



Change of Beneficiary Form - ERS Retirees

Please print clearly. Blue ink is preferred. **Mail** this completed form along with any other required documentation needed to process your request to the **Employees' Retirement System of Georgia (ERSGA)**. Log in to your account at ers.ga.gov to access your beneficiary elections online, review check stubs, and more. **This form is not valid until received by our office.**

SECTION 1 – Your Information Note: **ERSGA will update our records to reflect the mailing address listed below.**

Name: _____ SSN: _____
(Last) (First) (MI) (Maiden)

Mailing Address: _____
(Street) (City) (State) (Zip)

Date of Birth: / / email: _____ Phone () _____
mm/dd/yyyy Cellular Home Work

SECTIONS 2 & 3 INSTRUCTIONS

- A. Primary Beneficiary -If you choose multiple beneficiaries, please list all of them as "Primary Beneficiaries" on a separate piece of paper, sign it and attach it to this form.
- B. Secondary Beneficiary- Used only if your primary beneficiary is deceased.

SECTION 2 – Benefit Beneficiary to Update

All benefits selected will be updated based on the beneficiary elections listed in Section 3. If you want different beneficiaries for different benefits, you should submit a separate form for each benefit. If no selection is made, all benefits will be updated to the beneficiary below. You can update GTLI beneficiaries and Secondary beneficiaries online. Retirement primary beneficiary changes may be limited based on the option elected at the time of retirement. Please see the instructions for additional information.

- Employees' Retirement System (ERS) Retirement GTLI (*Only New Plan & Old Plan*)
- 1st ERS Supplemental Guaranteed Lifetime Income (SGLI) Retirement
- 2nd ERS Supplemental Guaranteed Lifetime Income (SGLI) Retirement

SECTION 3 - Beneficiary Designation

A. PRIMARY

Name: _____
(Last) (First) (MI) (Maiden)

Mailing Address: _____
(Street) (City) (State) (Zip)

Date of Birth: / / Relationship to you: _____ Daytime Phone () _____
mm/dd/yyyy Cellular Home Work

B. SECONDARY

Name: _____
(Last) (First) (MI) (Maiden)

Mailing Address: _____
(Street) (City) (State) (Zip)

Date of Birth: / / Relationship to you: _____ Daytime Phone () _____
mm/dd/yyyy Cellular Home Work

SECTION 4 – Signature

I understand that by signing this form, I am certifying that the above information is complete and accurate. I designate the above for any benefits due after my death. I have read and understand the instructions on Page 2 of this form.

Signature: _____ Date: _____

**EMPLOYEES' RETIREMENT SYSTEM (ERS)
RETIREE CHANGE OF BENEFICIARY FORM
Instructions**

- Complete and return to ERSGA. This form is not valid until received by our office. Incomplete forms are not valid and will be returned. On this form, you can name beneficiaries for your ERS Retirement monthly benefit, your Supplemental Guaranteed Lifetime Income benefit (SGLI – if you used your Peach State Reserves funds to purchase an additional annuity after retirement), or your Group Term Life Insurance (GTLI) benefit (if you are an ERS Old Plan or New Plan Retired Member eligible for continued GTLI coverage at your retirement). You may name the same beneficiaries or you may name different beneficiaries.
- If you choose multiple beneficiaries, please write “See attached” in the appropriate space below and identify all of them as “Primary Beneficiaries” or “Secondary Beneficiaries” on a separate piece of paper with your name, Pension Id or last four digits of your SSN, sign it and attach it to this form. Primary and secondary beneficiaries do not share benefits.
- Remember that a will does not take precedence over this designation.
- “Estate” is only appropriate as a designation if no monthly allowance is left to a beneficiary (Maximum, Option 1, 4 Period Certain, and 4 Accelerated Benefit). A monthly allowance cannot be paid to an estate.

Sections 1 and 4: Personal Information and Signature

List all personal information in Section 1. If your address changes, it is important to notify ERS in writing. Section 4 must have your signature and must be dated.

Section 2: Benefit Beneficiary to Update

Select the box next to the benefits you wish the listed beneficiary(ies) to be designated to receive.

Section 3: Retirement Allowance Beneficiary Information

Primary Beneficiaries: Options are listed below with the circumstances under which you can change your primary beneficiary.

Maximum, Option 1, 4 Period Certain, and 4 Accelerated Benefit: allows you to change your primary beneficiary at any time.

Options 2, 3, and 4 Specified Amount to Beneficiary:

- If spouse is sole primary beneficiary and divorce occurs – allows change to the Maximum. After one year of remarriage or the birth of a child, you may choose the original option naming a new spouse as beneficiary.
- If spouse is sole primary beneficiary and death of spouse occurs – allows you to name a beneficiary; however, this beneficiary(ies) is not eligible for a monthly benefit after your death. After one year of re-marriage or the birth of a child, you may re-elect the optional allowance naming the new spouse as beneficiary, which will result in an actuarial reduction to your allowance.

Options 5A and 5B:

- If primary beneficiary predeceases you or if divorce occurs – allows change to the Maximum. After one year of remarriage or the birth of a child, you may choose the original option naming a new spouse as beneficiary, which will result in an actuarial reduction to your allowance.

If you were unmarried at retirement and subsequently marry:

- Under the Maximum Plan, you may re-elect any option with a spouse as primary beneficiary, but you must do this within six months after the marriage.
- Under options 2, 3, 4, 5A, and 5B, you may revoke your original option and re-elect 2, 3, 4, 5A, or 5B with a spouse as primary beneficiary at any time after the marriage.

Secondary Beneficiaries: Secondary beneficiaries are only used if the Primary Beneficiary predeceases you, however, if you elected an option that would provide a monthly benefit to your primary beneficiary, secondary beneficiaries are not eligible to receive a monthly benefit. Secondary beneficiaries may be changed at any time and under any option.

ERS Group Term Life Insurance Beneficiary Information

Changes may be made at any time. You may designate percentages to multiple beneficiaries, but remember that the total percentage must equal 100%. If you do not specify percentages, the beneficiaries will be paid in equal amounts.

Do not use this form if you are an active member of ERS.
A separate form is available on our website (ers.ga.gov) or from our office.