



Post-Retirement Survivor Benefits:  
For Retired Members

PUB 60

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## INTRODUCTION

It is a sad and difficult time whenever a family member passes away. While there is no way to replace or adequately compensate for the loss of a loved one, you will be comforted in knowing that relatives and beneficiaries of deceased CalPERS members may be entitled to survivor benefits.

This publication contains information about the types of CalPERS survivor benefits that may be payable and who is entitled to receive the benefits after the death of a CalPERS member.

Please take a few moments to review the information in this publication and the accompanying cover letter to determine what type of CalPERS survivor benefits to which you or a family member may be entitled.

In order to receive survivor benefits, you must apply. Once CalPERS receives a completed application along with all the required supporting documents, such as a death certificate and tax forms, we will process the application.

If your application is approved, payment of eligible benefits usually begins within 45 days after we receive your application and all the supporting documents.

### **Need Help?**

If you have additional questions about CalPERS survivor benefits or need assistance with filling out the application forms, please visit the CalPERS website at **[www.calpers.ca.gov](http://www.calpers.ca.gov)** or call CalPERS toll free at **888 CalPERS** (or **888-225-7377**).

### **Domestic Partner**

A legally recognized domestic partner has the same legal rights and duties as a spouse under California law. That means a domestic partner of a CalPERS member has the same right to a CalPERS benefit as a spouse of a member.

## **BENEFIT OPTIONS**

The benefits payable to a retired CalPERS member's beneficiary depend on the retirement benefit option the member elected at retirement, the member's marital status or legal domestic partnership status, and the benefits provided by the member's former employers. Because several factors affect the benefits, it is not possible to determine specifically what benefits are payable in your case until the retiree's file and the information submitted on the *Application for Retired Member/Payee Survivor Benefits* form are reviewed.

### **Prorated Allowance**

A retiree's monthly benefit payment stops on the date of the member's death. A final payment will be made, which is prorated for the number of days the member lived during the month of death.

For example, if the date of death is May 25, the prorated allowance will be  $\frac{25}{31}$  of the **monthly retirement benefit** payable on June 1.

You can refer to the retiree's last benefit warrant to determine the amount of their monthly retirement benefit.

### **One-Time Payments**

#### **Retired Death Benefit**

The state retiree death benefit is \$2,000. The school retiree benefit is a *minimum* of \$2,000. For other employers, the benefit is a minimum of \$600. Schools and public agencies may contract with CalPERS for higher amounts. All Retired Death Benefit amounts are subject to change with legislation.

If the retiree had service with more than one employer, the highest amount contracted for by any of the member's employers will be paid.

If the retiree worked under another California public retirement system after leaving CalPERS-covered employment, a similar benefit will be paid by the other retirement system, and CalPERS will **not** pay the Retired Death Benefit.

#### **Return of Remaining Contributions Option 1**

If the retiree elected this option at retirement, upon death, any unused member contributions in the member's account will be paid to the member's beneficiary in a lump sum. This option does not provide a continuing allowance to a beneficiary. In most cases, member contributions are depleted in 10 to 12 years after retirement.

#### **Temporary Annuity**

If the retiree elected to receive a Temporary Annuity until a specific age and died before receiving all those monthly payments, the balance will be paid to the beneficiary in a lump sum.

## Monthly Benefits

### **Option 2 or Option 2W (for retirement dates on or before December 31, 2017)**

#### **100 Percent Beneficiary Option 2 or 100 Percent Beneficiary Option 2 with Benefit Allowance Increase (for retirement dates on or after January 1, 2018)**

If the retiree chose one of these options, the member took a reduction to name a specific person to receive a lifetime benefit equal to the retiree's benefit. However, if the Survivor Continuance benefit is payable to another person, the combined total of the two benefits will equal the monthly amount received by the retiree. For example, a child may be named as the Option 2 beneficiary, while the spouse qualifies for Survivor Continuance.

### **Option 3 or Option 3W (for retirement dates on or before December 31, 2017)**

#### **50 Percent Beneficiary Option 3 or 50 Percent Beneficiary Option 3 with Benefit Allowance Increase (for retirement dates on or after January 1, 2018)**

If the retiree chose one of these options, the member took a lesser reduction to name a specific person to receive a lifetime benefit equal to  $\frac{1}{2}$  the retiree's benefit. If the Survivor Continuance benefit is payable, the total amount paid may be somewhat higher than  $\frac{1}{2}$  the retiree's benefit. If someone other than the designated beneficiary is the eligible survivor, the beneficiary's payment will not include the Survivor Continuance. For example, a child may be named as the Option 3W beneficiary, while the spouse qualifies for Survivor Continuance.

### **Option 4 (for retirement dates on or before December 31, 2017)** **Flexible Beneficiary Option 4 (for retirement dates on or after January 1, 2018)**

This retirement option is customized for each retiree. You must contact CalPERS for more information if the retiree chose this option.

## **Survivor Continuance**

This benefit may be payable if the retiree's former employer contracted to provide it. Survivor Continuance is an employer-paid monthly benefit that is either  $\frac{1}{2}$  or  $\frac{1}{4}$  of the unmodified benefit the retiree could have received. If the retiree was not covered by Social Security while working, the Survivor Continuance is  $\frac{1}{2}$ . If the retiree was covered by Social Security, the benefit is  $\frac{1}{4}$ . If the retiree was covered by Social Security during **part** of the time the person worked as a CalPERS member, the Survivor Continuance benefit will be between  $\frac{1}{4}$  and  $\frac{1}{2}$  of the retiree's unmodified benefit.

## **Beneficiary**

A person designated to receive a benefit after the death of a member or other benefit recipient. (Also, see survivor, which has a different definition, although a beneficiary and survivor may be the same person.)

## **Survivor**

A family member defined in the law as eligible to receive the Survivor Continuance benefit upon a member's death.

## **COBRA**

The Consolidated Omnibus Budget Reconciliation Act is federal legislation that allows you or a family member to continue your health plan enrollment when coverage is lost. A loss of coverage could result from the marriage of a dependent, a dependent reaching age 23, divorce, legal separation, or when the dependent covered on the health plan will not be receiving an ongoing monthly benefit.

## **Purchasing Power Protection Allowance (PPPA)**

The PPPA is a supplementary cost-of-living benefit provided to retirees when the purchasing power of their benefits falls below minimum levels established by law. If the retiree was receiving a monthly PPPA payment as a result of service with their former employer, and the beneficiary is entitled to a monthly benefit, the beneficiary will typically receive a PPPA payment. In most cases, the beneficiary's PPPA amount will be proportionate to the percentage of the monthly benefit being paid.

## **Health and Dental Insurance Benefits**

If a beneficiary is a surviving spouse, registered domestic partner or child, is eligible for a monthly death benefit, and was a covered dependent in the retiree's health plan, the beneficiary's health coverage will automatically continue.

If a beneficiary was covered in the retiree's health plan but is **not** entitled to a monthly death benefit, CalPERS will send the beneficiary information on how to enroll in COBRA for insurance continuation. COBRA (Consolidated Omnibus Budget Reconciliation Act) allows a beneficiary to directly pay premiums for specified periods to temporarily maintain lost health coverage.

Surviving family members not enrolled in the retiree's health plan may be eligible to enroll within 60 days of the retiree's death, or during any Open Enrollment period if they are receiving a monthly benefit. Contact CalPERS for more information.



## DETERMINING BENEFICIARY STATUS

### Beneficiary for One-Time Payments

The beneficiary designation for one-time (lump-sum) benefits is made at retirement; however, it can be changed at any time by filing a new beneficiary designation.

If any of the following events occur after the deceased member filed a beneficiary designation, the designation is automatically revoked:

- Marriage or registration of domestic partnership;
- Dissolution or annulment of marriage or dissolution of domestic partnership (however, a designation filed **after** the initiation of a dissolution of marriage/partnership or annulment is **not** revoked when the dissolution or annulment is finalized);
- Birth or adoption of a child.

If there is no valid beneficiary designation in effect at the time of death, the lump-sum death benefits are payable to the beneficiary designated by law, in this order:

1. Spouse or domestic partner legally recognized in California, or if none,
2. Children (including adopted children), or if none,
3. Parents, or if none,
4. Brothers and sisters, or if none,
5. Probated estate, or if the estate is not probated,
6. Trust, or if none,
7. Stepchildren, or if none,
8. Grandchildren (including step-grandchildren), or if none,
9. Nieces and nephews, or if none,
10. Great-grandchildren, or if none,
11. Cousins.

If no beneficiary can be located, the benefit may be claimed by the person who paid the funeral expenses.

## Beneficiary for Monthly Allowances

If the member's retirement election form (or a subsequent election form) indicates an election of one of the following options, the beneficiary may be entitled to a monthly allowance:

- Option 2, 2W, 3, 3W, or 4
- 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

## Recipient of Survivor Continuance

This benefit is generally payable to a surviving spouse who was married to the member at least one year prior to the retirement date and continuously to the date of death or a domestic partner in a partnership legally recognized in California at least one year prior to the retirement date and continuously to the date of death. However, this requirement may be waived for some members with a CalPERS disability retirement effective January 1, 1989, or later. In this case, the marriage or establishment of domestic partnership can be anytime before retirement and be continuous to the date of death.

If there is no surviving eligible spouse or domestic partner, the allowance may be payable to unmarried children under age 18. Their Survivor Continuance is payable until they reach age 18, marry, or enter into a registered domestic partnership. The allowance may also be payable to an unmarried disabled child if the disability occurred prior to age 18 and continued without interruption to the retiree's death. The disability must make the unmarried child incapable of self-support and unable to be gainfully employed. If more than one child is entitled, the benefit will be divided equally.

If no spouse, domestic partner, or children are eligible for this benefit at the time of the member's passing, it may be paid to a surviving parent who was dependent on the retiree for at least ½ of their support. If you believe a parent may be entitled to this benefit, contact CalPERS for additional information.

## APPLYING FOR BENEFITS

The person entitled to the benefits should complete the *Application for Retired Member/Payee Survivor Benefits* form.

### Spouse or Domestic Partner Entitlement to a Monthly Benefit

It may be possible for CalPERS to begin payments to an eligible spouse or domestic partner before the completed application and death certificate are received. If adequate information about the spouse or domestic partner was obtained when the death was reported, CalPERS will review our records as quickly as possible and determine if the spouse or domestic partner qualifies for an automatic continuation of the benefit. In these circumstances, CalPERS will instruct the spouse or domestic partner not to return the benefit warrants issued after the retiree's date of death and instead we will deduct any overpaid amount from the future benefits. Spouses and domestic partners who qualify for automatic continuation of the benefits must return the application and death certificate within 30 days to avoid suspension of the monthly benefit.

### Returning Warrants Issued After Death

Unless you are an eligible spouse or domestic partner that qualifies for an automatic continuation of the benefits, all benefit warrants issued to a retiree after their death must be returned to CalPERS.

Do not return warrants to the State Controller's Office or write "void" on them. The warrants must be returned to CalPERS. If the warrants were cashed, submit a personal check or money order made payable to CalPERS. If the benefit warrants were deposited directly into a bank account, you should contact the bank first to ensure that they have not already returned the payments to CalPERS at our request. (You will receive a copy of this request letter if we notify the bank to return funds.) The reimbursement payment should be identified as "Death Overpayment" and include the member's name and Social Security number or CalPERS ID. Payment should be returned with the completed application and other applicable forms described in this publication.

### Label All Forms

Be sure to include the deceased's Social Security number or CalPERS ID on all forms, documents, and checks submitted to CalPERS.

### CalPERS ID

If you do not know the CalPERS ID (a 10-digit identification number) of the deceased, please use their Social Security number. You do not need to contact CalPERS.

### **Label All Documents**

Please clearly write the deceased's name and Social Security number or CalPERS ID (a 10-digit identification number) on the top right-hand corner of each photocopied document.

### **Important!**

Be sure to include a photocopy of the **death certificate** with your application.

### **Send Photocopies, Not Original Documents**

CalPERS cannot return original documents. If you send originals, they will be destroyed. Please send photocopies of documents only.

## **Submitting an Application**

If applying for survivor benefits online, refer to the instructions within the online application process. This can be accessed through the CalPERS emailed link that is provided by either calling CalPERS or when reporting the death online.

If applying for survivor benefits via mail or fax, you must complete the following forms (step-by-step instructions for each form are included in this publication):

- *Application for Retired Member/Payee Survivor Benefits* (required)
- *Tax Withholding Election for Survivor Benefits Including Benefits Eligible for Rollover* (required)
- *Tax Withholding Election* (required for monthly and/or prorated allowance)

## **Additional Documents Required**

The following **photocopied** documents should be submitted with your claim:

- A photocopy of the death certificate (required)
- Court order (if the estate requires probate) or
- A copy of the retiree's Last Will and Testament (only if the estate is a designated beneficiary but is not subject to probate)

Please send photocopies of documents only. Do not send originals as they will be destroyed.

## FILLING OUT THE APPLICATION

### Application for Retired Member/Payee Survivor Benefits

Read the instructions and questions carefully before completing the application. Any information you provide should be based on personal knowledge. The information provided will help us determine who is entitled to the benefits. If there is not enough space to enter all the names and addresses for the identified next of kin in a section, attach a separate sheet of paper or use pages 8 and 9 of the form. Be sure to clearly write the deceased's Social Security number or CalPERS ID and name on any attachments.

#### **Signature Section**

Complete the Signature Section with your personal information and provide your Social Security or taxpayer identification number. You must have a U.S. Social Security Number (SSN) or IRS-assigned Individual Taxpayer Identification Number (ITIN) before we can make payment to you. For an estate or trust, enter the estate's or trust's Employer Identification Number instead of the Social Security number if claiming benefits as the executor or trustee.

**Your signature on this document is made under penalty of perjury under the laws of the State of California.**

#### **Information About the Deceased Member's Estate/Trust (Section 1)**

Complete Section 1 to provide information regarding the estate and/or trust of the deceased.

#### **Information About the Spouse or Domestic Partner (Section 2)**

Complete Section 2 to provide information regarding the deceased's marital status. If there is a spouse or domestic partner, provide their contact information, including the date of marriage/domestic partnership. If there is no spouse or domestic partner, provide reason, and if applicable date of death or divorce for the last spouse/domestic partner.

#### **Information About the Deceased Member's Children (Section 3)**

Section 3 asks about the deceased's surviving natural or adopted children. If the deceased was survived by children, enter total number and provide contact information for children on pages 4 and 5. If the deceased was not survived by any children, select appropriate reason.

**Only continue to Section 4 if you answered "No" in sections 1 to 3.**

#### **Information About the Deceased Member's Parents (Section 4)**

Complete Section 4 to provide information about the deceased's parents.

**Only continue to Section 5 if there is no surviving parent(s).**

#### **Retiree's Spouse or Children**

Be sure to provide as much information as possible about the retiree's spouse or children. Indicate "don't know" if you cannot answer a question.

#### **Questions?**

If you have questions or need assistance with filling out your application, please call CalPERS toll free at **888 CalPERS** (or **888-225-7377**) Monday through Friday, 8 a.m. to 5 p.m. Or, you can call during non-business hours and leave a message.

**Other Next of Kin (Section 5)**

Complete Section 5 to provide information on the deceased's next of kin. The questions should be answered in order. If you answer "Yes" to any of these questions, provide the name, address, and any other requested information on pages 8 and 9.

If you answered "No" to all next-of-kin questions, complete the funeral expenses information on the bottom portion of page 7.

## TAX FORM INFORMATION

*Please read the following information carefully before completing the form.*

### Statement of Benefits Paid and Withholding

Every January, CalPERS sends each beneficiary a statement showing the gross amount of benefits paid during the previous calendar year and the amount of income tax withheld, if any. Most payments are reported to the Internal Revenue Service (IRS) and the California Franchise Tax Board. Questions about the taxability of benefits should be directed to these agencies or your tax advisor.

### Taxpayer Identification Number

The IRS requires recipients of reportable payments to furnish a Taxpayer Identification Number (TIN). You must provide your Social Security number (or Employer Identification Number, if a trust or organization), even if you are not required to file a tax return. We will not be able to make payment to a trust or probated estate without a trust or estate tax ID number.

### Notice of Possible Penalties

If you do not have federal tax and/or California state tax withheld, or if you do not have enough withheld, you may have to pay estimated tax. You may also incur penalties. See IRS publication 505, *Tax Withholding and Estimated Tax*, for additional information.

### Changing a Tax Withholding Election

Once you file a tax withholding election for a monthly benefit, it will remain in effect until you revoke it. Because your tax situation can change from year to year, you may want to adjust the federal or California state withholding amounts deducted from your monthly benefit payment. There are a few ways to change your tax withholding:

- By mail or fax – Complete a *Tax Withholding Election* form (myCalPERS 1289) and mail or fax to CalPERS.

CalPERS  
P.O. Box 942715  
Sacramento, CA 94229-2715

Fax: (800) 959-6545

- Online – Log in to your myCalPERS account at [my.calpers.ca.gov](http://my.calpers.ca.gov).

### Employer Identification Number Required for Estates and Trusts

If the probated estate or trust does not have an Employer Identification Number (EIN), you can obtain one instantly (and free) at [www.irs.gov](http://www.irs.gov). Complete Form SS-4 online and the number will be provided instantly. Or call the IRS at (800) 829-4933.

**Obtaining an  
Individual Taxpayer  
Identification Number**

You can obtain Form W-7 at [www.irs.gov](http://www.irs.gov). Complete the form and submit it to the IRS.

If you need help completing the *Tax Withholding Election* form, call us at **888 CalPERS** (or **888-225-7377**) so we can assist you. However, since we cannot provide tax advice, you should contact your tax consultant, the Internal Revenue Service, and/or the California Franchise Tax Board for specific information on your tax related needs.

**Foreign Residency**

If you are a resident or citizen of a country other than the United States, complete sections 1 and 4 only of the enclosed *Tax Withholding Election* form (myCalPERS 1289). You must complete this form before CalPERS can pay benefits. You must have a U.S. Social Security Number (SSN) or IRS-assigned Individual Taxpayer Identification Number (ITIN) before we can make payment to you. If you are a United States citizen living in another country, you must complete all sections of the tax election form that may be applicable to you.



## FILLING OUT OTHER FORMS

### Tax Withholding Election for Survivor Benefits Including Benefits Eligible for Rollover

#### **Lump-Sum (Non-Periodic Payments) Return of Remaining Contributions Option 1, Temporary Annuity, and/or Retired Death Benefit (Section 1 and Section 2)**

Indicate your federal and California state tax withholding elections for these payments in Section 1 and Section 2. You may elect different withholding or rollover options for the Retired Death Benefit payment than for the Option 1 and Temporary Annuity payments.

Death benefits may be non-taxable, partially taxable, or fully taxable. Any taxable portion of the benefit will be subject to **20 percent** federal withholding unless rolled over into an IRA. The non-taxable portion of the distribution is not eligible for rollover. That portion will be paid with no taxes deducted and will be reported to the tax authorities as a non-taxable benefit.

Special tax rules apply to eligible rollover distributions. Consult a tax advisor before making your tax election for these benefits.

#### **Spouse or Ex-Spouse Awarded a Community Property Interest**

Complete the enclosed *Tax Withholding Election for Survivor Benefits Including Benefits Eligible for Rollover* form (myCalPERS 1192). Federal law allows a spouse or ex-spouse awarded the community property interest of a benefit, the right to roll the taxable portion of any lump-sum benefit into a “qualified IRA” or an “inherited IRA” account.

#### **Domestic Partner Non-Spouse Beneficiaries**

Complete the enclosed *Tax Withholding Election for Survivor Benefits Including Benefits Eligible for Rollover* form (myCalPERS 1192). At this time federal law does not recognize a domestic partner as a spouse for federal tax purposes.

If you are a California resident, CalPERS will automatically withhold **3 percent** from the taxable portion of any one-time benefit payments for state taxes unless you elect not to have tax withheld.

If you do not live in California, state tax will not be withheld unless you make an election for state withholding. If you are unsure whether you will be subject to California state taxes, contact the California Franchise Tax Board or seek the advice of a qualified tax consultant.

#### **Tax Election Declaration (Section 3)**

Be sure to sign and date the form and provide your Social Security number or taxpayer identification number in Section 3. For a trust, enter the trust’s Employer Identification Number instead of the Social Security number.

#### **Important**

Please consider your election carefully. Once payment has been issued, you cannot make a change. Your decision is final once payment has been made.

Federal law provides that non-spouse beneficiaries are also subject to mandatory 20 percent withholding on the taxable portion of the benefit unless rolled into an IRA established on your behalf that will be treated as an “inherited IRA” pursuant to the provision of IRC section 402(c)(11).

“Non-spouse beneficiaries” are non-spouse beneficiaries designated by the member or designated by the plan under the Government Code. Generally, this includes all non-spouse beneficiaries except the deceased’s estate, a designated corporation or non-profit organization or entitlement established under Probate Code section 13100.

If CalPERS determines that you do not have the right to roll the taxable portion into an IRA, we will send a special tax form at that time.

## **Working with a Form**

Be sure to read the instructions and questions carefully before completing any of the forms.

## **Tax Withholding Election**

If you are receiving a monthly benefit or the one-time Prorated Allowance payment, indicate your federal and California state tax withholding elections for these benefits by completing this form.

### **Your Information (Section 1)**

Complete Section 1 with your personal information and provide your Social Security or taxpayer identification number. You must have a U.S. Social Security Number (SSN) or IRS-assigned Individual Taxpayer Identification Number (ITIN) before we can make payment to you. For an estate or trust, enter the estate's or trust's Employer Identification Number. A Social Security number is not acceptable to pay an estate or trust.

If you are a resident or citizen of a country other than the United States, or if you are a United States citizen living in another country, complete the Citizenship and Residency fields.

For the Retirement Program and Account field, select the CalPERS and Death Benefits options.

### **Federal Tax Withholding Election (Section 2)**

Complete Section 2 to indicate your federal tax withholding election. This section has 4 steps to complete. Only step 1 is required. Complete steps 2-4 only if they apply to you.

These benefit payments are treated as payroll wages. Federal tax will be withheld based on the tax rate of a single person unless you elect no withholding or select a different marital status. If no election is submitted and the rate of single is used, the highest amount of federal tax will be withheld if the gross monthly payment is at or greater than the IRS minimum level to withhold.

### **California State Tax Withholding Election (Section 3)**

Complete Section 3 to indicate your California state tax withholding election.

If you are a California resident, CalPERS will automatically withhold state tax based on the tax rate of a single person claiming zero exemptions unless you elect no withholding, have a flat amount withheld, or select a different marital status or number of exemptions. If no election for state withholding is submitted and the rate of single with zero exemptions is used, the highest amount of state tax will be withheld if the gross monthly payment is at or greater than the California Franchise Tax Board minimum level to withhold.

If you do not live in California, CalPERS will not withhold state tax unless you make an election for state withholding. If you are unsure whether you will be subject to California state taxes, contact the California Franchise Tax Board or seek the advice of a qualified tax consultant.

**Signature and Date (Section 4)**

Be sure to sign and date the form or your elections will not be considered valid.

**Certification of Trust**

If the beneficiary is a trust, the trustee should complete the *Certification of Trust* form.

## HOW TO GET MORE INFORMATION

### CalPERS Website

Visit our website at [www.calpers.ca.gov](http://www.calpers.ca.gov) for more information on all our benefits and services.

### 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

## 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.*



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**California Public Employees' Retirement System**  
400 Q Street  
Sacramento, California 95811

**888 CalPERS (or 888-225-7377)**  
[www.calpers.ca.gov](http://www.calpers.ca.gov)

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