaries" section. Be sure to also sign the form or your beneficiaries will not be added/changed. If you need to add more beneficiaries than space allows, please attach a separate sheet with the type of beneficiary (primary or contingent), name(s), relationships, Social Security numbers, birthdates, addresses, and your signature. This page must be signed or your beneficiaries will not be added/changed.

If you complete any beneficiary information on the form and submit the form to PERA, you are canceling and replacing all of your previously named beneficiaries. If you want to continue any previous designations, you must fully name all named beneficiaries on the form or on a separate list submitted with the form.

Named Beneficiary Information

If you have a DB Plan account in both the PERA and DPS benefit structures, use the check boxes on the form to indicate if your requested beneficiary changes apply to one or both of your DB Plan accounts. If you do not check a box, the beneficiary changes will be made to both DB Plan accounts (if applicable). Any change in marital or civil union status, including divorce, annulment, or any dissolution or declaration of invalidity of your marriage, does not nullify your designation of a named beneficiary.

Beneficiary Definitions

- **Primary Beneficiary—**beneficiary to receive payment. If you have more than one primary beneficiary, payment will be divided equally among all primary beneficiaries.
- **Contingent Beneficiary—**person to receive payment if your primary beneficiary(ies) is deceased. If you list more than one contingent beneficiary, payment will be divided equally among them.

Survivor Benefit Information

If you have more than one year of service under the PERA benefit structure or more than five years under the DPS benefit structure, state law specifies who receives monthly benefits after you die. Survivor benefits are different under the PERA and DPS benefit structure DB Plan accounts; see the *Survivor Benefits* booklet for detailed information.

COLORADO PERA

Member Information Form—Defined Benefit Plan(s)

Colorado Public Employees' Retirement Association
P.O. Box 5800, Denver, Colorado 80217-5800
800-759-PERA (7372) • Fax: 303-863-3727 • copera.org

Member SSN ___ ___ ___ ___ ___ ___ ___ ___ ___

Read the instructions on the preceding pages before completing this form and be sure to sign and date this form as well as any enclosures. If you are a retiree receiving a monthly benefit and would like to change your beneficiary, do not complete this form. Please complete the *Retiree Named Beneficiary Change Form* and return it to PERA.

Member Information

I am: ☐ A New PERA Member ☐ Changing PERA Information (Complete any information you are changing and sign.)

Name _____
Last First MI Former Name

Birthdate ____/____/____ Sex: ☐ Female ☐ Male ☐ Unspecified
Month/Day/Year

Home Telephone (___) _____ Work Telephone (___) _____

Address _____
Street, Route, or Box Number, and Apt. Number City State ZIP Code

Email Address _____

Sign up for electronic delivery of PERA information? ☐ Yes ☐ No

Spouse's Name _____
Last First MI

Spouse's Birthdate ____/____/____ Spouse through: ☐ Marriage ☐ Civil Union
Month/Day/Year

Named Beneficiary

Complete this section to list the primary and contingent named beneficiary(ies) of your PERA DB Plan account(s).

If you have additional named beneficiaries, complete the page on the reverse.

Note: Your designation can only be changed by you. Your divorce, annulment, or any dissolution or declaration of invalidity of your marriage WILL NOT revoke the beneficiary named below as your designated beneficiary unless you revoke the designation by submitting a new form. Colorado Revised Statute § 15-11-804 does not act to revoke a spouse's designation as a beneficiary.

Beneficiary for: ☐ PERA Benefit Structure DB Plan Account ☐ DPS Benefit Structure DB Plan Account
☐ Apply to Both DB Plan Accounts

Note: If you do not check a box, the beneficiary designation will be made to both DB Plan accounts, if applicable.

Primary Beneficiary:

_____ ____/____/____
Name Relationship SSN Birthdate

_____
Street, Route, or Box Number, and Apt. Number City State ZIP Code

Contingent Beneficiary:

_____ ____/____/____
Name Relationship SSN Birthdate

_____
Street, Route, or Box Number, and Apt. Number City State ZIP Code

Sign Here ➔ **Signature of Member** _____ **Date** _____

To Be Completed by Employer

Employer No. _____ Employer Name _____

Date _____ Starting Salary _____

Job Title _____ Date Employed _____

COLORADO PERA

Member Information Form—Defined Benefit Plan(s) (continued)

Colorado Public Employees' Retirement Association
P.O. Box 5800, Denver, Colorado 80217-5800
800-759-PERA (7372) • Fax: 303-863-3727 • copera.org

Your Name _____ **Your SSN** _____

Additional Named Beneficiaries

Complete this section only if you have additional primary and contingent named beneficiaries.

See page 2 for definitions of primary and contingent named beneficiaries.

Primary Beneficiary(ies):

Name | Relationship | SSN | Birthdate

Street, Route, or Box Number, and Apt. Number | City | State | ZIP Code

Name | Relationship | SSN | Birthdate

Street, Route, or Box Number, and Apt. Number | City | State | ZIP Code

Name | Relationship | SSN | Birthdate

Street, Route, or Box Number, and Apt. Number | City | State | ZIP Code

Contingent Beneficiary(ies):

Name | Relationship | SSN | Birthdate

Street, Route, or Box Number, and Apt. Number | City | State | ZIP Code

Name | Relationship | SSN | Birthdate

Street, Route, or Box Number, and Apt. Number | City | State | ZIP Code

Name | Relationship | SSN | Birthdate

Street, Route, or Box Number, and Apt. Number | City | State | ZIP Code

Sign Here ➔ **Member Signature** _____ **Date** _____

(if including additional named beneficiaries above)