



BENEFICIARY DESIGNATION FORM FOR TIERS 3 – 6

Should you die prior to retirement leaving no one qualified for a survivor pension benefit, your contributions may be refunded. Please designate below the person(s) that you want to receive any refund of your pension contributions...

1. MEMBER INFORMATION (LAST NAME, FIRST NAME, MI, SOCIAL SECURITY NUMBER, STREET ADDRESS, DATE OF BIRTH, TELEPHONE, CITY, STATE, ZIP, DATE OF HIRE, ALTERNATE PHONE, E-MAIL, TIER, DEPARTMENT)
2. BENEFICIARY DESIGNATION (PRIMARY 1-3, CONTINGENT 1-3) (NAME, DATE OF BIRTH, SOCIAL SECURITY NUMBER, RELATIONSHIP, ADDRESS, TELEPHONE, % OF BENEFIT)
NOTE: Contributions will be divided equally unless percentage of benefit is specified.
3. SIGNATURE - By signing below I make the designations set forth above and revoke any prior designation on file with the Plan.
MEMBER'S NAME (PRINT), MEMBER'S SIGNATURE, DATE

THIS FORM SUPERSEDES ANY PREVIOUS BENEFICIARY FORM SUBMITTED TO LOS ANGELES FIRE AND POLICE PENSIONS.

(COMPLETE BOTH SIDES)

BENEFICIARY DESIGNATION FORM FOR TIERS 3 - 6 (CONT.)

MEMBER'S LAST NAME:	FIRST NAME:	MI:	SOCIAL SECURITY NUMBER: XXX - XX -
4. SPOUSE/DOMESTIC PARTNER (Provide name used prior to marriage. See instructions)			
LAST NAME, FIRST NAME, MI:	SOCIAL SECURITY NUMBER (OPTIONAL):	CHECK ONE: <input type="checkbox"/> SPOUSE <input type="checkbox"/> DOMESTIC PARTNER	
DOMESTIC PARTNERSHIP DECLARATION IS FILED WITH: <input type="checkbox"/> LA FIRE & POLICE PENSIONS <input type="checkbox"/> STATE OF _____ <input type="checkbox"/> OTHER CITY DEPARTMENT OR AGENCY _____	SPOUSE/DOMESTIC PARTNER DATE OF BIRTH: ____/____/____	DATE OF MARRIAGE/FILING DATE OF DOMESTIC PARTNERSHIP DECLARATION: ____/____/____	
5. PRIOR MARRIAGES OR STATE-REGISTERED DOMESTIC PARTNERSHIPS (Provide name used prior to marriage to member. See instructions)			
LAST NAME, FIRST NAME, MI:	HOW ENDED (CHECK ONE): <input type="checkbox"/> DEATH <input type="checkbox"/> DISSOLUTION	WHERE:	DATE ENDED: ____/____/____
LAST NAME, FIRST NAME, MI:	HOW ENDED (CHECK ONE): <input type="checkbox"/> DEATH <input type="checkbox"/> DISSOLUTION	WHERE:	DATE ENDED: ____/____/____
LAST NAME, FIRST NAME, MI:	HOW ENDED (CHECK ONE): <input type="checkbox"/> DEATH <input type="checkbox"/> DISSOLUTION	WHERE:	DATE ENDED: ____/____/____
6. MINOR CHILDREN / DEPENDENT CHILDREN / DEPENDENT PARENTS			
LAST NAME, FIRST NAME, MI:	SOCIAL SECURITY NUMBER (OPTIONAL):	CHECK ONE: <input type="checkbox"/> MINOR CHILD <input type="checkbox"/> DEPENDENT CHILD <input type="checkbox"/> DEPENDENT PARENT	DATE OF BIRTH: ____/____/____
LAST NAME, FIRST NAME, MI:	SOCIAL SECURITY NUMBER (OPTIONAL):	CHECK ONE: <input type="checkbox"/> MINOR CHILD <input type="checkbox"/> DEPENDENT CHILD <input type="checkbox"/> DEPENDENT PARENT	DATE OF BIRTH: ____/____/____
LAST NAME, FIRST NAME, MI:	SOCIAL SECURITY NUMBER (OPTIONAL):	CHECK ONE: <input type="checkbox"/> MINOR CHILD <input type="checkbox"/> DEPENDENT CHILD <input type="checkbox"/> DEPENDENT PARENT	DATE OF BIRTH: ____/____/____

(COMPLETE BOTH SIDES)

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INSTRUCTIONS FOR BENEFICIARY DESIGNATION FORM
(Please read the following carefully before you designate a beneficiary.)

If you (the member) die before you retire (and prior to entering DROP) leaving no one eligible for pension benefits and you do not have a beneficiary designation form on file with the Los Angeles Fire and Police Pension (Plan), your pension contributions will be paid based on the Plan's order of succession as stated in the City Charter and Administrative Code provisions: 1) Spouse or State-Registered Domestic Partner (SRDP); 2) Children; 3) Parents; 4) Executor or Administrator of your estate, or to any other person legally authorized to collect money due to you. If the Plan's order of succession is insufficient to pay a beneficiary, then the California Intestate Succession laws will be applied. See [California Intestate Section 6402](#) for more information. Additionally, if your total estate (including your pension contributions and accrued interest) exceeds the prescribed limit found in [California Probation Code Section 13100](#), then the funds will not be released to the living survivor or executor until the probate is completed.

If you die while still employed (and prior to entering DROP) and leave anyone eligible for survivor pension benefits, your contributions will not be refunded, although your eligible survivor(s) may receive your contributions as part of the Basic Death Benefit, if applicable. If you have a designated beneficiary(ies), they would not be paid your contributions in this event.

If you file a beneficiary designation form with the Plan and your contributions are refunded in the event of your death, the contributions will be paid in the manner you have designated (subject to any community property claims--see item 5 below).

For members under Tiers 3, 5, and 6: If you have terminated employment and elected to leave your contributions on deposit in order to take a deferred vested service retirement in the future, none of your survivors will qualify for pension benefits if you die before retiring. Instead, your contributions will be refunded to your designated beneficiary(ies) or, if none, in the order indicated above.

- 1. MEMBER INFORMATION** – This information is requested to verify your identity.
- 2. DESIGNATING YOUR BENEFICIARIES** – The refund of contributions will be divided equally among your beneficiaries unless otherwise specified. If you choose to specify percentages for more than one beneficiary, make sure that the percentages total 100%. For example, if you are naming three beneficiaries and you want to divide equally, use the following: 33%, 33% & 34%. It is recommended that you name a contingent beneficiary(ies), in case all the person(s) designated as your primary beneficiary(ies) should predecease you. In the event none of your primary beneficiaries survive you, the contingent beneficiary(ies) will be paid. Do not designate the same individuals for Primary and Contingent. Please note that you may designate your trust as a beneficiary, but please include the title of the trust, date established, and name and contact information of the trustee or successor trustee.

Pursuant to Probate Code 5003, refunds will be distributed in accordance with specifications on your Beneficiary Designation unless the Plan has been served with a contrary court order or written notice of an adverse claim.

- 3. SIGNATURE** – Sign and date at the bottom of the first page, then turn to page 2 to complete the form. Return the completed and signed form to:

Los Angeles Fire and Police Pensions
Attn: Active Member Services Section
701 E. 3rd St., Suite 200
Los Angeles, CA 90013
Fax: (213) 628-7716
Email: amssection@lafpp.com

The designation does not go into effect until received by the Plan. Once you designate a beneficiary, it is very important to keep your beneficiary designation up to date, especially if your situation should change due to a marriage, dissolution, etc. Your beneficiary designation remains in effect until you file a new beneficiary form with the Plan unless the Plan has been served with a contrary court order or written notice of an adverse claim.

- 4. SPOUSE/DOMESTIC PARTNER** – This is for informational purposes only. If you are married, fill in the requested information, providing your spouse's name prior to your marriage. If you have a domestic partner, fill in the requested information.

Your spouse or domestic partner may receive a lifelong survivor's pension benefit, provided all eligibility and notification requirements are met or submitted upon your death. Refer to the section "Survivor Benefits and Documentation" for more information.

- **Plan-Registered Domestic Partner (PRDP).** This is a domestic partnership that is established when both partners file a confidential Declaration of Domestic Partnership with the Plan, provided all applicable eligibility requirements are met. Since this domestic partnership is only established for purposes of the Plan, a PRDP does

not acquire any community property rights in pension contributions or other pension benefits payable from the Plan. Also, if you (the member) want your PRDP to receive your contributions in the event of your death, you must designate him/her as your beneficiary (unlike a spouse or SRDP who would be paid under the Plan's provisions). Contact Active Member Services at (213) 279-3140 to request information and a Declaration of Domestic Partnership form, or you may download the form from our Web site at <https://lafpp.lacity.gov>.

- **State-Registered Domestic Partner (SRDP).** This is a domestic partnership that is established when persons who meet the state's eligibility criteria register as domestic partners with the State of California. This partnership is governed by state law and establishes a relationship in which, for most purposes, the domestic partners have the same rights as spouses, which may include community property rights. This partnership may establish community property interests in your contributions and other pension benefits as provided by state law. Provide a copy of your state registration certificate to the Plan, if you haven't already. For information on filing with the California Secretary of State, please visit their Web site at www.sos.ca.gov/dpregistry/. If your domestic partnership was registered with another state other than California, your document(s) will need to be reviewed and approved by the Office of the City Attorney.
- **Domestic Partnership filed with another City Department or Agency.** If you filed your domestic partnership with another City Department such as Personnel Department, provide proof of filing such as stamped copy of the Affidavit of Domestic Partnership form or the acknowledgement letter. For domestic partnership filed with another agency or jurisdiction, provide similar documentary proof, subject to legal review by the Office of the City Attorney.

NOTE: Domestic partnership filed with the Plan or anywhere else may supersede the beneficiary designation form for survivor pension benefit purpose.

- 5. PRIOR MARRIAGES/SRDP** – Provide the name(s) of any former spouse(s) or SRDP(s). Write the name(s) your spouse(s)/SRDP(s) used prior to your marriage. Depending upon how the court disposed of the community property interest in your Plan benefits, your former spouse(s)/SRDP(s) may be entitled to a portion of any contributions paid from your account upon your death or if you get a refund of contributions. Any interest in your contributions awarded by the court to your former spouse/SRDP belongs to him/her. (See Community Property Interest Information below.)
- 6. MINOR CHILDREN / DEPENDENT CHILDREN / DEPENDENT PARENTS** – List all natural and adopted children. If you have a child who became disabled from earning a livelihood prior to age 21, list that child as a "Dependent Child". If you have a parent who relies on you for at least half of his/her financial support, list that parent as a "Dependent Parent". Be aware that additional documentation is required to establish a child as a dependent child and a parent as a dependent parent. Refer to the section "Survivor Benefits and Documentation".

COMMUNITY PROPERTY INTEREST INFORMATION

Keep in mind that all contributions made during a marriage or State-Registered Domestic Partnership are community property under California state law. Your current spouse or SRDP has a community property interest in contributions that are paid during the marriage or partnership prior to separation. Likewise, a former spouse or SRDP may have a community property interest in these funds based upon the court order entered in your dissolution proceedings. Your beneficiary designation controls the disposition of the contributions refunded after your death to the extent that these funds belong to you: your separate property interest and your share of any community property interest(s).

If you want to designate someone other than your current spouse or SRDP as a beneficiary for the refund of your contributions in the event of your death, only your community property interest in these contributions will go to such person(s) unless your spouse or SRDP consents to have his/her community property interest also pass as you have provided. If your spouse or SRDP is willing to waive any community property interest in the contributions in the event of your death, he/she may do so by completing a Community Property Interest Waiver Form. The spouse's signature must be either notarized or witnessed by a staff member. This should be a voluntary decision on his/her part, as the spouse/SRDP is not required to waive his/her community property interest. If he/she does not consent, your community property interest in the contributions would go to your designated beneficiary(ies) and your spouse/SRDP would be paid his/her share of the community property interest in the refund. Note: A community property interest waiver may be revoked by your spouse/SRDP as provided in Probate Code Section 5031 at any time before, but not after, your death. To request a Community Property Interest Waiver Form, you may contact Active Member Services.

SURVIVOR BENEFITS AND DOCUMENTATION

For information about the pension benefits to which your survivor(s) may be entitled in the event of your death, please consult your applicable Summary Plan Description which is available online at <http://lafpp.lacity.gov>. Before survivor benefits can be paid, applicable documentation such as marriage/SRDP certificate, birth, and adoption certificates are required. In addition, guardianship and/or conservatorship documents may be required before payment of benefits to certain dependents. If you are near retirement, you may want to provide us with the background information mentioned above. If you have dependent (disabled) child(ren) and dependent parent(s), contact the Disability Pension Section at (213) 279-3165 for background documentation information.

If you have any questions after reviewing this information, please contact Active Member Services at (844) 885-2377 or (213) 279-3140.