

# **PERACHOICE**

THE PERA DEFINED BENEFIT PLAN AND THE PERA DEFINED CONTRIBUTION PLAN

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## INTRODUCTION

Colorado PERA was established in 1931 by the Colorado General Assembly at the request of a group of State employees who foresaw the need for a safe and secure retirement system. PERA predates the creation of Social Security and most PERA members do not contribute to Social Security.

PERA currently serves over 600,000 public employees. PERA is governed by a 16-member Board of Trustees, 12 of whom are elected by the membership. The Board works closely with elected officials to ensure the soundness of one of the state's largest financial institutions.

## **PERACHOICE**

PERAChoice is the option some eligible employees have to choose between the PERA Defined Benefit (DB) Plan and the PERA Defined Contribution (DC) Plan. You have 60 calendar days from your date of hire to make a choice between Plans. If you do not make an active choice in that 60 days, you'll be automatically enrolled in the PERA DB Plan. You will also have a one-time option of switching between the PERA DB and DC Plans between years two and five of participation.

# PERACHOICE ELIGIBILITY REQUIREMENTS

You may be eligible to participate in PERAChoice if you are:

- » A State of Colorado employee hired on or after January 1, 2006.
- » A community college employee hired on or after January 1, 2008, at one of the institutions listed on page 1.
- » A classified college or university employee in the State personnel system hired on or after January 1, 2019.
- » A Local Government Division employee hired on or after January 1, 2019.

If PERA has received contributions on your behalf from another PERA employer in the last 12 months, you must return to the Plan in which you previously participated. PERA retirees are not eligible to participate.









Both PERA DB and PERA DC Plan contributions are tax deferred, which means reduced current state and federal income taxes.

If PERA has not received contributions on your behalf in the past 12 months, and you are not a PERA retiree, you are eligible to participate in PERAChoice. (The term PERA retiree includes retirees of the Denver Public Schools Retirement System who retired prior to January 1, 2010, and PERA retirees under the Denver Public Schools [DPS] benefit structure after January 1, 2010.)

## COMMUNITY COLLEGES ELIGIBLE TO PARTICIPATE IN PERACHOICE:

- » Arapahoe Community College
- » Colorado Community College System
- » Colorado Northwestern Community College
- » Community College of Aurora
- » Community College of Denver
- » Front Range Community College
- » Lamar Community College
- » Morgan Community College
- » Northeastern Junior College
- » Otero Junior College
- » Pikes Peak Community College
- » Pueblo Community College
- » Red Rocks Community College
- » Trinidad State Junior College

## **AVAILABLE PLANS**

PERA has two types of Plans—a DB Plan and a DC Plan. Both Plans are considered 401(a) plans and are created under that section of the Internal Revenue Code. The PERA DB Plan is a pension plan where your contributions are invested by professionals for you and you receive a lifetime benefit. In the PERA DC Plan, you direct your investments to an array of fund options, and retire with the account balance you have at that time.

#### PERA DEFINED BENEFIT AND DENVER PUBLIC SCHOOLS (DPS)

If you are under the DPS benefit structure and you become eligible for PERAChoice because you had a 12-month break in service, and choose the PERA DB Plan, you will be entitled to another choice of which DB benefit structure to participate in. If you are eligible for this additional choice, PERA will notify you by sending you the materials you need to make this choice. If you have any questions about your eligibility for this additional choice and your options under this choice, call PERA at 1-800-759-7372.

## **COMPARE YOUR OPTIONS**

As a new State of Colorado, community college, Local Government Division, or State-classified college or university employee, you may select from the two types of retirement plans offered by PERA. Whether you are comfortable investing for your retirement or would like the security of a set lifetime benefit, PERA has an option for you. The following pages outline the differences between the PERA DB and the PERA DC Plans. See the chart below and the "Retirement Plan Assessment" on page 3 to help you make your decision.

#### PERA DB AND PERA DC PLAN COMPARISON CHART

Lifetime retirement benefit (pension)   Yes   No   4     Retirement benefit dependent on the success of your investment choices   No   Yes   No   Yes     Potential annual increase to retirement benefit   Yes   No   Yes   4     You manage your own investments   No   Yes   No   4     PERA invests on your behalf   Yes   No   4     Access to survivor benefits   Yes   No   5     Access to survivor benefits   Yes   No   5     Access to disability benefits   Yes   No   5     Access to BERACare Health Benefits Program for retirees   Yes   Yes   No   5     Access to life insurance   Yes   Yes   6     Access to PERAPlus 401(k) and 457 Plans   Yes   Yes   Yes   6     Investment advice available   Available in the voluntary PERAPlus programs   Yes, you will receive a percentage of employer contributions, of service and retirement eligibility   Yes   8     Social Security offset applies   Yes   Yes   Yes   8		PERA DB Plan	PERA DC Plan	See Page for Details
Retirement benefit dependent on the success of your investment choices  Potential annual increase to retirement benefit Yes No 4  You manage your own investments No Yes 4  PERA invests on your behalf Yes No 4  Access to survivor benefits Yes No 5  Access to disability benefits Yes No 5  Access to PERACare Health Benefits Program for retirees Yes Yes Only if you purchase a lifetime annuity upon termination of PERAcovered employment Access to life insurance Yes Yes Yes Access to PERAPlus 401(k) and 457 Plans Yes Investment advice available Available in the voluntary PERAPlus programs Receive a percentage of employer contributions, or a match, if you withdraw your account Ees Not directly Yes 8  Yes 8  Yes 9  Yes, you will receive a percentage of your employer contributions based on years of participation PERAPILIS PORTION OF ACCESS OF A	How Each Plan Works			
Potential annual increase to retirement benefit  Potential annual increase to retirement benefit  Yes  No  Yes  4  PERA invests on your behalf  Yes  No  4  Access to survivor benefits  Yes  No  5  Access to disability benefits  Yes  No  5  Access to PERACare Health Benefits Program for retirees  Yes  Yes  Only if you purchase a lifetime annuity upon termination of PERAcovered employment  Access to life insurance  Yes  Yes  Yes  Yes  6  Access to PERAPlus 401(k) and 457 Plans  PERAPlus programs  Receive a percentage of employer contributions, or a match, if you withdraw your account  PERAPLUS programs  Yes, depending on years of service and retirement eligibility  Peraphological in the voluntary perentage of your employer contributions based on years of participation  Fees  Not directly  Yes  No  4  PERAPOLOGICAL TORS  Yes  Yes  Available in the voluntary a percentage of your employer contributions based on years of participation  Yes  8	Lifetime retirement benefit (pension)	Yes	No	4
You manage your own investments  No Yes  PERA invests on your behalf Yes  No 4  Access to survivor benefits Yes  No 5  Access to disability benefits Yes  No 5  Access to PERACare Health Benefits Program for retirees  Yes  Only if you purchase a lifetime annuity upon termination of PERAcovered employment  Access to life insurance Yes  Yes  Yes  Access to PERAPlus 401(k) and 457 Plans Yes  Investment advice available  Available in the voluntary PERAPlus programs  Receive a percentage of employer contributions, of service and retirement eligibility  Fees  No Yes  Yes  Yes  Yes  Yes  Yes  Fes, you will receive a percentage of your employer contributions based on years of participation  Fees  Not directly  Yes  8		No	Yes	4
PERA invests on your behalf  Yes  No  Access to survivor benefits  Yes  No  5  Access to disability benefits  Yes  No  5  Access to PERACare Health Benefits Program for retirees  Yes  Only if you purchase a lifetime annuity upon termination of PERAcovered employment  Access to life insurance  Yes  Yes  Yes  6  Access to PERAPlus 401(k) and 457 Plans  Yes  Yes  Yes  Yes  6  Investment advice available  Available in the voluntary PERAPlus programs  Receive a percentage of employer contributions, or a match, if you withdraw your account  Yes, depending on years of service and retirement eligibility  Not directly  Yes  8	Potential annual increase to retirement benefit	Yes	No	4
Access to survivor benefits  Yes  No  5  Access to disability benefits  Yes  No  5  Access to PERACare Health Benefits Program for retirees  Yes  No  Only if you purchase a lifetime annuity upon termination of PERAcovered employment  Access to life insurance  Yes  Yes  Yes  6  Access to PERAPlus 401(k) and 457 Plans  Perapellus programs  Receive a percentage of employer contributions, or a match, if you withdraw your account  Yes, depending on years of service and retirement eligibility  Perapellus Programs  Yes, you will receive a percentage of your employer contributions based on years of participation  Not directly  Yes  8	You manage your own investments	No	Yes	4
Access to disability benefits  Yes  Only if you purchase a lifetime annuity upon termination of PERAcovered employment  Access to life insurance  Yes  Yes  Yes  Access to PERAPlus 401(k) and 457 Plans  Receive a percentage of employer contributions, or a match, if you withdraw your account  Pees  Not directly  Yes  No  Only if you purchase a lifetime annuity upon termination of PERAcovered employment  Access to life insurance  Yes  Yes  Yes  6  Available in the voluntary PERAPlus programs  Yes, depending on years of service and retirement eligibility  Not directly  Yes  8	PERA invests on your behalf	Yes	No	4
Access to PERACare Health Benefits Program for retirees  Yes  Only if you purchase a lifetime annuity upon termination of PERAcovered employment  Access to life insurance  Yes  Yes  Yes  6  Access to PERAPlus 401(k) and 457 Plans  Yes  Yes  Yes  6  Investment advice available  Available in the voluntary PERAPlus programs  Receive a percentage of employer contributions, or a match, if you withdraw your account  Yes, depending on years of service and retirement eligibility  Yes, depending on years of participation  Not directly  Yes  8	Access to survivor benefits	Yes	No	5
for retirees    Comparison of Peral Covered Employment	Access to disability benefits	Yes	No	5
Access to PERAPlus 401(k) and 457 Plans  Investment advice available  Available in the voluntary PERAPlus programs  Receive a percentage of employer contributions, or a match, if you withdraw your account  Yes, depending on years of service and retirement eligibility  Eligibility  Not directly  Yes  6  Yes  7  7  7  8  Not directly  Yes, you will receive a percentage of your employer contributions based on years of participation  8  8		Yes	lifetime annuity upon termination of PERA-	6
Investment advice available  Available in the voluntary PERAPlus programs  Receive a percentage of employer contributions, or a match, if you withdraw your account  Yes, depending on years of service and retirement eligibility  Eligibility  Not directly  Yes, you will receive a percentage of your employer contributions based on years of participation  Not directly	Access to life insurance	Yes	Yes	6
Receive a percentage of employer contributions, or a match, if you withdraw your account  Yes, depending on years of service and retirement eligibility employer contributions based on years of participation  Not directly  Yes, you will receive a percentage of your employer contributions based on years of participation  8	Access to PERAPlus 401(k) and 457 Plans	Yes	Yes	6
or a match, if you withdraw your account  of service and retirement eligibility a percentage of your employer contributions based on years of participation  Fees  Not directly Yes 8	Investment advice available		Yes	7
,		of service and retirement	a percentage of your employer contributions based on years	7
Social Security offset applies Yes Yes 9	Fees	Not directly	Yes	8
	Social Security offset applies	Yes	Yes	9

#### OPPORTUNITY TO SWITCH PLANS

As a new PERAChoice participant, you will have the one-time option of switching between the PERA DB and DC Plans. During the second to fifth year of participation, you can end participation in one plan and begin participation in the other plan. See the *PERAChoice Years 2–5 Change/Transfer Form* for more information.







# RETIREMENT PLAN ASSESSMENT

By answering the following questions, you'll be better able to determine what type of plan (DB or DC) is right for you.

Are you interested in a retirement account that provides a lifetime monthly benefit?  If you answered Yes, consider the PERA DB Plan.  If you answered No, consider the PERA DC Plan.	Yes	No
Do you have dependents that rely on you for financial support?  If you answered Yes, consider the PERA DB Plan.  If you answered No, consider the PERA DC Plan.	Yes	No
Are you interested in survivor benefits?  If you answered Yes, consider the PERA DB Plan.  If you answered No, consider the PERA DC Plan.	Yes	No
Are you interested in disability benefits?  If you answered Yes, consider the PERA DB Plan.  If you answered No, consider the PERA DC Plan.	Yes	No
Do you like to manage your own investments?  If you answered Yes, consider the PERA DC Plan.  If you answered No, consider the PERA DB Plan.	Yes	No
Do you have the time and knowledge, with the help of optional investment advice, to appropriately invest for your retirement security?  If you answered Yes, consider the PERA DC Plan.  If you answered No, consider the PERA DB Plan.	Yes	No
Are you prepared to accept the risk of potentially outliving your retirement funds?  If you answered Yes, consider the PERA DC Plan.  If you answered No, consider the PERA DB Plan.	Yes	No
Are you still unsure of what type of plan to choose—DB or DC?  If you answered Yes, keep in mind that after 12 months of contributing to either the	Yes	No

If you answered No, read the subsequent pages and complete the *PERAChoice Election and Release Form* in this packet within 60 calendar days of your date of hire to start investing in your future. After 60 days, you'll be automatically enrolled in the PERA DB Plan.

PERA DB or PERA DC Plan, you can switch plans during the second to fifth years of participation.

## **HOW EACH PLAN WORKS**

#### PERA DB PLAN

- » The PERA DB Plan is a hybrid defined benefit plan. It is designed to attract and retain employees who are interested in working in PERA-covered employment for a large part of their careers, while providing greater portability than a traditional defined benefit plan.
- » The PERA DB Plan offers a lifetime retirement benefit after meeting age and service requirements and is sometimes referred to as a pension.
- » After retirement, you may receive an annual increase to your monthly retirement benefit.



See the *Retirement Process* booklet for more information.

- » A staff of investment professionals, under the direction of the PERA Board of Trustees, has the responsibility for the investment of PERA's funds. These funds are invested in common stocks of top-rated companies, corporate bonds, U.S. Treasury and other government securities, mortgages, real estate property, and other investment vehicles.
- » You receive benefits based on your Highest Average Salary (HAS), age at retirement, and number of years of service.



See the *Your PERA Benefits* booklet for more information.

- » Employees have their own unique accounts. Upon termination of employment, you have the option of doing a refund/rollover of your account regardless of your age or amount of service credit.
- » You earn a fixed interest rate on your member contributions (currently 3% compounded annually). The rate is set by the Board and is subject to change annually.

#### PERA DC PLAN

- » The PERA DC Plan is based solely on the money you have contributed and the investment earnings or losses incurred, minus expenses. The PERA DC Plan may be attractive to employees who are interested in working in PERA-covered employment for only a small portion of their careers.
- » The amount of your retirement benefit is difficult to determine given that the amount depends on the success of your investment decisions, when you begin withdrawals, and your life expectancy. With the PERA DC Plan, you bear the risk of outliving your investments.
- » You have the flexibility to make investment decisions, which also means you assume the investment risks. The PERA DC Plan is similar to a typical 401(k) plan. See pages 11–13 for information on investment options.
- » Employees have their own unique accounts.

# **MEMBER CONTRIBUTIONS**

#### PERA DB PLAN AND PERA DC PLAN

As a member of either the PERA DB or PERA DC Plan, you contribute a percentage of your monthly salary to your account. Your contributions are tax-deferred, which means they are not considered taxable income for federal and state income tax purposes until they are withdrawn through a refund or monthly benefit.

#### **MEMBER CONTRIBUTION RATES**

	State, School, Judicial, and DPS Divisions	Local Government Division	Safety Officers
July 1, 2021– June 30, 2022	10.50%	8.50%	12.50%

## **SURVIVOR BENEFITS**

#### PERA DB PLAN

If you die before retirement, PERA may provide monthly survivor benefits to your qualified survivors or a lump-sum payment to your named beneficiary(ies). Colorado state law determines who receives your PERA DB Plan account in the event of your death.



See the *Survivor Benefits* booklet for more information.

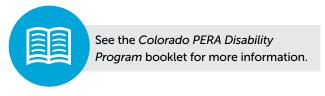
#### PERA DC PLAN

If you die before retirement, there are no continuing monthly benefits available to your qualified survivors. The balance in your PERA DC Plan account will be distributed to your named beneficiary(ies) in a lump-sum distribution. No further benefits are payable.

## **DISABILITY BENEFITS**

#### PERA DB PLAN

PERA members with five or more years of earned service credit are covered by a two-tier disability program consisting of short-term disability (STD) insurance and a disability retirement benefit. Unum, the Disability Program Administrator, makes the medical determinations for the program and provides STD coverage through an insurance policy.



#### PERA DC PLAN

There are no disability benefits associated with the PERA DC Plan. If you terminate PERA-covered employment because you became disabled, you have several options regarding the money in your account (see "Withdrawal Options: Not Retirement Eligible" on page 9). No further benefits are payable.

## PERACARE HEALTH BENEFITS PROGRAM

#### PERA DB PLAN

If you retire under PERA, you are eligible to enroll in the PERACare Health Benefits Program for retirees. You will receive information about these plans as part of your retirement process and there is an annual open enrollment each fall. The program includes premium subsidies, up to a maximum of \$230, based on your years of service credit.

#### PERA DC PLAN

The PERACare Health Benefits Program is only available if you purchase a lifetime annuity upon termination of PERA-covered employment (contact PERA for more information). There is no PERACare subsidy available to you because PERA DC Plan contributions are not allocated to the Health Care Trust Fund.

## LIFE INSURANCE

#### PERA DB PLAN AND PERA DC PLAN

Through PERA, you may purchase group, decreasing-term life insurance regardless of whether you are in the PERA DB Plan or the PERA DC Plan. You may purchase this insurance without evidence of good health when you first become a PERA member or during the annual open enrollment period, or at other times with evidence of good health. However, you may not begin coverage after you retire. Coverage for your spouse and dependent children is included with your coverage. If you leave PERA employment and

leave your member contribution account(s) with PERA, you may continue participation in the life insurance program. If you retire from the PERA DB Plan, your life insurance coverage will automatically continue unless you cancel it in writing. Premiums increase at retirement and will be deducted from your monthly benefit.

Information about the life insurance program is sent to all new members and to members not enrolled in the program during the annual open enrollment.

## PERAPLUS 401(K) AND 457 PLANS

#### PERA DB PLAN AND PERA DC PLAN

PERA encourages you to save toward your retirement needs in addition to your PERA DB or DC Plan account. The PERAPlus 401(k) and 457 Plans allow you to obtain additional, voluntary retirement savings. *Note:* You are eligible to participate in the PERAPlus 457 Plan only if you work for a PERA employer who is affiliated with the PERAPlus 457 Plan.

The PERAPlus Plans offer the same PERAdvantage investment options available in the PERA DC Plan. A Roth option is also available in the PERAPlus 401(k)/457 Plans if your employer has adopted it.

The PERAPlus 401(k) and 457 Plans have loan and hardship/unforeseeable emergency withdrawal provisions. Plan permits rollovers of money into both the PERAPlus 401(k) and 457 Plans from certain other tax-qualified plans. PERA also allows pre-tax funds in the PERAPlus 401(k)/457 Plans to be used to purchase PERA DB Plan service credit under certain conditions.

For more information about the PERAPlus 401(k)/457 Plans, visit coperaplus.org.







## **INVESTMENT ADVICE**

#### PERA DB PLAN

PERA invests your member contributions on your behalf; therefore, investment advice does not apply to the PERA DB Plan.

If you participate in the PERAPlus 401(k)/457 Plan(s) in addition to your PERA DB account, you can use investment advice, as described to the right, in those accounts.

## **VESTING**

#### PERA DB PLAN

You are considered vested in the PERA DB Plan upon completion of five years of service. Your PERA DB Plan member contributions are always 100% vested.

One year of service credit entitles you to survivor benefits, and after five years of earned service credit you are entitled to disability benefits.

Additionally, if you have five years of earned service credit and you are not retirement eligible, you are entitled to a 50% match on your contributions and interest if you refund or roll over your account upon termination of employment. Regardless of years of service, if you are retirement eligible at the time of your refund or rollover, you will receive a 100% match on your contributions and interest.

# See the Refund/Rollover Request forms for more information.

#### PERA DC PLAN

Empower, the Plan recordkeeper, offers the following investment advisory services<sup>1</sup>, powered by Financial Engines:

- » Online Advice—a no-cost service if you would like to manage your own retirement planning and investment decisions.
- » Professional Management—a fee-based service if you would prefer to have your account managed for you.

There is no guarantee provided by any party that participation in any of the advisory services will result in a profit.

For more information, go to **coperaplus.org** and select Investing Help or call 833-4-COPERA (833-426-7372).

#### PERA DC PLAN

The vesting schedule is determined by number of years of participation, not PERA service credit. One year of participation equals 12 months of contributions.

Your Contributions: 100% immediately\*

#### Your Employer's Contributions:

50%	Immediately*
60%	At the end of 1 year of participation*
70%	At the end of 2 years of participation*
80%	At the end of 3 years of participation*
90%	At the end of 4 years of participation*
100%	At the end of 5 years of participation*

<sup>\*</sup>Plus/minus investment gains/losses, minus fees.

## COSTS

#### PERA DB PLAN

You do not directly pay costs in the PERA DB Plan. PERA's operating costs are spread across all participants and are approximately \$52 per member/retiree per year.

Costs apply if you choose to participate in the PERAPlus 401(k)/457 Plans. See **coperaplus.org**, for complete information.

#### PERA DC PLAN

You will pay a Plan administration fee of \$1.00 per month. Costs apply if you choose to participate in the PERAPlus 401(k)/457 Plans. See **coperaplus.org** for complete information.

You will also pay a Plan administration asset-based fee of 0.03%. There are no other shareholder-type costs that apply.

Plan administration costs paid by participants are used by PERA for Plan expenses including Plan recordkeeping, custodial services, consulting, and internal PERA administrative expenses.

If you have a Self-Directed Brokerage Account (SDBA), you will pay an annual \$50 Self-Directed Brokerage fee (see page 11). The Plan administration asset-based fee in the SDBA will be paid directly from your PERAdvantage fund. Additional trading costs charged by TD Ameritrade may apply. The SDBA is intended for knowledgeable investors who understand the risks associated with the SDBA.

If you enroll in the Plan's professional management program, you will pay a fee of approximately \$4 per month for every \$10,000 in your account. Fees are proportionately lower for accounts with balances over \$100,000. Professional Management fees are charged in the frequency and manner detailed in the Advisory Services Agreement. Monthly fee examples are for illustrative purposes only.

Fees are subject to change at any time. A complete fee schedule is available on **coperaplus.org**.

# WITHDRAWAL OPTIONS: NOT RETIREMENT ELIGIBLE

#### PERA DB PLAN

- » When you terminate PERA-covered employment, you may take a refund/rollover of your PERA DB account or you may leave your account at PERA.
- » If you leave your account at PERA when you terminate employment, you can receive a monthly lifetime benefit when you become retirement eligible.
- » You must start required minimum distributions according to IRS guidelines.
- » If you choose to refund/rollover your PERA DB account, you may be eligible for a match on your account balance. Effective January 1, 2011, under the PERA benefit structure, if you have five years of earned service credit and you are not eligible for retirement, you will receive a 50% match on contributions and interest.
- » If you do not have five years of earned service credit and you are not eligible for retirement, you will receive a 50% match on contributions and interest received on or before December 31, 2010, and you will not receive a match on contributions and interest received on or after January 1, 2011.



See the *Refund/Rollover Request* forms for more information.

#### PERA DC PLAN

- » When you terminate PERA-covered employment, you have several choices regarding the money in your DC Plan account. You may do one of the following with your account:
  - You can leave the money in the Plan.
  - · You can request installment payments.
  - You can roll over the balance to another qualified plan, 403(b), governmental 457 plan, or an IRA.
  - You can take the money in cash, called a lump-sum distribution.
  - You may consider using a portion of your account balance to create lifetime income through immediate annuities or a qualified longevity annuity contract (QLAC). For more information contact Empower at 833-4-COPERA (833-426-7372). (Access to the PERACare Health Benefits Program is available if you choose this option. See page 6.)
  - You must start required minimum distributions according to IRS guidelines.
- » If you take a rollover/refund of your account, you will receive 100% of your member contributions and a percentage of your employer contributions based on the PERA DC Plan vesting schedule, plus/minus investment gains/losses and minus fees (see page 7). Consider all your options and their features and fees before moving money between accounts.

#### SOCIAL SECURITY

If you are eligible for a Social Security benefit, it may be reduced or even eliminated due to your PERA retirement benefit. This applies to both PERA DB and PERA DC Plan participants. PERA benefits are never reduced when the PERA retiree is also receiving a Social Security benefit. See the *PERA and Social Security* fact sheet for more information.

## WITHDRAWAL OPTIONS: RETIREMENT ELIGIBLE

#### **PERA DB PLAN**

» When you terminate PERA-covered employment, you may take a refund/rollover of your PERA DB account or you may leave your account at PERA. If you are retirement eligible when you terminate employment, you may choose to receive a monthly retirement benefit. You may also select an option that pays a lifetime monthly benefit to a cobeneficiary after your death.



See the *Your PERA Benefits* booklet for more information.

- » PERA monthly retirement benefits are payable for your lifetime and that of your cobeneficiary, if you have one selected.
- » After retirement, you may receive an annual increase to your monthly retirement benefit.



See the Annual Increases fact sheet for more information.

» If you take a refund or rollover of your PERA DB account at retirement, you may be eligible for a match on your account balance. If you are eligible for retirement you will receive, at the time of rollover/refund, a 100% match equal to your contributions and interest.



See the *Colorado PERA Retirement Eligibility* fact sheet for more information.

#### PERA DC PLAN

The same withdrawal options are available to you in the PERA DC Plan whether you are retirement eligible or not. See page 9.

#### CONSULT A TAX PROFESSIONAL OR FINANCIAL PLANNER

Distribution choices and rules for both the PERA DB and PERA DC Plans are complicated. You are encouraged to speak with your tax professional or financial planner before deciding how to take your distribution.

Note: Lump-sum distributions from the PERA DB and DC Plans will be subject to a 20% federal tax withholding and, if you are younger than age 59½, a 10% early withdrawal penalty may apply. Ordinary income taxes may apply. State and local taxes and withholding may also apply.

## PERA DC PLAN INFORMATION

If you choose to participate in the PERA DC Plan, you must set how your future contributions will be invested. Your elections must total 100% in whole percentages or whole dollar increments. If you do not make an investment election, your first contribution will be invested in a Target Retirement Date Fund based on your date of birth and an expected retirement at age 65. You can change your investment election(s) online by logging on to your account through **coperaplus.org** or by calling 833-4-COPERA (833-426-7372).

#### PERADVANTAGE INVESTMENT OPTIONS

PERA DC Plan participants may invest in the following funds:

#### **PRIMARY FUNDS**

- » PERAdvantage Capital Preservation Fund
- » PERAdvantage Fixed Income Fund
- » PERAdvantage Real Return Fund
- » PERAdvantage U.S. Large Cap Stock Fund
- » PERAdvantage International Stock Fund
- » PERAdvantage U.S. Small and Mid Cap Stock Fund
- » PERAdvantage SRI Fund

#### TARGET RETIREMENT DATE FUNDS

- » PERAdvantage Income Fund
- » PERAdvantage 2025 Fund
- » PERAdvantage 2030 Fund
- » PERAdvantage 2035 Fund
- » PERAdvantage 2040 Fund
- » PERAdvantage 2045 Fund
- » PERAdvantage 2050 Fund
- » PERAdvantage 2055 Fund
- » PERAdvantage 2060 Fund
- » PERAdvantage 2065 Fund

#### SELF-DIRECTED BROKERAGE ACCOUNT

For an additional fee, participants can choose investments beyond the funds above, using a Self-Directed Brokerage Account (SDBA) administered by TD Ameritrade. The SDBA allows you to select from numerous mutual funds and/or other types of securities, such as stocks and bonds. More information can be found on **coperaplus.org**. The SDBA is intended for knowledgeable investors who understand the risks associated with the SDBA.

#### **DEFAULT INVESTMENT**

If you choose the PERA DC Plan and do not select how your contributions will be invested, your money will automatically be placed into a PERAdvantage Target Retirement Date fund based on your date of birth and an expected retirement date. For this purpose, PERA follows industry standard and assumes the expected retirement for all participants is at age 65. (This assumed expected retirement date does not reflect your actual retirement date or in any way affect the day on which you can retire.) Funds will be transferred to the PERAdvantage Target Retirement Date funds according to the table below:

Fund	Date of Birth Range
PERAdvantage Income Fund	December 31, 1957, or earlier
PERAdvantage 2025 Fund	January 1, 1958, to December 31, 1962
PERAdvantage 2030 Fund	January 1, 1963, to December 31, 1967
PERAdvantage 2035 Fund	January 1, 1968, to December 31, 1972
PERAdvantage 2040 Fund	January 1, 1973, to December 31, 1977
PERAdvantage 2045 Fund	January 1, 1978, to December 31, 1982
PERAdvantage 2050 Fund	January 1, 1983, to December 31, 1987
PERAdvantage 2055 Fund	January 1, 1988, to December 31, 1992
PERAdvantage 2060 Fund	January 1, 1993, to December 31, 1997
PERAdvantage 2065 Fund	January 1, 1998, or later

#### INVESTMENT FUND DETAILS

Each investment option represents a specific asset class and is diversified within that asset class using a selection of underlying investments<sup>2</sup>. For example, if you choose to invest a portion of your contributions in the PERAdvantage U.S. Small and Mid Cap Stock Fund, investments in that fund will generally be in U.S. companies with small and mid market capitalizations. The fund includes an underlying allocation to different investment styles like growth and value, and uses both active and passive investment strategies.

For current information on these funds, including the objective, investment strategy, quarterly returns, and risks, access the Plan website through coperaplus.org.

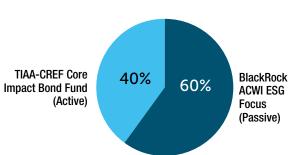
#### PERADVANTAGE SRI FUND

Assets in this fund are automatically invested in two different categories: active and passive.

Active: TIAA-CREF Core Impact Bond Fund Passive: BlackRock ACWI ESG Focus

Benchmark: SRI Custom Index\* Investment Management Fee: 0.19%

\* Currently 60% MSCI ACWI ESG Focus / 40% Bloomberg U.S. Aggregate Bond



**FUND MANAGERS** 

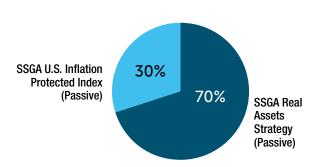
#### PERADVANTAGE REAL RETURN FUND

Assets in this fund are automatically invested in two different categories: TIPS (Treasury Inflation-Protected Securities) and real assets.

TIPS: SSGA U.S. Inflation Protected Index Real Assets: SSGA Real Assets Strategy

Benchmark: Real Return Custom Index\* Investment Management Fee: 0.17%

\* Currently 70% State Street Real Asset Strategy DC Index / 30% Bloomberg U.S. Treasury Inflation Protected Securities (TIPS) Index



#### PERADVANTAGE FIXED INCOME FUND

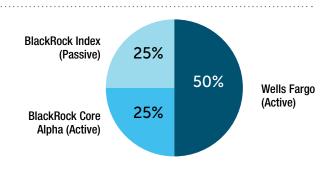
Assets in this fund are automatically invested in two different categories: active and passive.

Active: Wells Fargo, BlackRock Core Alpha

Passive: BlackRock Index

Benchmark: Bloomberg U.S. Aggregate Bond Index

Investment Management Fee: 0.18%

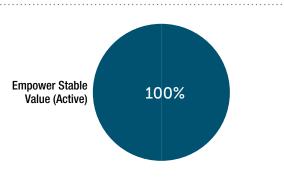


#### PERADVANTAGE CAPITAL PRESERVATION FUND

Assets in this fund are 100% invested in an Empower Stable Value Fund.

Benchmark: ICE BofAML U.S. 3-Month Treasury Bill Index

Investment Management Fee: 0.21%



 $<sup>^{</sup>m 2}$  Asset allocation and diversification do not ensure a profit or protect against loss

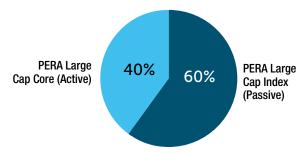
For current information on these funds, including the objective, investment strategy, quarterly returns, risks, and underlying investment managers, access the Plan website through coperaplus.org.

#### **FUND MANAGERS**

#### PERADVANTAGE U.S. LARGE CAP STOCK FUND

Assets in this fund are automatically invested in two different categories: active and passive.

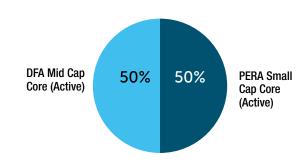
Active: PERA Large Cap Core Passive: PERA Large Cap Index Benchmark: MSCI USA Large Cap Index Investment Management Fee: 0.05%



#### PERADVANTAGE U.S. SMALL AND MID CAP STOCK FUND

Assets in this fund are actively invested.

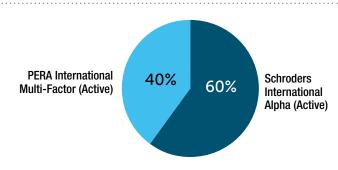
Active: DFA Mid Cap Core Active: PERA Small Cap Core Benchmark: MSCI USA SMID Cap Index Investment Management Fee: 0.15%



#### PERADVANTAGE INTERNATIONAL STOCK FUND

Assets in this fund are actively invested. **Active:** PERA International Multi-Factor **Active:** Schroders International Alpha

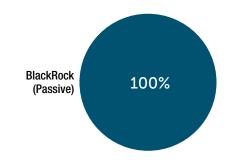
Benchmark: MSCI ACWI Ex-USA Index Investment Management Fee: 0.26%



# PERADVANTAGE TARGET RETIREMENT DATE FUNDS: PERADVANTAGE INCOME, 2025, 2030, 2035, 2040, 2045, 2050, 2055, 2060, AND 2065 FUNDS

Each fund is 100% comprised of the corresponding BlackRock LifePath® Index Target Retirement Date Fund. These funds grow more conservative as they reach their target retirement date.

Benchmark: Custom blend for each fund weighted in proportion to the fund mix Investment Management Fee: 0.07%



#### About risk:

Bond prices generally fall when interest rates rise (and vice versa) and are subject to risks, including changes in credit quality, market valuations, inflation, liquidity and default. The interest from Treasury inflation-protected securities (TIPS) is adjusted periodically according to the Consumer Price Index. The return from TIPS may understate the actual rate of inflation due to changes in the bond's underlying price. A stable value fund is not federally guaranteed and has interest rate, inflation and credit risks. Guarantees are subject to the terms and conditions of the group annuity contract or funding agreement and the claims-paying ability of the insurer.

Stocks may decline in value. Real asset investments may be affected by natural disasters and political and economic developments. Specialty funds generally invest in a limited number of companies and may be more volatile than a more diversified fund. Securities of small and mid-size companies may be more volatile than those of larger, more established companies. Foreign securities involve risks, such as currency fluctuations, economic changes and political developments. These risks may be heightened in emerging markets, which may also experience liquidity risk. Asset allocation investment options are subject to the risks of their underlying investments.

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### PERAChoice ELECTION AND RELEASE FORM

#### DEAR PERACHOICE MEMBER:

Complete the form on the reverse to choose between the Colorado PERA Defined Benefit (DB) or Defined Contribution (DC) Plans. Both plans are a substitute for Social Security.

You are eligible to choose between Plans if you are:

- » A State of Colorado employee hired on or after January 1, 2006,
- » A community college employee hired on or after January 1, 2008, at one of the institutions listed on page 1 of the *PERAChoice* brochure,
- » A classified college or university employee in the State personnel system hired on or after January 1, 2019, or
- » A Local Government Division employee hired on or after January 1, 2019.

If PERA has received contributions on your behalf from another PERA employer in the last 12 months, you must return to the Plan in which you previously participated. PERA retirees are not eligible to participate. (The term PERA retiree includes retirees of the Denver Public Schools Retirement System who retired prior to January 1, 2010, and PERA retirees under the Denver Public Schools [DPS] benefit structure on or after January 1, 2010.)

#### **NEXT STEPS**

Depending on your choice, there are additional forms you will need to complete. All applicable forms are available on PERA's website at www.copera.org and included in the *PERAChoice* brochure.

- » If you choose the PERA DB Plan: Complete a PERA Member Information Form—Defined Benefit Plan(s) to designate a beneficiary. Return this form to PERA.
- » If you choose the PERA DC Plan: Complete the PERA DC Plan: Beneficiary Designation 401(a) Plan form to designate a beneficiary. Return this form to Emplower at the address noted on the form. You should also determine how your future contributions will be invested by logging on to your account through coperaplus.org or by calling 833-4-COPERA (833-426-7372).

#### SWITCHING PLANS

If you are eligible for PERAChoice, you have the option to stop participation in the PERA DB Plan and begin participation in the PERA DC Plan, or to stop participation in the PERA DC Plan and begin participation in the PERA DB Plan. This is a one-time option and the change can only be made during the second to fifth year of participation in the Plan.

For more information, refer to the *PERAChoice Years* 2–5 Change/Transfer Form. (PERAChoice members who were previously enrolled in a State DC Plan and were transferred to PERA on July 1, 2009, do not have the option of switching plans.)





#### PERAChoice Election and Release Form

Colorado Public Employees' Retirement Association PO Box 5800, Denver, Colorado 80217-5800 1-800-759-PERA (7372) • Fax: 303-863-3727 • www.copera.org



Membe	r SSN		
return this form to your enrolled in the PERA DE participated. You may	orm to your human resources office no later that human resources office or Colorado PERA with B Plan. If you have made PERA contributions is obtain information about each of the plans availans at 1-800-759-PERA (7372).	hin 60 calendar days from your first day n the last 12 months, you must return	of employment, you will be automatically to the Plan in which you previously
Member	Name		
Information	Last	First	МІ
	AddressStreet	City	State ZIP Code
	Birthdate	,	<del></del>
	Daytime Telephone (	Work Telephone ()	
	Sign up for electronic delivery of PERA inform	mation? Yes 🗆 No 🗖	
Retirement Choice	You must choose one of the following:		
Election	☐ I elect to enroll in the PERA DB Plar election to participate in the PERA	n. I understand that I may, at a subsequ DC Plan. <i>OR</i>	ent time, make a one-time irrevocable
	☐ I elect to enroll in the PERA DC Plar election to participate in the PERA	n. I understand that I may, at a subsequ DB Plan.	ent time, make a one-time irrevocable
Retirement Choice	I am eligible to make an election to participat	e in the PERA DB Plan or the PERA DC Pla	an. I understand that it is my responsibility

You are not eligible to make an election if you have participated in a PERA Plan in the last 12 months.

to coordinate any rollovers I may wish to make from previous retirement accounts to PERA (if applicable). I also understand that I must confirm that my payroll deductions are accurate for the plan I have selected/defaulted into and I will notify my human resources office or PERA of any corrections within 10 days after the month in which the election becomes effective.

Retirement Plan Election. I understand that I am allowed to make an election about my retirement plan only within the first 60 calendar days after my first day of employment. I understand I will have one additional opportunity to elect to transfer to the other PERA Plan during the second to fifth year of active participation (unless I was previously enrolled in a State DC Plan that was transferred to PERA on July 1, 2009). I have read and understand the PERAChoice brochure.

Investment of PERA DC Plan. As a participant in the PERA DC Plan, I am responsible for deciding how my Plan account balance will be invested. I understand that my Plan account balance may increase or decrease based on the return on investments that I have selected. The individual investment funds offered under the PERA DC Plan could change in the future. Investment management fees may apply to the investments I select and administrative fees will be deducted from my PERA DC Plan.

**Employee Contributions and Distributions.** I understand that I must contribute a percentage of my salary to the Plan I select as a condition of participation.

Disability and Suvivor Benefits. I understand that if I choose the PERA DC Plan I will not have access to survivor or disability benefits.

Release of All Claims. In consideration for being able to participate in the Plan reflected on this form, I agree to release, hold harmless, and indemnify my employer and the Colorado Public Employees' Retirement Association and its Board of Trustees, and their employees, agents, contractors, successors, and assigns from any and all liability, for any negative consequences, loss, lost opportunity cost, or expense resulting from my election to participate in the Plan reflected on this form.

Sign Here <del>&gt;</del>
---------------------------

Member Signature	Date
For Payroll/Perso	nnel Use Only
Employer Name:	_ Employer Number:
Employee Status (FT, PT, Temp):	_ Date of Hire:
Date Election Form Received:	_ Screen Entry Date:
Entered By (print name):	_ Telephone Number:

## 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 who is currently receiving a monthly benefit, do not complete this form. PERA will not update your account based on this form for beneficiary changes, please complete a *Retiree Named Beneficiary Change Form* and return it to PERA.

In addition, if you are a retiree returning to work for a PERA employer, please complete and return the *Retiree Working for a PERA Employer Form*, which can be found in the *Working After Retirement* booklet.

#### **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 www.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 the 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 signed Social Security card.

To change your address, phone number, email, or to sign up for electronic delivery of PERA information, log into your PERA account on www.copera.org with your User ID and password. You may also call PERA's Customer Service Center at 1-800-759-7372.

### Changing PERA Life Insurance, PERAPlus 401(k) and 457 Plans, or PERADC 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 1-866-277-1649 or go to PERA's website at www.copera.org and log into your 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 www.coperaplus.org or by calling 1-833-4-COPERA (833-436-7372). 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.
- » 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 on page 4. Be sure to also sign page 4 or your beneficiaries will not be added/changed. If you need to add more beneficiaries than space allows on page 4, 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 martial 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.



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

Colorado Public Employees' Retirement Association PO Box 5800, Denver, Colorado 80217-5800 1-800-759-PERA (7372) • Fax: 303-863-3727 • www.copera.org



Member SSN						

	n page 2 before completing this form. Be su monthly benefit and would like to change y n and return it to PERA.			
Member Information	I am: ☐ A New PERA Member ☐	Changing PERA Information (Complete	any information you ar	re changing and sign.)
	Name Last	First	MI	Former Name
	Birthdate/ Month/Day/Year	Sex: ☐ Female ☐ Male	Unspecified	
	Home Telephone ()	Work Telephone (_	)	
	Mailing AddressStreet, Route, or	Box Number, and Apt. Number	City	State ZIP Code
	Email Address			
	Sign up for electronic delivery of PERA info	ormation?		
	Spouse's Name	First		MI
	Spouse's Birthdate // / Month/Day/Year	Spouse through:  \[ \begin{array}{cccccccccccccccccccccccccccccccccccc	☐ Civil Union	IVII
Complete this section to list the primary and contingent named beneficiary(ies) of your PERA DB Plan account(s).  If you have additional	Note: Your designation can only be chang your marriage WILL NOT revoke the benef by submitting a new form. Colorado Revis Beneficiary for:  PERA Benefit Stru Apply to Both DB Note: If you do not check a box, the benefit	ficiary named below as your designated sed Statute § 15-11-804 does not act to ucture DB Plan Account DPS BPlan Account	I beneficiary unless you revoke a spouse's desig enefit Structure DB Pla	revoke the designation nation as a beneficiary. n Account
named beneficiaries, complete the page on	Name	Relationship	SSN	/ / Birthdate
the reverse.			3311	Birtifate
	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 →	Member Signature		Date	
To Be Completed by Employer	Employer No Employer N	ame		
For new employees only.	DateStarting	g Salary		
етрюуеез оту.	Job Title		Date Employed	

8/324-mbrinfo (REV 12-21)



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

Colorado Public Employees' Retirement Association PO Box 5800, Denver, Colorado 80217-5800 1-800-759-PERA (7372) • Fax: 303-863-3727 • www.copera.org

	Your	SSN	
Primary Beneficiary(ies):			
Namo	Polationship	N2S	/
Name	Relationship	3311	bii tiidate
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
Name	Relationship	SSN	/ / Birthdate
	·		ZIP Code
Street, Route, or Box Number, and Apt. Number	City	State	
Nama	Polationship	CCN	/ Birthdate
name	Relationship	3311	birtildate
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
Member Signature		Date	
<u> </u>			
	Name  Street, Route, or Box Number, and Apt. Number  Name  Street, Route, or Box Number, and Apt. Number  Name  Street, Route, or Box Number, and Apt. Number  Contingent Beneficiary(ies):  Name  Street, Route, or Box Number, and Apt. Number  Name  Street, Route, or Box Number, and Apt. Number  Name  Name	Primary Beneficiary(ies):    Name	Name Relationship SSN  Street, Route, or Box Number, and Apt. Number City State  Name Relationship SSN  Street, Route, or Box Number, and Apt. Number City State  Name Relationship SSN  Street, Route, or Box Number, and Apt. Number City State  Contingent Beneficiary(ies):  Name Relationship SSN  Street, Route, or Box Number, and Apt. Number City State  Name Relationship SSN  Street, Route, or Box Number, and Apt. Number City State  Name Relationship SSN  Street, Route, or Box Number, and Apt. Number City State  Name Relationship SSN  Street, Route, or Box Number, and Apt. Number City State

additional named beneficiaries above)

e PERA DC Plan			100192-0 <sup>-</sup>
r My Information			
For questions regarding this form, v	risit the website at coperaplus.org or con	tact Service Provider at 1-833-426-7372.	
Use black or blue ink when complet	ing this form.		
Participant Information			
Account extension, if applicable, iden transferred to a beneficiary due to p death, alternate payee due to div participant with multiple accounts.	articipant's		
	Account Extension	Social Security Number (Must provide all 9 of	ligits)
Last Name	First Na	me M.I. Date of Birth	
(The name provided MUST match the		( )	
		Daytime Phone	Number
Email Address		( )	
☐ Married ☐ Unmarried		Alternate Phone	Number
Panaficiant Decimation (4)		Asses of structure )	
, , , , , , , , , , , , , , , , , , ,	ach an additional sheet to name additional	,	
Primary Beneficiary Designation	ation (Primary beneficiary designations n	nust total 100% - percentage can be made out to t	wo decimal places.)
See the attached examples or or estate. %	n how to complete the below beneficiary	designations if the beneficiary is a non-individu	ual, such as a trust, chari
	y Beneficiary Name		/ / / Date of Birth
	of Individual, Trust, Charity, etc.)		or Trust Date
Street Address	City	State	Zip Code
		ionship is not provided, request will be rejected and s	· · · · · · · · · · · · · · · · · · ·
Phone Number (Optional)	☐ Spouse ☐ Child ☐ Pare	ent 🛘 Grandchild 🖨 Sibling 🗘 My Estate	A Trust U Other
%	2 Bomocae i diale.		1 1
	y Beneficiary Name of Individual, Trust, Charity, etc.)		Date of Birth or Trust Date
Street Address	City	State	Zip Code
(		ionship is not provided, request will be rejected and s	
Phone Number (Optional)	☐ Spouse ☐ Child ☐ Pare ☐ Domestic Partner	ent 🗅 Grandchild 🗅 Sibling 🗅 My Estate	☐ A Trust ☐ Other
%	a bomestic i artifei		1 1
	y Beneficiary Name of Individual, Trust, Charity, etc.)		Date of Birth or Trust Date
Street Address	City	State	Zip Code
( )	Relationship (Required - If Relati	ionship is not provided, request will be rejected and so	ent back for clarification.)
Phone Number (Optional)	·	ent 🗅 Grandchild 🗅 Sibling 🗅 My Estate	☐ A Trust ☐ Other
0 11 15 5 -	□ Domestic Partner		
Contingent Beneficiary Des	gnation (Contingent beneficiary designation)	ations must total 100% - percentage can be made	out to two decimal places
%			1 1
	gent Beneficiary Name of Individual, Trust, Charity, etc.)		Date of Birth or Trust Date
Street Address	City	State	Zip Code
Phone Number (Optional)		ionship is not provided, request will be rejected and so ent	
	Domestic Partner	2. 2 Clarido ind 2 Clothing 2 My Estate	= /

						100192-01
	Last Name Fir	rst Name	M.I.	Social S	Security Number	Number
В	Beneficiary Designation (Attach an additional sheet to name additional beneficiaries.)					
	Contingent Beneficiary Designation (Contingent beneficiary designations must total 100% - percentage can be made out to two decimal places.					
	%					
	% of Account Balance Contingent Benef (Name of Individual,					Date of Birth or Trust Date
	Street Address	City			State	Zip Code
	<u>( )</u> F	Relationship (Required	- If Relationshi	p is not provided,	, request will be rejected and s	ent back for clarification.)
	Phone Number (Optional)	☐ Spouse ☐ Child	Parent	☐ Grandchild	☐ Sibling ☐ My Estate	:   A Trust   Other
		■ Domestic Partner				
	%	~				
	% of Account Balance Contingent Benef (Name of Individual,					Date of Birth or Trust Date
	Street Address	City			State	Zip Code
		•	- If Relationshi	p is not provided.	, request will be rejected and s	-
	Phone Number (Optional)				☐ Sibling ☐ My Estate	*
C	Participant Consent for Beneficiary I	Designation (Please	sign on the 'Pa	articipant Signatu	re' line below.)	
	I have completed, understand and agree to all pages of this Beneficiary Designation form. Subject to the terms of the Plan, I am making the above beneficiary designations for my vested account in the event of my death. I acknowledge and agree that it is my responsibility to monitor the beneficiary designations in my account and to update the beneficiary designations as I deem necessary upon a change in marital status, death of a beneficiary or any other change that may impact my beneficiary designations.  If I have more than one primary beneficiary, the account will be divided as specified. If a primary beneficiary predeceases me, his or her benefit whe allocated to the surviving primary beneficiaries. Contingent beneficiaries will receive a benefit only if there is no surviving primary beneficiar as specified. If a contingent beneficiaries, contingent beneficiaries will receive a benefit only if there is no surviving primary beneficiar as specified. If a contingent beneficiaries, primary beneficiaries, and to the terms of the Plan or applicable law. This designation is effective upon execution and delivery to Service Provider. If any information is missing, additional information may be required prior to recording my designation.  This designation supersedes all prior designations. Beneficiaries will share equally if percentages are not provided and any amounts unpaid upon death will be divided equally. Primary and contingent beneficiaries must separately total 100%. The percentages can be divided up to two decimal points (Example: 33.33%).  I understand that my divorce, annulment, or any dissolution or declaration of invalidity of my marriage will NOT revoke the beneficiary named above unless I revoke the designation by submitting a beneficiary designation. Colorado Revised Statute section 15-11-804 does not act to revoke a spouse's designation as a beneficiary in this plan.  Any person who presents a false or fraudulent claim is subject to criminal and civil penalties.					esponsibility to monitor the e in marital status, death of s me, his or her benefit will viving primary beneficiary, ent beneficiaries. If I fail to ective upon execution and designation.  any amounts unpaid upon can be divided up to two the beneficiary named -804 does not act to
	Participant Signature				Date (Requir	,
	A handwritten signature is required on the	his form. An electron	nic signature	will not be ac	ccepted and will result in	a significant delay.
D	Delivery Instructions					
	After all signatures have been obtained,	this form can be				
	Uploaded Electronically: Login to account at coperaplus.org Click on Upload Documents to submit	Sent Regular Mail Empower Retireme PO Box 173764 Denver, CO 80217	ent	Sent Express Empower Ref 8515 E. Orch Greenwood V	tirement	

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We will not accept hand delivered forms at Express Mail addresses.

# This page is for informational purposes only - Do not return with the Beneficiary Designation form EXAMPLE BENEFICIARY DESIGNATIONS Example 1: Multiple Individuals as Beneficiaries

В	Beneficiary Designation (Attach an additional sheet to name additional beneficiaries.)					
	Primary Beneficiary Designation (Primary beneficiary designations must total 100% - percentage can be made out to two decimal places.)					
	See the attached examples on how to complete the below beneficiary designations if the beneficiary is a non-individual, such as a or estate.					
	33.33 %	John M. Doe		01/06/1954		
	% of Account Balance	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)		Date of Birth or Trust Date		
	111 Elm Street	Anytown	MO	60000		
	Street Address	City	State	Zip Code		
	(XXX) XXX-XXXX Phone Number (Optional)		Relationship is not provided, request will be r Parent ☐ Grandchild ■ Sibling ☐			
	33.33 %	Don M. Doe		01/06/1954		
	% of Account Balance	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)		Date of Birth or Trust Date		
	222 North Avenue	Anytown	CA	90000		
	Street Address	City	State	Zip Code		
	(XXX) XXX-XXXX Phone Number (Optional)		Relationship is not provided, request will be represent Grandchild Sibling C			
	33.34 %	Michelle L. Doe		01/06/1957		
	% of Account Balance	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)		Date of Birth or Trust Date		
	333 West Blvd	Anytown	СО	80000		
	Street Address	City	State	Zip Code		
	(XXX) XXX-XXXX	Relationship (Required - If I	Relationship is not provided, request will be i	rejected and sent back for clarification.)		
	Phone Number (Optional)		Parent ☐ Grandchild ■ Sibling ☐			
Exa	mple 2: Trust as Ben	eficiary				
В	Beneficiary Designation	ON (Attach an additional sheet to name additi	ional beneficiaries.)			
	Primary Beneficiary Designation (Primary beneficiary designations must total 100% - percentage can be made out to two decimal places.)					
		nples on how to complete the below benefic	ciary designations if the beneficiary is a	non-individual, such as a trust, charity		
	or estate.	Trust of Jana Doo		06/20/2015		
	100 %	Trust of Jane Doe		06/30/2015		
	100 % % of Account Balance	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)		Date of Birth or Trust Date		
	100 % % of Account Balance 150 Main Street	Primary Beneficiary (Name of Individual, Trust, Charity, etc.) Anytown	MO	Date of Birth or Trust Date 60000		
	100 % % of Account Balance  150 Main Street Street Address	Primary Beneficiary (Name of Individual, Trust, Charity, etc.) Anytown City	State	Date of Birth or Trust Date 60000 Zip Code		
	100 % % of Account Balance 150 Main Street	Primary Beneficiary (Name of Individual, Trust, Charity, etc.) Anytown City Relationship (Required - If I		Date of Birth or Trust Date 60000 Zip Code rejected and sent back for clarification.)		
Exa	100 % % of Account Balance  150 Main Street Street Address (XXX) XXX-XXXX	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)  Anytown City  Relationship (Required - If I	State Relationship is not provided, request will be r	Date of Birth or Trust Date 60000 Zip Code rejected and sent back for clarification.)		
Exa B	100 % % of Account Balance  150 Main Street Street Address (XXX) XXX-XXXX Phone Number (Optional)  mple 3: Estate as Be	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)  Anytown City  Relationship (Required - If I	State Relationship is not provided, request will be r Parent □ Grandchild □ Sibling □	Date of Birth or Trust Date 60000 Zip Code rejected and sent back for clarification.)		
	100 % % of Account Balance  150 Main Street Street Address (XXX) XXX-XXXX Phone Number (Optional)  mple 3: Estate as Be Beneficiary Designation	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)  Anytown City Relationship (Required - If It   Spouse Child Chi	State Relationship is not provided, request will be repaired in the Parent Grandchild Sibling Grandchild Sib	Date of Birth or Trust Date 60000 Zip Code rejected and sent back for clarification.)  My Estate A Trust Other		
	100 % % of Account Balance  150 Main Street Street Address (XXX) XXX-XXXX Phone Number (Optional)  mple 3: Estate as Be Beneficiary Designation Primary Beneficiary D • See the attached examor estate.	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)  Anytown City Relationship (Required - If It Is	State Relationship is not provided, request will be repaired in the Parent Grandchild Sibling Grandchild Sib	Date of Birth or Trust Date 60000 Zip Code rejected and sent back for clarification.)  My Estate A Trust Other		
	100 % % of Account Balance  150 Main Street Street Address (XXX) XXX-XXXX Phone Number (Optional)  mple 3: Estate as Be Beneficiary Designation Primary Beneficiary D • See the attached examor estate.	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)  Anytown City Relationship (Required - If It   Spouse Child Chi	State Relationship is not provided, request will be repaired in the Parent Grandchild Sibling Grandchild Sib	Date of Birth or Trust Date 60000 Zip Code rejected and sent back for clarification.)  My Estate A Trust Other		
	100 % % of Account Balance  150 Main Street Street Address (XXX) XXX-XXXX Phone Number (Optional)  mple 3: Estate as Be Beneficiary Designation Primary Beneficiary D • See the attached examor estate. 100 % % of Account Balance  45 East Road	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)  Anytown City Relationship (Required - If III) Spouse Child Comments Partner  neficiary on (Attach an additional sheet to name additi	State  Relationship is not provided, request will be reparent  Grandchild  Sibling   ional beneficiaries.)  ons must total 100% - percentage can be relatively designations if the beneficiary is a	Date of Birth or Trust Date 60000 Zip Code rejected and sent back for clarification.)  My Estate A Trust Other  made out to two decimal places.)  non-individual, such as a trust, charity  / Date of Birth or Trust Date 60000		
	100 % % of Account Balance  150 Main Street Street Address (XXX) XXX-XXXX Phone Number (Optional)  mple 3: Estate as Be Beneficiary Designation Primary Beneficiary D • See the attached examor estate. 100 % % of Account Balance  45 East Road Street Address	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)  Anytown City  Relationship (Required - If II   Spouse   Child   Domestic Partner  Ineficiary  On (Attach an additional sheet to name	State  Relationship is not provided, request will be reparent Grandchild Sibling Grandchi	Date of Birth or Trust Date 60000 Zip Code rejected and sent back for clarification.)  My Estate A Trust Other  made out to two decimal places.) non-individual, such as a trust, charity  / / Date of Birth or Trust Date 60000 Zip Code		
	100 % % of Account Balance  150 Main Street Street Address (XXX) XXX-XXXX Phone Number (Optional)  mple 3: Estate as Be Beneficiary Designation Primary Beneficiary D • See the attached examor estate. 100 % % of Account Balance  45 East Road	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)  Anytown City  Relationship (Required - If I Spouse  Child  Domestic Partner  Ineficiary  On (Attach an additional sheet to name addi	State  Relationship is not provided, request will be reparent  Grandchild  Sibling   ional beneficiaries.)  ons must total 100% - percentage can be relatively designations if the beneficiary is a	Date of Birth or Trust Date 60000 Zip Code rejected and sent back for clarification.)  My Estate A Trust Other  made out to two decimal places.) non-individual, such as a trust, charity  / / Date of Birth or Trust Date 60000 Zip Code rejected and sent back for clarification.)		

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## This page is for informational purposes only - Do not return with the Beneficiary Designation form EXAMPLE BENEFICIARY DESIGNATIONS

**Example 4: Charity as Beneficiary** 

В	Beneficiary Designation (Attach an additional sheet to name additional beneficiaries.)					
	Primary Beneficiary Designation (Primary beneficiary designations must total 100% - percentage can be made out to two decimal					
	<ul> <li>See the attached examples on how to complete the below beneficiary designations if the beneficiary is a non-individual, or estate.</li> </ul>					
	100 % ABC Charity			1 1		
	% of Account Balance	Primary Beneficiary (Name of Individual, Trust, Charity, etc.)		Date of Birth or Trust Date		
	75 South Place	Anytown	CO	80000		
	Street Address	City	State	Zip Code		
	(XXX) XXX-XXXX	Relationship (Required - If Rel	lationship is not provided, request will be re	ejected and sent back for clarification.)		
	Phone Number (Optional)	☐ Spouse ☐ Child ☐ Pa☐ Domestic Partner	arent 🗅 Grandchild 🗅 Sibling 🗅	My Estate ☐ A Trust ■ Other		

# Contact PERA



copera.org (PERA's website)
coperaplus.org (PERAPlus
401(k)/457 and DC Plans' website)



For the PERA DB Plan: Call PERA's Customer Service Center at 1-800-759-7372.

For the PERA DC Plan: Call Empower at 833-4-COPERA (833-426-7372)



PERA offices: Denver Lone Tree Westminster



Forms and publications can be found on the PERA website. Copies can also be requested by calling PERA's Customer Service Center.

This publication provides general information about the PERA DB and DC Plans. PERA membership rights, benefits, and obligations are governed by Title 24, Article 51 of the Colorado Revised Statutes, and the Rules of the Colorado Public Employees' Retirement Association, which take precedence over any interpretations in this publication.

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