New York State Teachers' Retirement System  
10 Corporate Woods Drive, Albany New York 12211-2395

**ELECTION OF RETIREMENT BENEFIT**

NYSTRS must receive this form within 30 days of your retirement date if you did not elect a payment option or you want to change your option and/or beneficiary. Read the instructions and option descriptions on page 2. If you make a mistake: Draw a line through the error, enter the corrected information, and initial your change. Please do not make any stray marks.

Name | EmplID | Social Security #
--- | --- | ---

Please review the option descriptions on the reverse side and check one box below for the form of benefit you want.

- **Maximum** - Do not designate a beneficiary if you select this option.
- **Lump Sum Options**
  - Annuity Reserve (Tier 1 & 2 only)  
  - Declining Reserve 4% (Tier 1 only)
- **Guarantee Options**
  - 5 Year
  - 10 Year
- **Survivor Options**
  - 100%
  - 50%
  - 25%
- **Pop-up Survivor Options**
  - 100%
  - 50%

- **Largest Non-Declining Lump Sum Payment to a Beneficiary** (Tier 1 members should note that the beneficiary payment under this option is less than the initial payment under the Declining Reserve 4%. However, this option provides the largest fixed lump sum payment to your beneficiary(ies).)

- **Alternative Option** - Please provide a specific description below:

**Do not** complete this beneficiary section if you elected the Maximum benefit above. If you elected a Survivor or Pop-up Survivor Option above, you may elect only one beneficiary.

<table>
<thead>
<tr>
<th>Beneficiary Name</th>
<th>Date of Birth</th>
<th>Primary</th>
<th>Contingent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street</td>
<td>Relationship</td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>Zip Code</td>
<td>Social Security #</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Beneficiary Name</th>
<th>Date of Birth</th>
<th>Primary</th>
<th>Contingent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street</td>
<td>Relationship</td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>Zip Code</td>
<td>Social Security #</td>
</tr>
</tbody>
</table>

*Per the Internal Revenue Code, the percentage available under a Survivor option or Pop-Up Survivor option may be limited when the beneficiary named is not the member’s spouse and the beneficiary is more than 10 years younger than the member.

**This form must be signed and acknowledged before a Notary Public in order to be valid**

**Signature of Retiree**

State of ______________________, County of ______________________ On this ________ day of __________________, 20____ before me the undersigned, personally appeared ____________________________________________________________________________________________, (Print Applicant’s Name) personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument, and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Printed Name of Notary: ____________________________________________________________________________________________

Signature of Notary: ____________________________________________________________________________________________

Affix Stamp (include expiration date)
DESCRIPTION OF MAXIMUM AND OPTIONAL BENEFITS

We must receive any change in your option election within 30 days after your effective date of retirement. After that 30-day period, your election is irrevocable. If you are retiring for disability, this form must be received within 30 days after the date your retirement becomes effective or within 30 days from the date the Retirement Board approves your application, whichever is later. If you do not make an election, you will be retired under the Maximum. Forms will be considered filed on the day they are mailed if they are mailed by registered or certified mail via the U.S. Postal Service, or by an equivalent delivery service that provides mail tracking and is approved for use by the System. Please see the Contact Us > Get in Touch page at NYSTRS.org for a list of delivery services currently approved by the System.

MAXIMUM - Do not designate a beneficiary if you select this option.

This election will provide you with the largest possible annual benefit. All payments will cease at your death.

LUMP SUM OPTIONS - You may designate multiple primary and/or contingent beneficiaries under these options.

Annuity Reserve - This option is only available to Tier 1 or 2 members who do not withdraw their Annuity Savings Fund (ASF) at retirement. The Annuity Reserve is the total in your ASF at retirement. If your death occurs before your Annuity Reserve has been paid, the balance will be paid in a lump sum to your beneficiary. If death occurs after your Annuity Reserve has been paid, all payments will cease at your death.

Declining Reserve 4% - This option is only available to Tier 1 members. The Total Reserve is the Pension Reserve established at the time of your retirement plus the balance in your Annuity Savings Fund, if any. If your death occurs before the Total Reserve has been paid, the balance will be paid in a lump sum to your beneficiary. If death occurs after the Total Reserve has been paid, all payments will cease at your death. There is a variation of this option based on a 7% interest rate that would result in a smaller Total Reserve but a larger monthly payment; please contact us if this interests you.

Largest Non-Declining Lump Sum Payment to a Beneficiary – This option will provide all members with the largest possible non-declining lump sum payment to a beneficiary. Tier 1 members should note that although the payment to a beneficiary under this option will be less than the Total Reserve initially established under the Declining Reserve 4% option, the lump sum payment under this option does not decrease over time. If you desire a lesser lump sum payment to your beneficiary, you should select the Alternative Option and indicate the lump sum payment desired. This option is not available to Tier 3 members retiring under Article 14.

GUARANTEE OPTIONS - You must designate only one primary beneficiary. Multiple contingent beneficiaries are allowed.

If you predecease your beneficiary within 5 or 10 years of the date of your retirement, your beneficiary will receive the same monthly payment you were receiving for the remainder of the 5- or 10-year period. If you live beyond the 5- or 10-year guaranteed period, your benefit will cease at your death. If your primary beneficiary begins to receive payments and dies before the 5- or 10-year guaranteed period expires, the commuted value of any installments due will be paid in a lump sum to your contingent beneficiary.

SURVIVOR OPTIONS AND POP-UP SURVIVOR OPTIONS - You must designate only one primary beneficiary under these options. Contingent beneficiaries are not allowed.

If your beneficiary survives you, your beneficiary will receive the designated percentage of your reduced benefit throughout your beneficiary’s lifetime. You may be required to provide proof of date of birth for your beneficiary. Under the Pop-up Survivor Option your benefit will increase to the maximum if your beneficiary predeceases you. Your beneficiary designation may not be changed more than 30 days after your date of retirement. The 25% and 75% pop-up options are not available to Tier 3 members electing to retire under Article 14. If your spouse is your surviving beneficiary under these options, your spouse will receive 50% of the COLA to which you would have been entitled had you continued to live. Per the Internal Revenue Code, the percentage available under a Survivor option or Pop-Up Survivor option may be limited when the beneficiary named is not the member’s spouse and the beneficiary is more than 10 years younger than the member.

ALTERNATIVE OPTION

Tier 3 members electing to retire under Article 14 may only request an Alternative Option that provides a survivor option of 1% to 90% at their death. All other members may request any variation of a Lump Sum, Guarantee, Survivor, or Pop-up Option that is reasonable and can be computed actuarially.

Please call us at (800) 348-7298, Ext. 6250 if you need help completing this form.