



MaBSTOA Pension Plan

2 Broadway, 10th Floor, Section D
New York, New York 10004
Telephone No. (646) 376-0123

RETIREE SPECIFIC INFORMATION REGARDING DEATH BENEFITS FOR RETIREES POST-RETIREMENT DEATH BENEFIT SUMMARY

This handout is to inform you that as a Tier 4 member, a designation of beneficiary (ies) nomination is required by you for the Post-Retirement Death Benefit (PRDB). Please make your nomination on the attached PRDB Designation of Beneficiary form and bring the completed form with you to your retirement sign-out session. It is recommended that you read the information below concerning the PRDB and the information on the attached pages regarding Survivor Benefits before you complete the PRDB form.

The PRDB is payable as follows:

WHERE DEATH OCCURS	AMOUNT OF BENEFIT
In the first year after retirement	50% of the benefit in force at retirement*
In the second year after retirement	25% of the benefit in force at retirement*
In the third year after retirement and thereafter	10% of the benefit in force at age 60 or at retirement if retirement preceded age 60**

**A lump-sum payment equal to three times the salary earned in your last year of service. If you retired after age 60, the benefit in force is less. Specifically, an annual reduction of 5% is applied for each year beyond age 60, i.e. a 15% reduction if you retired at age 63.*

***A lump sum payment equal to three times the salary earned in your last year of service without a reduction.*

EXAMPLE: John Doe retires at age 55 with 25 years of service. He earned \$60,000 in his last year of service. The death benefit in force at retirement is \$180,000 (3 x \$60,000). If he dies in the:		
<i>1st year</i> after retirement: PRDB = \$90,000 (50%)	<i>2nd year</i> after retirement: PRDB = \$45,000 (25%)	<i>3rd year</i> after retirement and thereafter: PRDB = \$18,000 (10%)

You may change your beneficiary (ies) at any time prior to your death by simply submitting another form. The latest form you file will supersede all previously filed forms.

It is important that your beneficiary (ies) know how to claim the benefit in the event of your death. First, they should notify MaBSTOA Pension Plan and submit a death certificate. Upon receipt of the death certificate, MaBSTOA Pension Plan will: 1) calculate any benefits due; 2) mail claim forms and instructions to your beneficiary (ies); and 3) outline payment choices. They should then carefully consider the payment choices and return the required claim forms to MaBSTOA Pension Plan. **Please note that the PRDB is separate and apart from any retirement option that you selected at the time of your retirement.**

If you have any questions regarding this or any other pension-related matter, please contact the BSC at (646) 376-0123.

SURVIVOR DEATH BENEFITS

In the event of your death prior to retirement, your membership in the MABSTOA Pension Plan may entitle your designated beneficiary (ies) to a Death Benefit. There are two primary types of death benefits – Ordinary Death Benefits and Accidental Death Benefits. The information below explains the characteristics of each type of death benefit.

DESIGNATING BENEFICIARIES

When you filed your pension membership application, you were able to designate one or more beneficiaries to receive an Ordinary Death Benefit (ODB) in the event of your death before retirement. You were able to designate whomever you wish, for example, family members, partners, friends, etc. or your Estate. If you designated a minor (under age 18), you may have also completed a Designation of Guardian for Minor as Beneficiary Form indicating guardian information. If there is no designation on file, the ODB will be payable to your Estate.

Your beneficiary designation remains on file at MABSTOA Pension Plan and will govern eligibility to receive the ODB. At any time prior to your retirement, you may change the beneficiary (ies) you designated by filing a Designation of Beneficiary Form and/or a guardianship form, if you are designating a minor. The latest properly executed form you file will supersede all previously filed forms.

You may choose to designate two categories of beneficiaries – Primary Beneficiaries and Contingent Beneficiaries. Primary Beneficiaries are entitled to an ODB in the event of your death before retirement. Contingent Beneficiaries are entitled to an ODB only if they have survived all designated Primary Beneficiaries at the time of your death.

You must indicate the percentages of the ODB you wish to allocate for each category, and the sum of each category must total 100%. If you do not indicate percentages, the ODB will be divided equally.

EXAMPLE:

John Doe designates his wife and three sons as his Primary Beneficiaries and his two brothers as his Contingent Beneficiaries. John does not allocate percentages among his designees. The default percentages for his Primary Beneficiaries are 25% each. The default percentages for his Contingent Beneficiaries are 50 % each (only payable if no Primary Beneficiaries are eligible).

When you have designated multiple Primary Beneficiaries and one or more predeceases you and you do not file a revised beneficiary form, your ODB will be divided in equal shares to the remaining designated beneficiaries.

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Your Annual Pension Statement (APS) indicates the beneficiary (ies) on file with the MABSTOA Pension Plan. You are encouraged to review your APS carefully as you may need, or want, to change the beneficiary (ies) on file.

If you designate your spouse as a beneficiary for an ODB, your designation will be revoked upon divorce, annulment of marriage or judicial separation. However, the revocation will not take effect if you redesignate such person as a beneficiary after the divorce, annulment or separation. Designations made in connection with joint-and-survivor retirement opinions, or designations that are required under a domestic relations order on file with MABSTOA Pension Plan, are irrevocable by law. Before payment of an ODB can be issued, MABSTOA Pension Plan must receive a copy of the judgment of divorce, annulment or judicial separation.

Right of Election

NY State Estate Powers of Trust Law (EPTL) provides that if you are married and you change your beneficiary after 1992 to someone other than your spouse, and you die while married, your spouse retains a right to a portion of your death benefit.

NOTE: Should your death be the result of an on-the-job accident, an Accidental Death Benefit is payable to your Eligible Beneficiaries. Such Eligible Beneficiaries are defined by statute. Please contact MABSTOA Pension Plan for details.

ORDINARY DEATH BENEFIT

Your beneficiary (ies) will be entitled to an ODB if you die before retirement, whether or not death occurs as the result of an accident sustained on the job.

An ODB will be paid only if:

A) you were being paid on payroll at the time of your death;

OR

B) you were off payroll or you were on an authorized leave without pay at the time of your death; **AND**

➤ you were on payroll, in service and paid within the last 12 months before death; **AND**

➤ you were not gainfully employed since last on the payroll; **AND**

➤ you had credit for one or more years of continuous service since you last entered the service of MABSTOA

OR

C) Effective October 1, 2000, you were on an authorized leave of absence without pay for medical reasons which has continuously been in effect since you were last paid on the payroll, provided you were in service and last paid on the payroll within the four-year period prior to death.

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ACTIVE EMPLOYEE DEATH BENEFIT

A refund of the Basic Member Contributions, plus interest, in your pension account,

PLUS

A multiplication of your salary as indicated in the following table:

YEARS OF SERVICE	LUMP SUM BENEFIT EQUAL TO
At least one year, but less than two years	One year's Current Salary*
At least two years, but less than three years	Two times Current Salary
At least three years	Three times Current Salary

*Current Salary: The regular compensation earned during a member's last 12 months of service, plus overtime, night differentials, longevity payments and any other type of pensionable earning where applicable.

The lump-sum benefit described above is reduced each year you remain in active service beyond age 60. The following table shows the reduction for each age:

REDUCTION IN BENEFITS AFTER AGE 60 AND STILL IN SERVICE	
AGE AT DEATH	AMOUNT OF BENEFIT
61	95% of benefit in force
62	90% of benefit in force
63	85% of benefit in force
64	80% of benefit in force
65	75% of benefit in force
66	70% of benefit in force
67	65% of benefit in force
68	60% of benefit in force
69	55% of benefit in force
70 OR OVER	50% of benefit in force

MABSTOA PENSION PLAN

POST-RETIREMENT DEATH BENEFIT

In addition, upon your death after retirement a **Post-Retirement Death Benefit (PRDB)** will be provided to designated beneficiaries, if you have met the eligibility requirement. The PRDB is less than the ODB; the amount is dependent upon your date of death after retirement (see table below). At retirement, you can designate the beneficiary (ies) to receive this benefit. In the event designation is not made, the benefit will be paid for the beneficiaries designated for the Ordinary Death Benefit. If none exist, then payment will be made to the deceased retiree's estate.

POST-RETIREMENT DEATH BENEFIT	
IF DEATH OCCURS	AMOUNT OF BENEFIT
In the first year of retirement	50% of the benefit in force*
In the second year of retirement	25 % benefit in force*
In the third year of retirement and thereafter	10% of the benefit in force* at age 60
* The benefit in force is defined as the Ordinary Death Benefit (ODB) which would have been payable if you died the day before your retirement date, if any. However, where death occurs in the third year of retirement or thereafter, the benefit in force is defined as the ODB at age 60, if any.	



For Office Use Only
Clock-in Date

**Designation of Beneficiary
Post-Retirement Lump Sum Death Benefit**

This application is for those who wish to nominate a beneficiary to receive a Post-Retirement Lump Sum Death Benefit. If all the designated Primary Beneficiary(ies) predecease you, the lump sum payment will be paid to your designated Contingent Beneficiary(ies). If none exists, the lump sum will be paid to your Estate. Should you have any questions, please contact the Business Service Center at 646-376-0123.

RETIREE INFORMATION

Pass Number	BSC ID	Social Security Number	Date of Birth	
First Name		Middle Initial	Last Name	
Home Phone Number	Cell Phone Number	Other Phone Number		
Street Address	Apt. Number	City	State	Zip Code

I understand that at the time of my death after retirement, the lump sum death benefit will be paid to my surviving designated Primary Beneficiary(ies). If all the designated Primary Beneficiary(ies) predecease me, the lump sum death benefit will be paid to my Designated Contingent Beneficiary(ies). If none exists, the lump sum death benefit will be paid to my Estate.

I, the undersigned, nominate the below mentioned as my **PRIMARY** beneficiary(ies) for the lump sum death benefit payable on my death after retirement.

PRIMARY BENEFICIARY

First Name		Middle Initial	Last Name	
Relationship	Social Security Number		Date of Birth	
Street Address	Apt. Number	City	State	Zip Code
<input style="width: 95%;" type="text"/>	% Percentage you wish this beneficiary to receive of your benefit.		<input type="checkbox"/> If this beneficiary is a minor, check here and complete the guardian information on Form 115.	

PRIMARY BENEFICIARY

First Name		Middle Initial	Last Name	
Relationship	Social Security Number		Date of Birth	
Street Address	Apt. Number	City	State	Zip Code
<input style="width: 95%;" type="text"/>	% Percentage you wish this beneficiary to receive of your benefit.		<input type="checkbox"/> If this beneficiary is a minor, check here and complete the guardian information on Form 115.	



**Manhattan and Bronx
Surface Transit
Operating Authority**

MaBSTOA Pension Plan
2 Broadway, D10.52
New York, New York 10004
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Clock-In Date

If the foregoing Primary Beneficiary(ies) should predecease me, I hereby nominate the following as **CONTINGENT** Beneficiary(ies) for the above Post-Retirement Lump Sum Death Benefit. Designating Contingent Beneficiary(ies) is **OPTIONAL**. Lump sum payments will be distributed equally between those surviving beneficiaries, if more than one beneficiary has been nominated and no percentage has been allocated.

CONTINGENT BENEFICIARY

First Name	Middle Initial	Last Name		
Relationship	Social Security Number	Date of Birth		
Street Address	Apt. Number	City	State	Zip Code
<input style="width: 50px;" type="text"/> % Percentage you wish this beneficiary to receive of your benefit.		<input type="checkbox"/> If this beneficiary is a minor, check here and complete the guardian information on Form 115.		

CONTINGENT BENEFICIARY

First Name	Middle Initial	Last Name		
Relationship	Social Security Number	Date of Birth		
Street Address	Apt. Number	City	State	Zip Code
<input style="width: 50px;" type="text"/> % Percentage you wish this beneficiary to receive of your benefit.		<input type="checkbox"/> If this beneficiary is a minor, check here and complete the guardian information on Form 115.		

I am nominating my Estate as my beneficiary for my Post-Retirement Death Benefit. I understand that in order for this selection to be **valid, I may not write** in any other beneficiary's name; and I have, in fact, left all other Designation of Beneficiary sections on this form blank.

I understand that the lump sum payments will be distributed equally between those surviving, if more than one beneficiary has been nominated, and no percentage has been allocated.

Should I survive the beneficiaries, the Post-Retirement Lump Sum Death Benefit shall be paid to my Estate or to such other beneficiary or beneficiaries as I shall hereafter nominate by filing another Designation of Beneficiary form with the MaBSTOA Pension Plan.

Retiree's Signature: _____ Date: _____

Witnessed by (1): _____ Date: _____

Witnessed by (2): _____ Date: _____

This form must be acknowledged before a Notary Public or Commissioner of Deeds

State of _____ County of _____ On this _____ day of _____, 20____

personally appeared before me the above named, _____ to me known, and known to me to be the individual described in and who executed the foregoing instrument, and he or she acknowledged to me that he or she executed the same, and that the statements contained therein are true.

Signature of Notary Public or Commissioner of Deeds _____

Official Title _____

Expiration Date of Commission _____

If you have an official seal, affix it.