

DESIGNATION OF BENEFICIARY FOR ACTIVE MEMBERS TIER 1

In the event of your death, your accumulated contributions will be paid to any person(s) or entity you nominate by written designation which is filed with LACERS. If no such designation is filed, the accumulated contributions will be paid to your surviving spouse, children, or parents, in that order, otherwise to your estate.

DESIGNATION OF ANYONE OTHER THAN YOUR SPOUSE OR DOMESTIC PARTNER WILL RENDER YOUR SPOUSE OR DOMESTIC PARTNER INELIGIBLE FOR LIFETIME MONTHLY BENEFITS IF YOU DIE BEFORE RETIRING.

NOTE: Any benefit overpayment that LACERS cannot collect will be deducted from benefits payable to your beneficiary(ies).

I, _____, Social Security Number _____,
 (Print your name)

in the event of my death, hereby designate the following person(s) or legal entity to receive my accumulated contributions in the event of my death:

| | | | |
|----------------|-----------------------------------|------------------|-----|
| Name | Date of Birth | | |
| Relationship | Social Security Number (Optional) | Telephone Number | |
| Street Address | City | State | Zip |

| | | | |
|----------------|-----------------------------------|------------------|-----|
| Name | Date of Birth | | |
| Relationship | Social Security Number (Optional) | Telephone Number | |
| Street Address | City | State | Zip |

(Unless you indicate otherwise above, your accumulated contributions will be paid in equal shares to any beneficiaries who survive you. Please contact LACERS if you would like to designate more than three beneficiaries.)

I have read and understand the information on Page 3 of this form _____ (Member's initial here)

| | | |
|--------------------|--------------------------|------|
| Member's Signature | Contact Telephone Number | Date |
|--------------------|--------------------------|------|

Once this form is filed with LACERS, it will remain in effect until replaced with a new designation form. If your marital/domestic partnership status changes in the future, you will need to file a new designation form with LACERS in order to change your beneficiary.

Secondary Beneficiary(ies)

If the primary beneficiary(ies) named on the first page of this form are deceased, I then designate the following secondary beneficiary(ies):

| | | | |
|----------------|-----------------------------------|------------------|-----|
| Name | | Date of Birth | |
| Relationship | Social Security Number (Optional) | Telephone Number | |
| Street Address | City | State | Zip |

| | | | |
|----------------|-----------------------------------|------------------|-----|
| Name | | Date of Birth | |
| Relationship | Social Security Number (Optional) | Telephone Number | |
| Street Address | City | State | Zip |

| | | | |
|----------------|-----------------------------------|------------------|-----|
| Name | | Date of Birth | |
| Relationship | Social Security Number (Optional) | Telephone Number | |
| Street Address | City | State | Zip |

| | | | |
|----------------|-----------------------------------|------------------|-----|
| Name | | Date of Birth | |
| Relationship | Social Security Number (Optional) | Telephone Number | |
| Street Address | City | State | Zip |

| | |
|--------------------|------|
| Member's Signature | Date |
|--------------------|------|

| | |
|------------|--------------------------|
| Print Name | Contact Telephone Number |
|------------|--------------------------|

**IMPORTANT INFORMATION —
PLEASE READ BEFORE DESIGNATING A BENEFICIARY**

1. SURVIVORSHIP BENEFITS FOR THE MEMBER'S SPOUSE/DOMESTIC PARTNER

If you (the LACERS Member) have worked for the City for at least five years and die before retirement, your surviving spouse or domestic partner may be eligible for a lifetime monthly pension. This is a very valuable benefit because a survivorship pension gives your spouse/domestic partner a lifetime income. Your spouse/domestic partner is not automatically entitled to a lifetime survivorship benefit if you die while still employed.

Your spouse may qualify for survivorship benefits (a lifetime monthly pension) **only if:**

- A. Your spouse is your designated beneficiary for all your contributions; **or**
- B. You have no designated beneficiary on file, in which case your spouse would receive all your contributions if you die.

Your domestic partner may qualify for survivorship benefits (a lifetime monthly pension) **only if:**

- A. Your domestic partnership form is on file with LACERS and satisfies LACERS requirements; **and**
- B. Your domestic partner is your designated beneficiary for all your contributions.

If you want your spouse/domestic partner to have the financial protection of a lifetime pension, it is very important that you keep your beneficiary designation up to date. If you designate anyone else to receive any of your contributions, your spouse/partner loses the right to receive a lifetime survivorship pension upon your death. If your marital or partnership status changes, this does not change your beneficiary designation on file with LACERS. Only you (the LACERS Member) can change your beneficiary designation.

2. COMMUNITY PROPERTY LAW

When you (the LACERS Member) are married, your spouse acquires a community property interest in your contributions with LACERS. If you choose to designate someone other than your spouse as a beneficiary for your LACERS contributions (which disqualifies your spouse from receiving a lifetime pension in the event you die before retirement - see above), your designation is only good for your share of your contributions unless your spouse consents in writing that his/her share is also to be paid to your designated beneficiary.

Your spouse does not have to consent to your designation. If your spouse does not consent, then your spouse would be paid his/her community share in the event of your death. If your spouse signs consenting to your designation of someone else to receive your contributions, this means that if you die your spouse will receive no lifetime pension and no contributions. **You and your spouse both need to be fully aware of the financial benefits that your spouse will lose, should you die before retirement, if you designate someone other than your spouse to get any of the contributions and if your spouse consents to this designation.**

Please call LACERS at (800) 779-8328 if you would like to obtain a LACERS *Spousal Consent to Designation of Beneficiary* form or if you have any questions.

ADA NOTICE

As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and, upon request, will provide reasonable accommodations to ensure equal access to its programs, services and activities.