



Subject Spotlight
RETIREMENT



Today's Topics

- Choosing a Retirement Date
- Estimates
- Retirement Application
- Application Process
- Certifications
- Reporting Compensation
- KPERS' Post-Retirement



Choosing a Retirement Date

Retirement Date

Help employees choose the best retirement date.

- Age eligibility
- Rounding quarters
- Using add on pay



Retirement Eligibility **Full**

KPERS 1

- **Age 65** with **1 year**
- **Age 62** with **10 years**
- Any age when **age & years** of service equal **85** (points)

KPERS 2 & 3

- **Age 65** with **5 years**
- **Age 60** with **30 years**

Retirement Eligibility Reduced

KPERS 1, 2, and 3

- **Age 55** with **10 years**

Different reduction tables apply.

Early retirement permanently reduces monthly benefit.

KPERS 3

- Not eligible for Partial Lump-Sum Option

Rounding Quarters

To determine when someone will round up to an additional year of service, it is important to determine the rounding quarter.

Use the Total Service Credit years from the Annual Statement located in the “Retirement Help” section on the employee page in the Employer Web Portal.

Total Service Credit

17.25 years

**Rounding
Quarters**

.25 = Q1

.50 = Q4

.75 = Q3

.00 = Q2

This person rounds in the first quarter.

Rounding Quarter Example

KPERs 2020 Member Statement

Account Balance

| | |
|-----------------------------|--------------------|
| Contribution Account | |
| Your 2020 Contributions | \$1,991.37 |
| 2020 Interest | \$339.52 |
| 2020 Balance | \$10,818.89 |

Membership Details

Plan: KPERs 2
 Vesting Status: Vested
 Membership Date: 10/29/2013
 Final Average Salary: \$26,985
 Years of Service: 7.25 years

What This Could Look Like In Retirement

| Projected Benefit | Age | Service | Monthly Benefit |
|-----------------------------|-----|---------|-----------------|
| With No More Service Credit | 65 | 7 | \$291 |
| If You Keep Working | 65 | 15 | \$624 |

Each additional year of service adds approximately \$41 to your monthly benefit.
 Please do not make benefit decisions based on this statement. KPERs staff and your employer should be resources for you. You also have survivor benefits and lump-sum options. Login to your account for more detailed estimates.

Additional Benefits

KPERs is about more than just retirement. You also have:

- Disability Benefits
- Life Insurance
- Death Benefits

Rounding Quarters

.25 = Q1

.50 = Q4

.75 = Q3

.00 = Q2

This member is a **first** quarter rounder

Employer Info

| Plan Name | Pay Cycle | Q1 Begin Date | Q2 Begin Date | Q3 Begin Date | Q4 Begin Date |
|------------------------|-----------|---------------|---------------|---------------|---------------|
| KPERs | 00 | 12/12/2021 | 03/06/2022 | 06/12/2022 | 09/18/2022 |
| KPERs After Retirement | 00 | 12/12/2021 | 03/06/2022 | 06/12/2022 | 09/18/2022 |

Rounding Quarter Example

KPERS 2020 Member Statement

Account Balance

| | |
|-----------------------------|--------------------|
| Contribution Account | |
| Your 2020 Contributions | \$1,461.40 |
| 2020 Interest | \$618.56 |
| 2020 Balance | \$17,543.98 |

Membership Details

Plan: KPERS 1
 Vesting Status: Vested
 Membership Date: 1/25/2009
 Final Average Salary: \$25,857
Years of Service: 12 years

What This Could Look Like In Retirement

| Projected Benefit | Age | Service | Monthly Benefit |
|-----------------------------|-----|---------|-----------------|
| With No More Service Credit | 55 | 12 | \$276 |
| If You Keep Working | 59 | 26 | \$1,025 |

Each additional year of service adds approximately \$39 to your monthly benefit.
 Please do not make benefit decisions based on this statement. KPERS staff and your employer should be resources for you. You also have survivor benefits and lump-sum options. Login to your account for more detailed estimates.

Additional Benefits

KPERS is about more than just retirement. You also have:

- Disability Benefits
- Life Insurance
- Death Benefits

Rounding Quarters

.25 = Q1
 .50 = Q4
 .75 = Q3
.00 = Q2

This member is a **second** quarter rounder

Employer Info

Details EE/ER Rate Pay Cycles Education

| Plan Name | Pay Cycle | Q1 Begin Date | Q2 Begin Date | Q3 Begin Date | Q4 Begin Date |
|------------------------|-----------|---------------|---------------|---------------|---------------|
| KPERS | 00 | 12/12/2021 | 03/06/2022 | 06/12/2022 | 09/18/2022 |
| KPERS After Retirement | 00 | 12/12/2021 | 03/06/2022 | 06/12/2022 | 09/18/2022 |

Rounding Quarter Example

KPERS 2020 Member Statement

Account Balance

Contribution Account

| | |
|-------------------------|--------------------|
| Your 2020 Contributions | \$3,046.02 |
| 2020 Interest | \$2,366.33 |
| 2020 Balance | \$64,570.59 |

Membership Details

Plan: KPERS 1
 Vesting Status: Vested
 Membership Date: 2/18/1995
 Final Average Salary: \$45,424
 Years of Service: 25.75 years

What This Could Look Like In Retirement

| Projected Benefit | Age | Service | Monthly Benefit |
|-----------------------------|-----|---------|-----------------|
| With No More Service Credit | 60 | 26 | \$1,748 |

Each additional year of service adds approximately \$70 to your monthly benefit.
 Please do not make benefit decisions based on this statement. KPERS staff and your employer should be resources for you. You also have survivor benefits and lump-sum options. Login to your account for more detailed estimates.

Additional Benefits

KPERS is about more than just retirement. You also have:

- Disability Benefits
- Life Insurance
- Death Benefits

Rounding Quarters

.25 = Q1

.50 = Q4

.75 = Q3

.00 = Q2

This member is a **third** quarter rounder

Employer Info

Details EE/ER Rate Pay Cycles Education

| Plan Name | Pay Cycle | Q1 Begin Date | Q2 Begin Date | Q3 Begin Date | Q4 Begin Date |
|------------------------|-----------|---------------|---------------|---------------|---------------|
| KPERS | 00 | 12/12/2021 | 03/06/2022 | 06/12/2022 | 09/18/2022 |
| KPERS After Retirement | 00 | 12/12/2021 | 03/06/2022 | 06/12/2022 | 09/18/2022 |

Rounding Quarter Example

KPERS 2020 Member Statement

S363-1-00-0003795011 &162027+
 Lisa R Brooks

Account B [Redacted]

Membership Details

Plan: KPERS 1
 Vesting Status: Vested
 Membership Date: 8/20/2000
 Final Average Salary: \$38,718
 Years of Service: 20.5 years

When Can You Retire?

What This Could Look Like In Retirement

| Projected Benefit | Age | Service | Monthly Benefit |
|-----------------------------|-----|---------|-----------------|
| With No More Service Credit | 55 | 21 | \$715 |
| If You Keep Working | 58 | 28 | \$1,626 |

Each additional year of service adds approximately \$59 to your monthly benefit.
 Please do not make benefit decisions based on this statement. KPERS staff and your employer should be resources for you. You also have survivor benefits and lump-sum options. Login to your account for more detailed estimates.

Additional Benefits

KPERS is about more than just retirement. You also have:

- Disability Benefits
- Life Insurance
- Death Benefits

Rounding Quarters

.25 = Q1
.50 = Q4
 .75 = Q3
 .00 = Q2

This member is a **fourth** quarter rounder

Employer Info

Details EE/ER Rate Pay Cycles Education

| Plan Name | Pay Cycle | Q1 Begin Date | Q2 Begin Date | Q3 Begin Date | Q4 Begin Date |
|------------------------|-----------|---------------|---------------|---------------|---------------|
| KPERS | 00 | 12/12/2021 | 03/06/2022 | 06/12/2022 | 09/18/2022 |
| KPERS After Retirement | 00 | 12/12/2021 | 03/06/2022 | 06/12/2022 | 09/18/2022 |

Add-On Pay

Eligible to use Add On Pay if membership date prior to **July 1, 1993**

- One day into quarter, then stop working or
- Work entire quarter, then stop working

| Plan Name | Pay Cycle | Q1 Begin Date | Q2 Begin Date | Q3 Begin Date | Q4 Begin Date |
|-----------------------|-----------|---------------|---------------|---------------|---------------|
| KPERs | Blank | 12/27/2021 | 03/21/2022 | 06/13/2022 | 09/19/2022 |

First quarter rounders should work until the end of the first quarter.



Estimates

Two Ways to Calculate an Estimate

No Add-Ons

- Member Web Portal Benefit Calculator
- Website Generic Calculator

With Add-Ons

- 15E Benefit Estimate Request

Use 15E for Portability and QDRO'S.

Member Web Portal

KPERS
Kansas Public Employees Retirement System

[? Why do I have to enroll?](#)

[? How are you protecting my information?](#)

[✉ Contact us](#)

[New User](#) [What you'll need to enroll](#)

User ID

[Login](#) [Forgot User Id](#)

[Privacy Policy & Disclaimer](#) | KPERS © 2008

Member's Email Address

Member Web Portal Calculator

Welcome,

INBOX
0 new Messages

GO TO

- Home
- Personal Profile
- Beneficiaries
- Seminar Registration

Your Homepage

Select an Account

| Account | Relationship | Account Status | Account Balance | Service Credit | Membership Date |
|--------------|--------------|----------------|-----------------|----------------|-----------------|
| KPERS | Member | Active | \$7,326.23 | 3 years | 10/29/2012 |

Click account link above to enter your account.

- Saves up to 5 estimates

Welcome,

INBOX
0 new Messages

GO TO

- Home
- Personal Profile
- Beneficiaries
- Seminar Registration
- KPERS Account**
- Account Summary
- Insurance/Disability
- Benefit Calculator**
- Annual Statements

Benefit Estimate Calculator

- Click the new button to start a new estimate. The calculator is pre-populated with your information.
- If you open a saved estimate and add new information, it will save over your original estimate.
- KPERS must receive your retirement application before your retirement date.

New **Delete**

| <input type="checkbox"/> | Name | Created Date | Modified Date |
|--------------------------|------------------------------------------|--------------|---------------|
| <input type="checkbox"/> | Lump | 03/06/2015 | 03/06/2015 |
| <input type="checkbox"/> | Early | 02/17/2015 | 02/17/2015 |
| <input type="checkbox"/> | Estimate 6-11-2014 15:50 | 06/11/2014 | 06/11/2014 |
| <input type="checkbox"/> | 012714 | 01/27/2014 | 01/27/2014 |

Disclaimer:
Estimate accuracy is based on the information available. Please do not make benefit decisions based on this estimate. Final calculations will be made when you retire based on the information provided by your employer. See...

Personalized Benefit Estimate – KPERS 1 & 2

The earliest date you can receive a full retirement benefit is **02/01/2018**.*

- I will retire on 02/01/2018.
- I will retire on (mm/dd/yyyy). Must be the first day of a month.

*You may actually become eligible sometime in the previous year before this date due to earning additional service credit. Please check with your employer if you are nearing retirement and would like an exact eligibility date.

Step 3: What is your final average salary?

Your current final average salary (FAS) is **\$61,931.45**. [What is FAS?](#)

- Use \$61,931.45 as my FAS.
- Use as my FAS.
- Use as my FAS with annual salary increase of %

Step 4: What is your total service credit?

Your current total service credit is **25.00** years.

Service @ 1.75% : **20.75**

Service @ 1.85% : **4.00**

Your projected total service credit is **25.00** years, if you continue working until your estimated retirement date shown above.

- Use the projected service based on the selected retirement date in **Step 2**
- Use 25.00, my total years of service as of 12/16/2017
- Use as my total years of service.

Step 5: Do you plan to provide a continuing benefit to a survivor?

- I do not plan to provide for a survivor. I want a benefit for my lifetime only.
- I plan to provide for a survivor. My survivor's date of birth is (mm/dd/yyyy).

Personal Estimate Example – KPERS 1 & 2

[Calculate & Save](#)[Download Estimate](#)[Back](#)

Retirement Date: **07/01/2018**

Retirement Age: **68**

Final Average Salary: **\$61,931.45**

Total Service: **25.00 years**

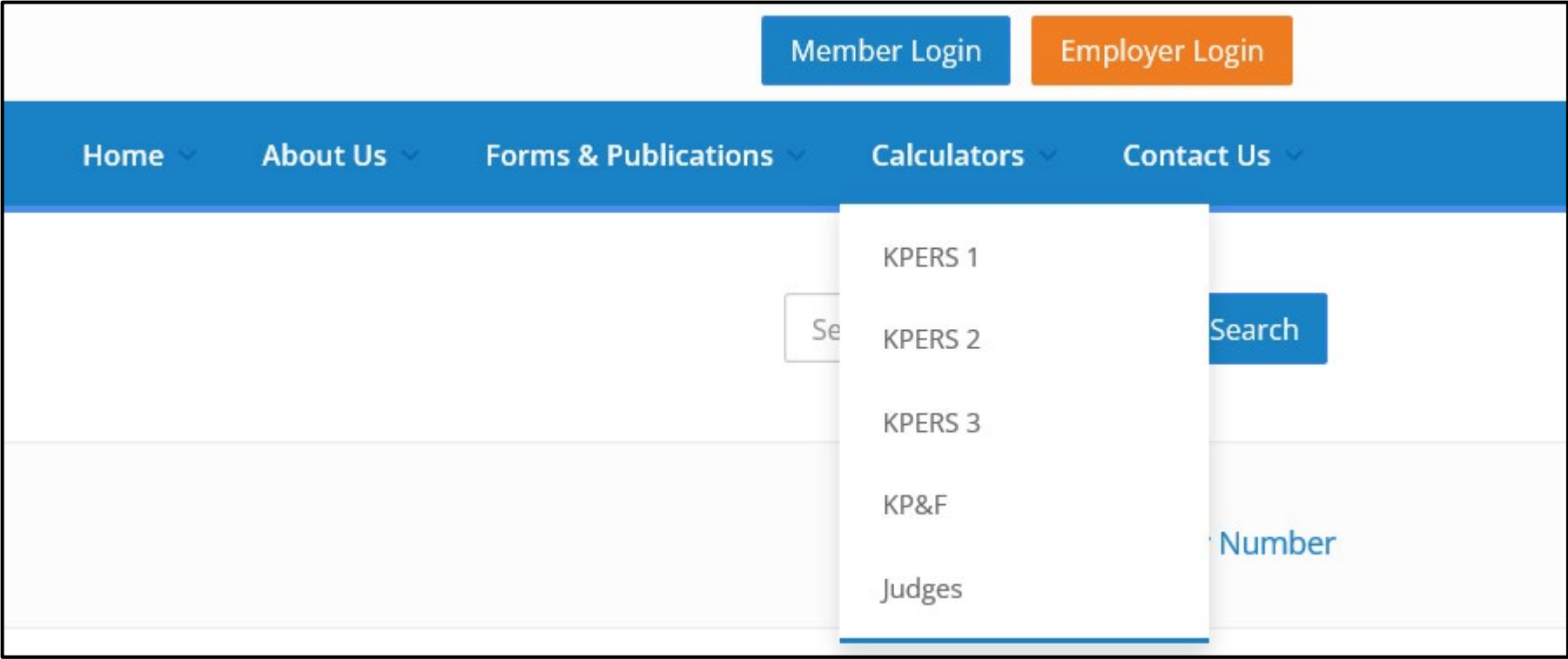
Service @ 1.75%: **21.00 years** Service @ 1.85%: **4.00 years**

Annual Benefit = **\$27,342.73**

Monthly Benefit

| Benefit Option | No Lump Sum | 10% Lump Sum | 20% Lump Sum | 30% Lump Sum | 40% Lump Sum | 50% Lump Sum |
|----------------------|-------------|--------------|--------------|--------------|--------------|--------------|
| PLSO | \$0.00 | \$23,148.05 | \$46,296.10 | \$69,444.15 | \$92,592.20 | \$115,740.25 |
| Maximum | \$2,278.56 | \$2,050.70 | \$1,822.85 | \$1,594.99 | \$1,367.14 | \$1,139.28 |
| 50% Joint-Survivor | \$2,119.06 | \$1,907.16 | \$1,695.25 | \$1,483.34 | \$1,271.44 | \$1,059.53 |
| 75% Joint-Survivor | \$2,039.31 | \$1,835.38 | \$1,631.45 | \$1,427.52 | \$1,223.59 | \$1,019.66 |
| 100% Joint-Survivor | \$1,959.56 | \$1,763.61 | \$1,567.65 | \$1,371.69 | \$1,175.74 | \$979.78 |
| 5-Year Life-Certain | \$2,232.99 | \$2,009.69 | \$1,786.39 | \$1,563.09 | \$1,339.79 | \$1,116.49 |
| 10-Year Life-Certain | \$2,164.63 | \$1,948.17 | \$1,731.71 | \$1,515.24 | \$1,298.78 | \$1,082.32 |
| 15-Year Life-Certain | \$2,005.13 | \$1,804.62 | \$1,604.11 | \$1,403.59 | \$1,203.08 | \$1,002.57 |

KPERS Generic Calculator



Generic Calculator Estimate

Personal Information

Your Date of Birth:

[Joint Annuitant's](#) Date of Birth: *Optional, complete only if you want to leave a survivor benefit.*

Date You Plan to Retire: *KPERS & KP&F: Your retirement date must be the first day of a month. JUDGES: Your retirement date can be any day of a month.*

Final Average Salary (\$): *See your last annual statement or log on to your Account Access.*

[Correctional Group A or Group B:](#) N/A Group A Group B *(If you do not qualify for either group, you are a regular KPERS member)*

Years of Service

Note: Enter years of actual KPERS service credit at retirement.

Years @ 1.75% Multiplier: *Service prior to January 1, 2014, and most purchased service is included in this category. Rounded service to next full year.*

Years @ 1.85% Multiplier: *KPERS 1 service after January 1, 2014. All KPERS 2 current service and purchased service is included in this category. Rounded service to next full year.*

Years @ 1% Multiplier: *If you have service with your employer before employer joined KPERS. Rounded service to next full year.*

Years @ 0.75% Multiplier: *Withdrawn KSRS teaching service granted when a member is vested. Rounded service to next full year.*

Years @ 1% Using Salary at Time of Purchase(\$): Salary at Time of Purchase:

For members who purchased out-of-state non-federal public service before July 1996. (This is not common.)

If you are unsure of your salary at that time, please contact the Retirement System.

Calculate

Clear Fields

Calculators ▾

- KPERS 1
- KPERS 2
- KPERS 3
- KP&F
- Judges

Generic Calculator Estimate

Personal Information

Your Date of Birth:

[Joint Annuitant's](#) Date of Birth: Optional, complete only if you want to leave a survivor benefit.

Date You Plan to Retire: KPERS & KP&F: Your retirement date must be the first day of a month. JUDGES: Your retirement date can be any day of a month.

Final Average Salary (\$): See your last annual statement or log on to your Account Access.

[Correctional Group A or Group B:](#) N/A Group A Group B (Only choose Group A or Group B if you are a Correctional with at least 10 years of service. If you do not qualify for either group, you are a Judge.)

Years of Service

Note: Enter years of actual KPERS service credit at retirement.

Years @ 1.85% Multiplier: KPERS 1 service after January 1, 2014. All KPERS 2 current service and purchased service is included in this category. Rounded service to next full year.

Years @ 1% Multiplier: If you have service with your employer before employer joined KPERS. Rounded service to next full year.

Calculate

Clear Fields

Annual Benefit:

Monthly Benefit and Lump Sum Payment Estimates

Note: Be sure to see general comments below

Calculators

KPERS 1

KPERS 2

KPERS 3

KP&F

Judges

Generic Calculator Benefit Options

Annual Benefit: Benefit Amount: 27745.00

Monthly Benefit and Lump Sum Payment Estimates

Note: Be sure to see general comments below

| Benefit Option | No Lump Sum | 10% Lump Sum | 20% Lump Sum | 30% Lump Sum | 40% Lump Sum | 50% Lump Sum |
|--------------------------------|-------------|--------------|--------------|--------------|--------------|--------------|
| Partial Lump-Sum Option (PLSO) | \$0.00 | \$26,290.15 | \$52,580.30 | \$78,870.45 | \$105,160.60 | \$131,450.75 |
| Maximum Monthly Benefit | \$2,312.08 | \$2,080.87 | \$1,849.66 | \$1,618.46 | \$1,387.25 | \$1,156.04 |
| Joint-Survivor 50% Benefit | \$2,103.99 | \$1,893.59 | \$1,683.19 | \$1,472.79 | \$1,262.39 | \$1,052.00 |
| Joint-Survivor 75% Benefit | \$2,011.51 | \$1,810.36 | \$1,609.21 | \$1,408.06 | \$1,206.91 | \$1,005.76 |
| Joint-Survivor 100% Benefit | \$1,919.03 | \$1,727.13 | \$1,535.22 | \$1,343.32 | \$1,151.42 | \$959.52 |
| Life-Certain 5 Years | \$2,265.84 | \$2,039.26 | \$1,812.67 | \$1,586.09 | \$1,359.50 | \$1,132.92 |
| Life-Certain 10 Years | \$2,196.48 | \$1,976.83 | \$1,757.18 | \$1,537.54 | \$1,317.89 | \$1,098.24 |
| Life-Certain 15 Years | \$2,034.63 | \$1,831.17 | \$1,627.70 | \$1,424.24 | \$1,220.78 | \$1,017.32 |

General Comments

On the date you plan to retire, you will be 64 Year(s), 0 Month(s) old with 89 Points. The Lump Sum Factor is 113.707783.

Benefit Estimates KPERS 3

Benefit Calculator - KPERS 3

Benefit Calculator Disclaimer: Information from your most-recent annual statement may be helpful. This calculator is not linked to your record. **Estimate accuracy depends on the information you enter.** If benefit amount may be affected by a Qualified Domestic Relations Order (QDRO). Planning to retire in the next few years? You can request an estimate from us. [Retirement Benefit Estimate Request form.](#)

Personal Information

Your Date of Birth:

[Joint Annuitant's](#) Date of Birth: *Optional, complete only if you want to leave a survivor benefit.*

Career and Account Information

Please see your latest member annual statement for info in this section. Or login to your KPERS account for a personalized estimate with your own info. [Login to your account](#)

Current Annual Salary(\$):

Do you want to include future annual salary increases between now and retirement? % - *Optional*

Current Contribution Account Balance(\$): *Do not include contributions from a service purchase.*

Current Retirement Credit Value(\$):

Current Years of Service: *Rounded service to next full year.*

Retirement Details

Date You Plan to Retire: *Your retirement date must be the first day of a month.*

Total Years of Service at Retirement:

Have the calculator project my total years of service at retirement

Use as my total years of service at retirement. *Rounded service to next full year.*

Calculators

KPERS 1

KPERS 2

KPERS 3

KP&F

Judges

KPERS 3 Benefit Options

| No COLA* Monthly Benefit | | | |
|--------------------------|-------------|--------------|--------------|
| Benefit Option | No Lump Sum | 10% Lump Sum | 30% Lump Sum |
| BASE BENEFIT | | | |
| Life-Certain 10 Years | \$3,600.17 | \$3,240.16 | \$2,520.12 |
| Partial Lump-Sum Option | \$0.00 | \$52,976.53 | \$158,929.60 |
| Life-Certain 5 Years | \$3,648.69 | \$3,291.67 | \$2,570.52 |
| Life-Certain 15 Years | \$3,490.93 | \$3,141.84 | \$2,443.65 |
| Joint-Survivor 50% | \$3,431.53 | \$3,088.38 | \$2,402.07 |
| Joint-Survivor 75% | \$3,305.87 | \$2,975.28 | \$2,314.11 |
| Joint-Survivor 100% | \$3,189.08 | \$2,870.17 | \$2,232.36 |

Age 24 & retiring at age 65

KPERS 3 Benefit Options


| 1% COLA* Monthly Benefit | | | |
|------------------------------------------------------|--------------------|---------------------|---------------------|
| Benefit Option | No Lump Sum | 10% Lump Sum | 30% Lump Sum |
| Life-Certain 10 Years | \$3,295.06 | \$2,965.56 | \$2,306.54 |
| Partial Lump-Sum Option | \$0.00 | \$52,976.53 | \$158,929.60 |
| Life-Certain 5 Years | \$3,333.54 | \$3,007.83 | \$2,351.91 |
| Life-Certain 15 Years | \$3,191.89 | \$2,872.70 | \$2,234.32 |
| Joint-Survivor 50% | \$3,114.44 | \$2,803.00 | \$2,180.11 |
| Joint-Survivor 75% | \$2,989.85 | \$2,690.86 | \$2,092.89 |
| Joint-Survivor 100% | \$2,874.84 | \$2,587.35 | \$2,012.39 |
| <i>*self-funded annual cost-of-living adjustment</i> | | | |
| 2% COLA* Monthly Benefit | | | |
| Benefit Option | No Lump Sum | 10% Lump Sum | 30% Lump Sum |
| Life-Certain 10 Years | \$3,002.50 | \$2,702.25 | \$2,101.75 |
| Partial Lump-Sum Option | \$0.00 | \$52,976.53 | \$158,929.60 |
| Life-Certain 5 Years | \$3,031.39 | \$2,735.69 | \$2,140.82 |
| Life-Certain 15 Years | \$2,906.00 | \$2,615.40 | \$2,034.20 |
| Joint-Survivor 50% | \$2,811.53 | \$2,530.38 | \$1,968.07 |
| Joint-Survivor 75% | \$2,688.69 | \$2,419.82 | \$1,882.08 |
| Joint-Survivor 100% | \$2,576.13 | \$2,318.51 | \$1,803.29 |

Benefit Estimate Request – Non-School and Non-Certified

Best practice:

If member's start date is **before July 1, 1993**, then fill out **two** – one working one day into quarter and one working the entire quarter

SAVE
RESET
PRINT


KPERs-15E Rev. 12/17

RETIREMENT BENEFIT ESTIMATE REQUEST

For security reasons, do not submit form by email.

■ **Important** – A member or a designated agent may complete this form. Only one needs to sign. *Please keep in mind that the benefit estimate calculated from this information is just an estimate. This estimate may take up to 4 weeks to process. Actual retirement benefits will be based on information the employer provides when a member actually retires.*
Members can calculate their own benefit estimate by logging in to their personal account at kpers.org. The benefit calculator uses a member's personal data to create quick, accurate estimates.

■ **Contact Us** – toll free: 1-888-275-5737 • phone: 785-296-6166 • fax: 785-296-6638
email: kpers@kpers.org • web site: kpers.org • mail: 611 S. Kansas Ave., Suite 100, Topeka, KS 66603

■ **Part A – Member Information**

| | |
|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| 1. Social Security Number: _____ | 2. Name (First, MI, Last): _____ |
| 3. Mailing Address: _____ City, State, Zip: _____ | 4. Employer: _____ |
| 5. Position: _____ | 6. Expected Retirement Date: _____ |
| 7. Expected Last Day on Payroll: _____ | 8. Is Member Subject to Continuing Contract Law? <input type="checkbox"/> No <input type="checkbox"/> Yes; Date Contract Expires: _____ |
| 9. Daytime Telephone Number: _____ | 10. E-mail Address: _____ |

■ **Part B – Joint Annuitant Information** – To have joint-survivor options estimated, complete the information below for the person you want as your joint annuitant.

| | |
|----------------------------------|-------------------------|
| 1. Name (First, MI, Last): _____ | 2. Date of Birth: _____ |
|----------------------------------|-------------------------|

■ **Part C – KPERs 3 Pay Information**

1. Current Annual Salary Subject to KPERs Contributions: \$ _____

■ **Part D – KPERs 1, KPERs 2, KP&F and Judges Pay Information**

Important: Do not include any incentive pay or additional compensation for unused sick or annual leave in amounts listed in 1-2 below.

| | Year | Amount |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|
| 1. Current Annual Salary Subject to KPERs Contributions: <i>If retiring in current year, include only compensation through estimated last day on payroll.</i> | _____ | \$ _____ |
| 2. Next Annual Salary Subject to KPERs Contributions: <i>If retiring in next year, include only compensation through estimated last day on payroll.</i> | _____ | \$ _____ |
| 3. Lump-Sum Payment for Sick and/or Annual Leave: <i>Paid when member leaves work, not included in above salaries.</i> | _____ | \$ _____ |

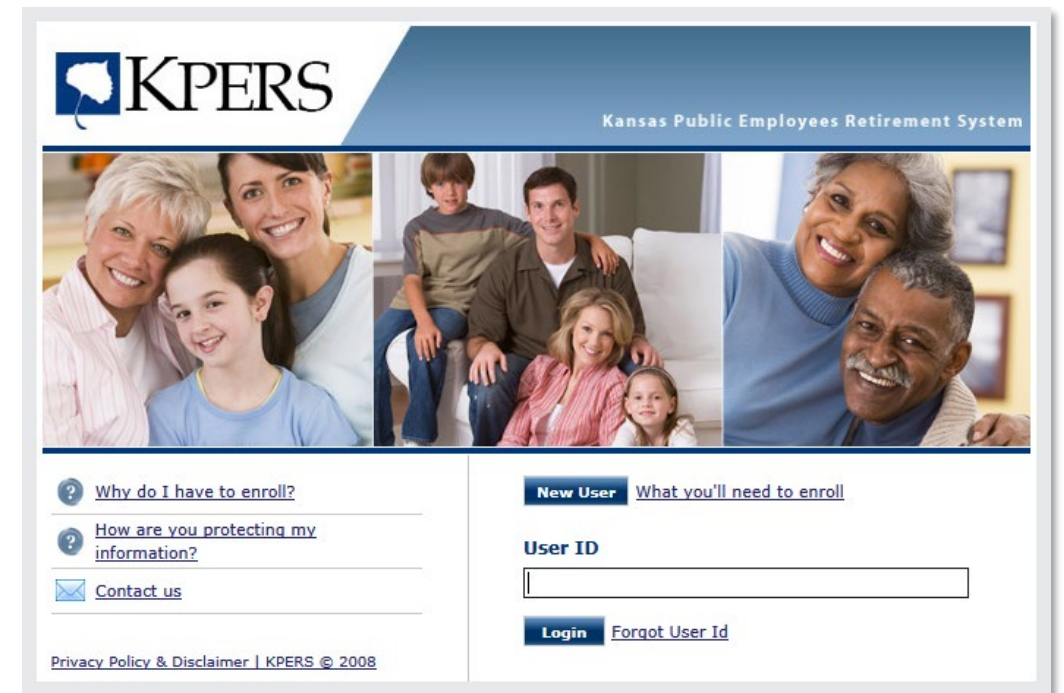
I certify that the information provided on this form is true to the best of my knowledge. I understand that the retirement estimate calculated with this information is just an estimate. KPERs will calculate the actual benefit at retirement using verified final amounts and pay the benefit according to applicable laws and regulations.

Member Signature: _____ Month/Day/Year: ____/____/____
Designated Agent Signature: _____ Month/Day/Year: ____/____/____

Benefit Estimate Request – School Certified

Best Practice:

- In general, those under the “Continuing Contract Law”, will have a **June 1** retirement date – **Go to the Member Web Portal.**



The screenshot shows the KPERS Member Web Portal login page. At the top left is the KPERS logo, and at the top right is the text "Kansas Public Employees Retirement System". Below the header is a banner image featuring three groups of smiling people: a young girl with her grandparents, a family with a boy and a girl, and an older couple. Below the banner, there are three links: "Why do I have to enroll?", "How are you protecting my information?", and "Contact us". On the right side, there is a "New User" button and a link "What you'll need to enroll". Below that is a "User ID" label and a text input field. At the bottom right, there are "Login" and "Forgot User Id" buttons. At the bottom left, there is a link for "Privacy Policy & Disclaimer | KPERS © 2008".


Benefit Estimate Request – School Certified

Best Practice:

If member's start date is before July 1, 1993, then fill out **two** 15E forms— one for a **June 1** retirement date and one for the first retirement date after the end of their contract.

Payouts should equal two month's or more of pay for a September 1 retirement date.

[SAVE](#)
[RESET](#)
[PRINT](#)

 **KPERS**
KPERS-15E Rev. 12/17

RETIREMENT BENEFIT ESTIMATE REQUEST
For security reasons, do not submit form by email.

■ **Important** – A member or a designated agent may complete this form. Only one needs to sign. Please keep in mind that the benefit estimate calculated from this information is just an estimate. This estimate may take up to 4 weeks to process. Actual retirement benefits will be based on information the employer provides when a member actually retires.
Members can calculate their own benefit estimate by logging in to their personal account at kpers.org. The benefit calculator uses a member's personal data to create quick, accurate estimates.

■ **Contact Us** – toll free: 1-888-275-5737 • phone: 785-296-6166 • fax: 785-296-6638
email: kpers@kpers.org • web site: kpers.org • mail: 611 S. Kansas Ave., Suite 100, Topeka, KS 66603

■ **Part A – Member Information**

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| 1. Social Security Number: _____ | 2. Name (First, MI, Last): _____ |
| 3. Mailing Address: _____ | 4. Employer: _____ |
| City, State, Zip: _____ | 5. Position: _____ |
| 6. Expected Retirement Date: _____ | 7. Expected Last Day on Payroll: _____ |
| 8. Is Member Subject to Continuing Contract Law? <input type="checkbox"/> No <input type="checkbox"/> Yes; Date Contract Expires: _____ | 10. E-mail Address: _____ |
| 9. Daytime Telephone Number: _____ | |

■ **Part B – Joint Annuitant Information** – To have joint-survivor options estimated, complete the information below for the person you want as your joint annuitant.

| | |
|----------------------------------|-------------------------|
| 1. Name (First, MI, Last): _____ | 2. Date of Birth: _____ |
|----------------------------------|-------------------------|

■ **Part C – KPERS 3 Pay Information**

| | |
|----------------------------------------------------------|----------|
| 1. Current Annual Salary Subject to KPERS Contributions: | \$ _____ |
|----------------------------------------------------------|----------|

■ **Part D – KPERS 1, KPERS 2, KP&F and Judges Pay Information**

Important: Do not include any incentive pay or additional compensation for unused sick or annual leave in amounts listed in 1-2 below.

| | Year | Amount |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|
| 1. Current Annual Salary Subject to KPERS Contributions: <i>If retiring in current year, include only compensation through estimated last day on payroll.</i> | _____ | \$ _____ |
| 2. Next Annual Salary Subject to KPERS Contributions: <i>If retiring in next year, include only compensation through estimated last day on payroll.</i> | _____ | \$ _____ |
| 3. Lump-Sum Payment for Sick and/or Annual Leave: <i>Paid when member leaves work, not included in above salaries.</i> | _____ | \$ _____ |

"I certify that the information provided on this form is true to the best of my knowledge. I understand that the retirement estimate calculated with this information is just an estimate. KPERS will calculate the actual benefit at retirement using verified final amounts and pay the benefit according to applicable laws and regulations."

Member Signature: _____ Month/Day/Year: ____/____/____
Designated Agent Signature: _____ Month/Day/Year: ____/____/____

Benefit Estimate Request

■ Part C – KPERS 3 Pay Information

1. Current Annual Salary Subject to KPERS Contributions:

\$

■ Part D – KPERS 1, KPERS 2, KP&F and Judges Pay Information

Important: Do not include any incentive pay or additional compensation for unused sick or annual leave in amounts listed in 1-2 below.

1. Current Annual Salary Subject to KPERS Contributions:
If retiring in current year, include only compensation through estimated last day on payroll.

Year

Amount

\$


2. Next Annual Salary Subject to KPERS Contributions:
If retiring in next year, include only compensation through estimated last day on payroll.

\$

3. Lump-Sum Payment for Sick and/or Annual Leave:
Paid when member leaves work, not included in above salaries.

\$

Benefit Estimate Request Non-School Example



SAVE

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RETIREMENT BENEFIT ESTIMATE REQUEST
For security reasons, do not submit form by email.

■ **Important** – A member or a designated agent may complete this form. Only one needs to sign. Please keep in mind that the benefit estimate calculated from this information is just an estimate. This estimate may take up to 4 weeks to process. Actual retirement benefits will be based on information the employer provides when a member actually retires.
Members can calculate their own benefit estimate by logging in to their personal account at kpers.org. The benefit calculator uses a member's personal data to create quick, accurate estimates.

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email: kpers@kpers.org • web site: kpers.org • mail: 611 S. Kansas Ave., Suite 100, Topeka, KS 66603

■ **Part A – Member Information**

1. Social Security Number: 555-55-5555 2. Name (First, MI, Last): Jane Doe
3. Mailing Address: xxx St 4. Employer: Agency xyz
6. Expected Retirement Date: 05/01/2022 7. Expected Last Day on Payroll: 04/30/2022
9. Daytime Telephone Number: (111) 111-1111 10. E-mail Address:

■ **Part B – Joint Annuitant Information** – To have joint-survivor options estimated, complete the information below for the person you want as your joint annuitant.
1. Name (First, MI, Last): 2. Date of Birth:

■ **Part C – KPERS 3 Pay Information**
1. Current Annual Salary Subject to KPERS Contributions: \$

■ **Part D – KPERS 1, KPERS 2, KP&F and Judges Pay Information**
Important: Do not include any incentive pay or additional compensation for unused sick or annual leave in amounts listed in 1-2 below.

| Year | Amount |
|------|--------------|
| 2022 | \$ 16,310.00 |

1. Current Annual Salary Subject to KPERS Contributions:
If retiring in current year, include only compensation through estimated last day on payroll.

2. Next Annual Salary Subject to KPERS Contributions:
If retiring in next year, include only compensation through estimated last day on payroll.

3. Lump-Sum Payment for Sick and/or Annual Leave: \$
Paid when member leaves work, not included in above salaries.

"I certify that the information provided on this form is true to the best of my knowledge. I understand that the retirement estimate calculated with this information is just an estimate. KPERS will calculate the actual benefit at retirement using verified final amounts and pay the benefit according to applicable laws and regulations."


Member Signature: _____ Month/Day/Year: ____/____/____
Designated Agent Signature: _____ Month/Day/Year: ____/____/____

| Line No | Quarter | Pay Date | Pay Period Begin Date | Pay Period End Date |
|---------|---------|------------|-----------------------|---------------------|
| 1 | 1 | 01/07/2022 | 12/19/2021 | 01/01/2022 |
| 2 | 1 | 01/21/2022 | 01/02/2022 | 01/15/2022 |
| 3 | 1 | 02/04/2022 | 01/16/2022 | 01/29/2022 |
| 4 | 1 | 02/18/2022 | 01/30/2022 | 02/12/2022 |
| 5 | 1 | 03/04/2022 | 02/13/2022 | 02/26/2022 |
| 6 | 1 | 03/18/2022 | 02/27/2022 | 03/12/2022 |
| 7 | 2 | 04/01/2022 | 03/13/2022 | 03/26/2022 |
| 8 | 2 | 04/15/2022 | 03/27/2022 | 04/09/2022 |
| 9 | 2 | 04/29/2022 | 04/10/2022 | 04/23/2022 |
| 10 | 2 | 05/13/2022 | 04/24/2022 | 05/07/2022 |



Report 9 full pay checks plus 7 days of pay

Benefit Estimate Request - School Certified Example



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RESET
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RETIREMENT BENEFIT ESTIMATE REQUEST
For security reasons, do not submit form by email.

Important – A member or a designated agent may complete this form. Only one needs to sign. Please keep in mind that the benefit estimate calculated from this information is just an estimate. This estimate may take up to 4 weeks to process. Actual retirement benefits will be based on information the employer provides when a member actually retires.

Members can calculate their own benefit estimate by logging in to their personal account at kpers.org. The benefit calculator uses a member's personal data to create quick, accurate estimates.

Contact Us – toll free: 1-888-275-5737 • phone: 785-296-6166 • fax: 785-296-6638
email: kpers@kpers.org • web site: kpers.org • mail: 611 S. Kansas Ave., Suite 100, Topeka, KS 66603

Part A – Member Information

1. Social Security Number: 555-55-5555 2. Name (First, MI, Last): Jane Doe
 3. Mailing Address: XXX Street 4. Employer: _____
 5. _____
 6. Expected Retirement Date: 06/01/2022 7. Expected Last Day on Payroll: 05/31/2022
 8. Is member subject to continuing contract law? No 9. Daytime Telephone Number: _____
 10. E-mail Address: _____

Part B – Joint Annuitant Information – To have joint-survivor options estimated, complete the information below for the person you want as your joint annuitant.

1. Name (First, MI, Last): _____ 2. Date of Birth: _____

Part C – KPERS 3 Pay Information

1. Current Annual Salary Subject to KPERS Contributions: \$ _____

Part D – KPERS 1, KPERS 2, KP&F and Judges Pay Information

Important: Do not include any incentive pay or additional compensation for unused sick or annual leave in amounts listed in 1-2 below.

1. Current Annual Salary Subject to KPERS Contributions: 2022 \$ 30,289.55
 If retiring in current year, include only compensation through estimated last day on payroll.
 2. Next Annual Salary Subject to KPERS Contributions: _____ \$ _____
 If retiring in next year, include only compensation through estimated last day on payroll.
 3. Lump-Sum Payment for Sick and/or Annual Leave: _____ \$ _____
 Paid when member leaves work, not included in above salaries.

I certify that the information provided on this form is true to the best of my knowledge. I understand that the retirement estimate calculated with this information is just an estimate. KPERs will calculate the actual benefit at retirement using verified final amounts and pay the benefit according to applicable laws and regulations.

Member Signature: _____ Month/Day/Year: ____/____/____
 Designated Agent Signature: _____ Month/Day/Year: ____/____/____

12 over 12 Employee

| Line No | Quarter | Pay Date | Pay Period Begin Date | Pay Period End Date |
|---------|---------|------------|-----------------------|---------------------|
| 1 | 1 | 01/25/2022 | 01/01/2022 | 01/31/2022 |
| 2 | 1 | 02/25/2022 | 02/01/2022 | 02/28/2022 |
| 3 | 1 | 03/25/2022 | 03/01/2022 | 03/31/2022 |
| 4 | 2 | 04/25/2022 | 04/01/2022 | 04/30/2022 |
| 5 | 2 | 05/25/2022 | 05/01/2022 | 05/31/2022 |

Report Money January 1 – May 31

Reporting Money for School Estimates Certified

Reported compensation is based on a calendar year.


Licensed positions on 12-month contracts

| Contract End Date | Retirement Date | End Date | Report | Don't Report | Board of Ed Licensed Positions |
|-------------------|-----------------|----------|----------------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| July 31 | June 1 | May 31 | Pay thru May 31 | June, July or add-on pay | <ul style="list-style-type: none"> • Educator (Teacher, etc) • Audiologist • Speech pathologist • Occupational therapists • Physical therapists • Social worker • Registered nurse • Dietitian • Licensed professional counselor • Psychologist • Orientation and mobility instructor |
| | July 1 | June 30 | Pay thru June 30 | July or add-on pay | |
| | Aug 1 | July 31 | All pay, including add-on* | n/a | |
| Aug 31 | June 1 | May 31 | Pay thru May 31 | June, July, Aug or add-on pay | |
| | July 1 | June 30 | Pay thru June 30 | July, Aug or add-on pay | |
| | Aug 1 | July 31 | Pay thru July 31 | Aug or add-on pay | |
| | Sep 1 | Aug 31 | All pay, including add-on* | n/a | |

Principals, administrators and superintendents

| Contract End Date | Retirement Date | End Date | Report | Don't Report |
|-------------------|-----------------|----------|----------------------------|--------------------------|
| June 30 | June 1 | May 31 | Pay thru May 31 | June or add-on pay |
| | July 1 | June 30 | All pay, including add-on* | n/a |
| July 31 | June 1 | May 31 | Pay thru May 31 | July, July or add-on pay |
| | July 1 | June 30 | Pay thru June 30 | July or add-on pay |
| | Aug 1 | July 31 | All pay, including add-on* | n/a |

Benefit Estimate Request - School Non - Certified Example



KPERS
KPERS-1SE Rev. 12/17

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RETIREMENT BENEFIT ESTIMATE REQUEST
For security reasons, do not submit form by email.

■ **Important** – A member or a designated agent may complete this form. Only one needs to sign. Please keep in mind that the benefit estimate calculated from this information is just an estimate. This estimate may take up to 4 weeks to process. Actual retirement benefits will be based on information the employer provides when a member actually retires.
Members can calculate their own benefit estimate by logging in to their personal account at kpers.org. The benefit calculator uses a member's personal data to create quick, accurate estimates.

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email: kpers@kpers.org • web site: kpers.org • mail: 611 S. Kansas Ave., Suite 100, Topeka, KS 66603

■ **Part A – Member Information**

1. Social Security Number: 555-55-5555 2. Name (First, MI, Last): Jane Doe
 3. Mailing Address: xxx Street
 6. Expected Retirement Date: 06/01/2022 7. Position: Para
 8. 9. Expected Last Day on Payroll: 05/23/2022
 9. Daytime Telephone Number: 10. E-mail Address:

■ **Part B – Joint Annuitant Information** – To have joint-survivor options estimated, complete the information below for the person you want as your joint annuitant.
 1. Name (First, MI, Last): 2. Date of Birth:

■ **Part C – KPERS 3 Pay Information**
 1. Current Annual Salary Subject to KPERS Contributions: \$

■ **Part D – KPERS 1, KPERS 2, KP&F and Judges Pay Information**
Important: Do not include any incentive pay or additional compensation for unused sick or annual leave in amounts listed in 1-2 below.

1. Current Annual Salary Subject to KPERS Contributions: 2022 \$ 11351.10
If retiring in current year, include only compensation through estimated last day on payroll.
 2. Next Annual Salary Subject to KPERS Contributions: \$
If retiring in next year, include only compensation through estimated last day on payroll.
 3. Lump-Sum Payment for Sick and/or Annual Leave: \$
Paid when member leaves work, not included in above salaries.

"I certify that the information provided on this form is true to the best of my knowledge. I understand that the retirement estimate calculated with this information is just an estimate. KPERS will calculate the actual benefit at retirement using verified final amounts and pay the benefit according to applicable laws and regulations."

Member Signature: _____ Month/Day/Year: ____/____/____
 Designated Agent Signature: _____ Month/Day/Year: ____/____/____

9 over 9 employee

| | | | | |
|---|---|------------|------------|------------|
| 1 | 1 | 01/25/2022 | 12/11/2021 | 01/10/2022 |
| 2 | 1 | 02/25/2022 | 01/11/2022 | 02/10/2022 |
| 3 | 1 | 03/25/2022 | 02/11/2022 | 03/10/2022 |
| 4 | 2 | 04/25/2022 | 03/11/2022 | 04/10/2022 |
| 5 | 2 | 05/25/2022 | 04/11/2022 | 05/10/2022 |
| 6 | 2 | 06/25/2022 | 05/11/2022 | 06/10/2022 |

Report Money January 1 Through Last Day on Payroll

Compensation and End Dates

Classified staff (cooks, secretaries, paras, bus drivers, custodians and other hourly employees)

| If They... | End Date | Report |
|---------------------------------------------------------|-----------------------------------------------------|--------------------------------------------------------|
| Work 9 or 10 months and receive pay over 12 months | Last Day of the Month or Last Day of the Pay Period | All pay, including summer checks & add-on pay* |
| Work 9 or 10 months and receive pay over 9 or 10 months | Actual last day worked | All pay, including add-on pay* |
| Work and receive pay over 12 months | Actual last day worked | All pay through retirement date, including add-on pay* |

* If hire date allows: Before July 1, 1993, **add-on pay**; On or after July 1, 1993, **no add-on pay**

Compensation to report begins with a regular calendar year.



Retirement Application

Retirement Applications

KPERS 1 & 2
KPERS 15B



KPERS
KPERS 15 Rev. 5/19

APPLICATION FOR RETIREMENT BENEFITS
For security reasons, do not submit application by e-mail.

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■ **Contact Us** – toll free: 1-888-275-5737 • phone: 785-296-6166 • fax: 785-296-6638
email: kpers@kpers.org • web site: kpers.org • mail: 611 S. Kansas Ave., Suite 100, Topeka, KS 66603

■ **Part A – Member Information**

1. Social Security Number: _____ 2. Name (First, MI, Last): _____
3. Retiring From: KPERS KPBF Judges
4. Selected Retirement Date: _____ 5. Telephone Number: _____
6. Mailing Address: _____ 7. Personal E-mail: _____
City, State, Zip: _____

Important: The Retirement System must have this application before the retirement date you selected. You are also required to submit proof of age and all name changes. Please see "Acceptable Proof of Birth and Name Change" at the beginning of this booklet for details. To retain your retirement date, you may submit this application without the required documentation. However, you must provide the documentation before the Retirement System can begin monthly benefit payments.

■ **Part B – Retirement Benefit Options** – Review the separate publication *Retirement Options* for details about each option. Select **one** of the seven monthly benefit options. Mark the box corresponding to the retirement option of your choice, then complete any additional areas indicated. Kansas law does not allow you to change this option after your retirement date.

Maximum Monthly Benefit Option

1. Maximum Monthly Benefit (with no survivor benefit)

Joint-Survivor Options

2. 50% Joint-Survivor Benefit 3. 75% Joint-Survivor Benefit 4. 100% Joint-Survivor Benefit

If you chose a joint-survivor option, complete all information for your joint annuitant below. You must provide proof of age and all name changes for your joint annuitant. Your joint annuitant cannot be changed later.

a. Name (First, MI, Last): _____ b. Social Security Number: _____
c. Date of Birth: _____ d. Male Female

Life-Certain Options

5. 5-Year Life-Certain Option 6. 10-Year Life-Certain Option 7. 15-Year Life-Certain Option

If you chose a life-certain option, you must submit a *Designation of Beneficiary – Retired form* (KPERS-7-990). The form is included in this booklet. You can change beneficiaries at any time by completing a new form.

■ **Part C – Partial Lump-Sum Option (PLSO)** – You must indicate whether you are electing the PLSO. Choosing this option means you will receive a single lump-sum payment equal to a given percentage of the actuarial present value of your lifetime benefit. You will then receive the rest of your benefit in reduced monthly payments.

Partial Lump-Sum Option Election

1. "I elect the PLSO" Yes No
If you chose "yes" select a percentage option below and complete the payment options on the next page.
If you chose "no" advance to Part D.

"Having elected the PLSO option above, I understand I will receive a single lump-sum payment as a percentage of the actuarial present value of my lifetime benefit. I further understand that my monthly benefit will be permanently reduced according to the percentage I choose."

2. 10% 20% 30% 40% 50%

*KPERS 2 members can only choose a 10, 20 or 30 percent option. This does not affect KPBF or Judges.

KPERS
K3-15 Rev. 10/19

APPLICATION FOR RETIREMENT BENEFITS – KPERS 3
For security reasons, do not submit application by email.

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email: kpers@kpers.org • web site: kpers.org • mail: 611 S. Kansas Ave., Suite 100, Topeka, KS 66603

■ **Part A – Member Information**

1. Social Security Number: _____ 2. Name (First, MI, Last): _____
3. Selected Retirement Date: _____ 5. Telephone Number: _____
6. Mailing Address: _____ 7. Personal Email: _____
City, State, Zip: _____

Important: The Retirement System must have this application before the retirement date you selected. You are also required to submit proof of age and all name changes. Please see "Acceptable Proof of Birth and Name Change" at the beginning of this booklet for details. To retain your retirement date, you may submit this application without the required documentation. However, you must provide the documentation before the Retirement System can begin monthly benefit payments.

■ **Part B – Retirement Benefit Options** – All retirement options pay you a guaranteed monthly benefit for the rest of your life. Review the separate publication *KPERS 3 Retirement Options* for details about each option. Select **one** of the six monthly benefit options, and then complete any additional areas indicated. Kansas law does not allow you to change this option after your retirement date.

Base Benefit and Life-Certain Options

1. Base Benefit (Life-Certain 10 Years) 2. 5-Year Life-Certain Option 3. 15-Year Life-Certain Option

If you chose the Base Benefit or other life-certain option, you must submit a *Designation of Beneficiary – Retired form* (KPERS-7-990). The form is included in this booklet. You can change beneficiaries at any time by completing a new form.

Joint-Survivor Options

4. 50% Joint-Survivor Benefit 5. 75% Joint-Survivor Benefit 6. 100% Joint-Survivor Benefit

If you chose a joint-survivor option, complete all information for your joint annuitant below. You must provide proof of age and all name changes for your joint annuitant. Your joint annuitant cannot be changed later.

a. Name (First, MI, Last): _____ b. Social Security Number: _____
c. Date of Birth: _____ d. Male Female

■ **Part C – Self-Funded Cost-of-Living Adjustment (COLA)** – You must indicate whether you are electing the COLA option. Choosing this option means your initial monthly benefit is reduced to fund the annual increase. Annual increases are on July 1, and begin one year after retirement.

Self-Funded Cost-of-Living Adjustment Option Election

1. "I elect the COLA" Yes No
If you chose "yes" select a percentage option below. If you chose "no" advance to Part D.

"Having elected the COLA option above, I understand that my monthly benefit will be permanently reduced to fund the annual increase according to the percentage I choose."

2. 1% 2%

KPERS 3
KPERS K3-15



Overlooked Areas

12 Retirement Dates Available


- Can only be first day of the month

Retirement Benefit Options

- Can only choose one option
- Max, Joint Survivor or Life Certain

Partial Lump Sum Option

- Select "yes" or "no"
- Percentage of PLSO

 KPERS
KPERS-15 Rev. 3/19

APPLICATION FOR RETIREMENT BENEFITS
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email: kpers@kpers.org • web site: kpers.org • mail: 611 S. Kansas Ave., Suite 100, Topeka, KS 66603

■ **Part A – Member Information**

1. Social Security Number: _____ 2. Name (First, MI, Last): _____
3. Retiring From: KPERS KP&F Judges
4. Selected Retirement Date: _____ 5. Telephone Number: _____
6. Mailing Address: _____ 7. Personal E-mail: _____
City, State, Zip: _____

Important: The Retirement System must have this application before the retirement date you selected. You are also required to submit proof of age and all name changes. Please see "Acceptable Proof of Birth and Name Change" at the beginning of this booklet for details. To retain your retirement date, you may submit this application without the required documentation. However, you must provide the documentation before the Retirement System can begin monthly benefit payments.

■ **Part B – Retirement Benefit Options** – Review the separate publication *Retirement Options* for details about each option. Select **one** of the seven monthly benefit options; mark the box corresponding to the retirement option of your choice, then complete any additional areas indicated. Kansas law does not allow you to change this option after your retirement date.

Maximum Monthly Benefit Option

1. Maximum Monthly Benefit (with no survivor benefit)

Joint-Survivor Options

2. 50% Joint-Survivor Benefit 3. 75% Joint-Survivor Benefit 4. 100% Joint-Survivor Benefit

If you chose a joint-survivor option, complete all information for your joint annuitant below. You must provide proof of age and all name changes for your joint annuitant. Your joint annuitant cannot be changed later.

a. Name (First, MI, Last): _____ b. Social Security Number: _____
c. Date of Birth: _____ d. Male Female

Life-Certain Options

5. 5-Year Life-Certain Option 6. 10-Year Life-Certain Option 7. 15-Year Life-Certain Option

If you chose a life-certain option, you must submit a Designation of Beneficiary – Retired form (KPERS-7/99R).
The form is included in this booklet. You can change beneficiaries at any time by completing a new form.

■ **Part C – Partial Lump-Sum Option (PLSO)** – You must indicate whether you are electing the PLSO. Choosing this option means you will receive a single lump-sum payment now to a given percentage of the actuarial present value of your lifetime benefit. You will then receive the rest of your benefit in reduced monthly payments.

Partial Lump-Sum Option Election

1. "I elect the PLSO." Yes No

If you chose "yes," select a percentage option below and complete the payment options on the next page.
If you chose "no," advance to Part D.

"Having elected the PLSO option above, I understand I will receive a single lump-sum payment as a percentage of the actuarial present value of my lifetime benefit. I further understand that my monthly benefit will be permanently reduced according to the percentage I choose."

2. 10% 20% 30% 40% 50%

*KPERS 2 members can only choose a 10, 20 or 30 percent option. This does not affect KP&F or Judges.

(more)

11

Overlooked Areas

Continuing Life Insurance

- Select “Yes” or “No”

Working After Retirement

- Read carefully section 3 – 5
- Notarized Signature

Spousal Consent

- Maximum Benefit
- PLSO

Member Name (Please Print): _____ Social Security Number: _____

■ Part D – Member Certification

Note: This section must be completed regardless of which retirement payment option you chose.

1. I certify that I am: Married Not Married
2. I certify that I have received information about continuing life insurance. Yes No
3. By signing below, I understand Kansas law requires a 60-day waiting period (180-day if retiring before age 62) for KPERs members who return to work for any KPERs employer. KP&F members have a 30-day waiting period. This waiting period begins the day after my retirement date.
4. I understand Kansas law requires me to verify that I have no prearrangement to return to work for any KPERs employer. By signing below, I certify I have not made and will not make any prearrangement before retirement or during my waiting period to return to work for my employer or another Retirement System employer.
5. I understand that if I am found to have made a prearrangement to return to work or have violated the waiting period agreement for returning to work, my retirement benefit will be suspended starting the month I return to work until six months after I end employment. I further understand I will be required to repay to the Retirement System all monthly retirement benefits received after I began employment.
6. I confirm my choice of retirement benefit options, with the understanding that Kansas law does not allow me to change this option after my retirement date. I confirm that all information I have provided on this form, including supporting documentation of birth and name change, is true to the best of my knowledge.

Member Signature: _____ Month/Day/Year: ____/____/____

Notary Public: State of _____ County of _____
Signed or attested before me on (date) _____ by (name of member) _____
Notary Public Signature: _____ My appointment expires (month/day/year) ____/____/____.
(SEAL)

■ Part E – Spousal Consent to Member’s Retirement Benefit Selection

Note: Kansas law requires spousal consent if you select a Partial Lump-Sum Option (PLSO) and/or any retirement benefit option that would provide less than one-half of your monthly retirement benefit to your spouse if you die. This section must be completed by your spouse if you are married and chose the Maximum Monthly Benefit, a Life-Certain Option and/or a PLSO.

1. Spouse Name (First, MI, Last): _____

“I hereby attest that I am the spouse of the above-named member. I further attest that I understand and agree with the retirement benefit option selected by my spouse.”

Spouse Signature: _____ Month/Day/Year: ____/____/____

Notary Public: State of _____ County of _____
Signed or attested before me on (date) _____ by (name of spouse) _____
Notary Public Signature: _____ My appointment expires (month/day/year) ____/____/____.
(SEAL)

Overlooked Additional Documents

Direct Deposit Form

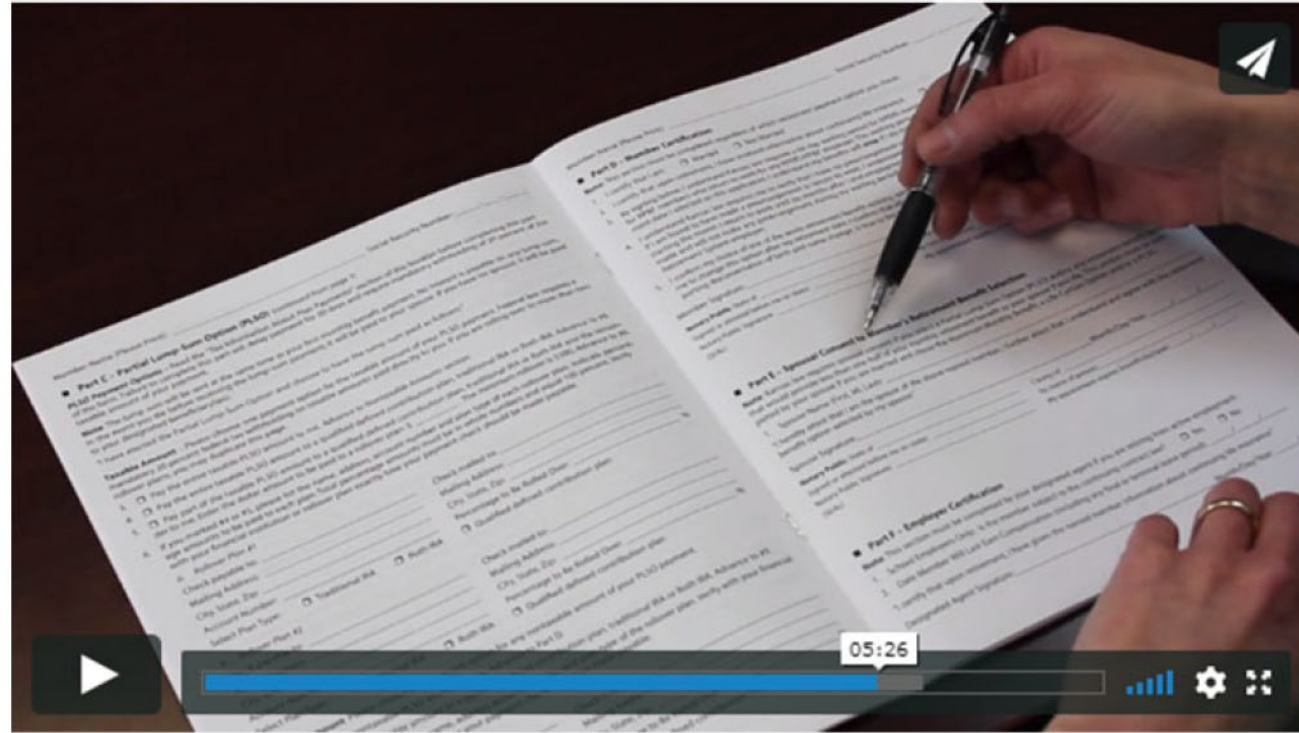
- Select checking or savings box
- Sign and date form

Withholding Certificate

- Sign and date form



Retirement Application Video



www.kpers.org/retire/HowToApply.html

Remitting a Retirement Application

- Employer can send application through Secure Upload for employee
- Employee can fax application
- Employee can mail application

Do not email applications due to security purposes.



Application Timeline

Member Responsibilities

Before Retirement Date

- Verify application is 100% complete.
- Attach all required documents.
- Send application in 30/60 days prior to retirement date.

Employer Responsibilities

Designated Agent completes certification in the EWP.

- Certification shows up within 30 days of retirement date.
- Do not have to wait until PPR is completed.
- Complete as soon as possible.

Respond to all KPERS inquiries regarding retirement as soon as possible.

Retirement benefit could be delayed.

KPERS Responsibilities

- Retirement application and documents scanned into member's record
- Retirement analyst reviews application
- Acknowledgement letter mailed to member and Designated Agent.



Certifications

Certification

Designated Agent completes certification in the Employer Web Portal.
Will show up the "To Do List".

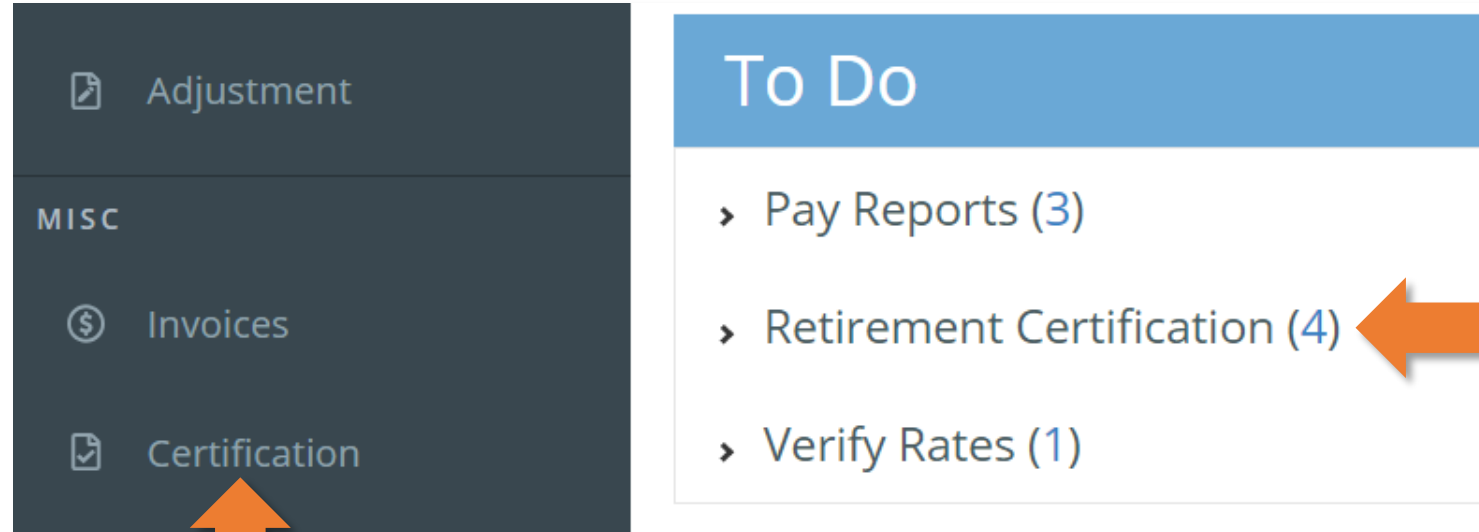
- Certification shows up within 30 days of retirement date.
- Do not have to wait until PPR is completed.
- Complete as soon as possible.
- Respond to all KPERS inquiries regarding retirement.

Retirement benefit could be DELAYED

Certification

Different Types

- Retirement
- Withdraw
- Death
- Disability



The screenshot shows a dark grey sidebar menu on the left and a white 'To Do' list on the right. The sidebar menu has three items: 'Adjustment' with a document icon, 'MISC' in all caps, 'Invoices' with a dollar sign icon, and 'Certification' with a document icon. An orange arrow points up to the 'Certification' item. The 'To Do' list has a blue header and three items: 'Pay Reports (3)', 'Retirement Certification (4)', and 'Verify Rates (1)'. An orange arrow points left to the 'Retirement Certification (4)' item.


| Item | Count |
|--------------------------|-------|
| Pay Reports | 3 |
| Retirement Certification | 4 |
| Verify Rates | 1 |

Certification Non-School and Non-Licensed

- Verify last day on payroll is last day compensation is earned

Last Date on Payroll 06/30/2021

This is the date in our system. Is this correct? Yes No



Please enter correct date

Next

Certification Non-School and Non-Licensed

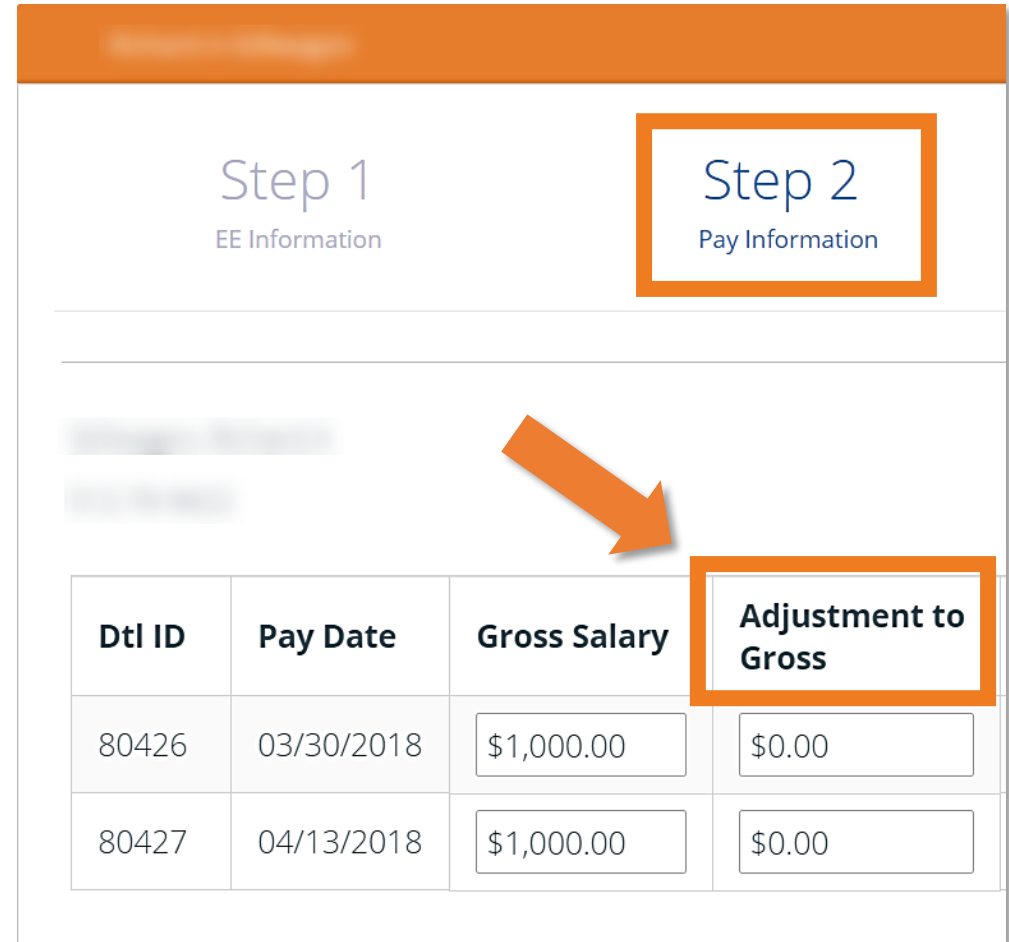
Add final pay information and contributions.

| Dtl ID | Pay Date | Gross Salary | Adjustment to Gross | KPERS Wages | Member Reported Contributions | Employee Contributions | Employer Contributions |
|--------|------------|--------------|---------------------|-------------|-------------------------------|------------------------|------------------------|
| 31712 | 01/08/2016 | \$1,000.00 | \$0.00 | \$0.00 | \$60 | \$0.00 | \$0.00 |

Do NOT need to wait until the Pay Period Report is complete.

Adjustment to Gross

- Enter any amount not reportable to KPERS
- Don't enter summer pay
- Don't enter add on pay that is **reportable** to KPERS



Step 1
EE Information

Step 2
Pay Information

| Dtl ID | Pay Date | Gross Salary | Adjustment to Gross |
|--------|------------|--------------|---------------------|
| 80426 | 03/30/2018 | \$1,000.00 | \$0.00 |
| 80427 | 04/13/2018 | \$1,000.00 | \$0.00 |

Add on Pay

- Click 'new' and create a new line for each type of add-on.
- Enter add-on amount
- Enter correct year for each add-on.
- Add detailed comments to report any discrepancies in pay.

Step 1
EE Information

Step 2
Pay Information

Step 3
Add On Pay

+ New Delete

| | Add On Amt | Add On Type | Year | Comments |
|---|------------|--------------------|------|----------|
| ■ | \$185.00 | Sick Leave Payment | 2018 | |

Message ID Message Severity

No records to display.

Annual Leave/Vacation Payment
Comp Time Payment
Other
Sick Leave Payment


Back Next

Report sick leave, vacation leave, and overtime separately.

Certification School

Verify last day on payroll is last day compensation was earned.

- Licensed employees: last day of the month
- Classified employees: last day earning compensation

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Position At Retirement <input type="text"/> | Last Day on Contract <input type="text"/>  |
| Last Date on Payroll 07/31/2021 | This is the date in our system. <input type="radio"/> Yes <input type="radio"/> No Is this correct? |
| Does member work 9,10,12 months? <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 12 | |
| Is this member paid in 9, 10, or 12 monthly installments? <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 12 | |
| How was the employee paid in previous school year? <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 12 | |
| Has member received all money due within one pay period of the last day on payroll? <input type="radio"/> Yes <input type="radio"/> No | |
| <input type="button" value="Next"/> | |

Position at retirement and school questions must be answered.



Reporting Compensation

Do Not Withhold or Report to KPERS

- Early Retirement Incentives
- Bridge Payments Tied to Early Retirement Incentives
- Severance Pay



Add-On Pay

Membership date **before July 1, 1993** or in “**Year of Service**”,

Take KPERS Contributions from:

- Unused Sick Leave
- Annual (Vacation) Leave
- Kelly Days
- PTO/ Personal Days
- Longevity Pay only paid at retirement
- Retirement Bonus
- Bonus Sick Leave
- Bonus Hours 80- in lieu of raises



Compensation

Take KPERS Contributions from:

- **Longevity Paid Yearly**
- **Insurance Reimbursement**
- **Holiday Pay**
- **Overtime**
- **Bonuses**
 - Signing
 - Merit
 - Retention
 - IR
 - To Take or Keep a Position
 - Early Notification
 - Any Bonus not tied to Termination

Handouts


KPERS Compensation to Include in Contributions

Generally, withhold employee KPERS contributions from gross compensation before any deductions or reductions. Compensation means, except as otherwise provided, all salary, wages and other remuneration payable to an employee for personal services performed for the employer. But for a few exceptions, (e.g., long-term disability, some military leave), KPERS contributions must be linked to actual participating service or paid leave. Contributions need to have service tied to them.

| Compensation Type | Include | Don't Include |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------|
| Pay eligible for federal withholding | ✓ | |
| Pay eligible for Social Security tax | ✓ | |
| Pay eligible for Medicare tax | ✓ | |
| Any pay sheltered for 403(b), 457 plans and 125 plans (flex spending accounts) | ✓ | |
| Employer-paid service purchase | ✓ | |
| Employer-paid moving expense reimbursement (effective July 1, 2019) | ✓ | |
| Maintenance, board, lodging, tuition assistance, goods and services, and other allowances in lieu of money eligible for federal withholding | ✓ | |
| Fringe benefits that are considered part of gross compensation unless they are specifically excluded from gross income by a section of the IRS code. Consult your fiscal or financial officer or tax professional for guidance. | ✓ | |
| (Hired before July 1, 1993) Any lump-sum payments for annual, vacation and sick leave. | ✓ | |
| Any paid compensatory time | ✓ | |
| Pay deducted for health insurance, even if pre-tax | ✓ | |
| Cash in lieu of health insurance | ✓ | |
| *Back pay | | |
| Bonus payment (e.g. incentive pay, longevity pay, Christmas bonus, performance bonus, etc. before termination) | | |
| Value of health insurance paid by the employer | | |
| Any amount not counted in final average salary at retirement | | |
| Taxable amount of life insurance premium for coverage over \$50,000 | | |
| Reimbursement for actual expenses | | |
| Early retirement incentive paid before retirement | | |
| Membership date on or after July 1, 1996: Pay over \$425,000 for 2020 | | |
| Membership date on or after July 1, 1996: Pay over \$285,000 for 2020 | | |
| Severance pay* | | |
| (Hired after July 1, 1993) Lump-sum payments for annual, vacation and sick leave | | |
| Worker's compensation payments | | |
| Short-term disability payments from 3rd party | | |

*Severance: Payment by an employer to an employee beyond his wages on termination of employment.

Employer Checklist for Retirement



After an employee has decided to retire, use this quick reference checklist to help you get through the final steps without missing a beat. For more retirement details, visit the [employer page](#) on the KPERS website and the retirement sections (see green box) of the [employer manual](#).

- Have the employee get a retirement benefit estimate**
 - Direct employee to calculator on his or her online KPERS account
- Enter employee's end date on the EWP as soon as you know it**
 - [How to enter an end date](#)
 - End date must be earlier than retirement date
- Give or point employee to the [Application for Retirement Benefits, Related Forms and Information \(KPERS-15 Booklet\)](#)**
 - Booklet has application, instructions, tax info, as well as forms for withholding, direct-deposit and designation of beneficiary
 - Employee should submit application at least 30 days (encourage 60 to 90 days) before retirement date
 - KPERS will process application and may send you a request to certify final pay
- Give life insurance conversion and portability forms to employee**
 - [The Standard Conversion Packet](#)
 - [The Standard Life Portability Insurance Application](#)
 - Kansas law requires that you give employees notice of life insurance conversion rights at least 15 days before end of 60-day conversion period. Employers must certify to this on the retirement application.
- Go over working-after-retirement rules**
 - [Webpage for employees](#)
 - [Webpage for employers](#)
 - 60-day waiting period
 - No prearrangements
 - Earnings limit and exemptions
- If employee is in a service purchase, have him or her contact KPERS as soon as possible**
 - If doing lump-sum, purchase has to be complete before last day on payroll
 - If doing payroll deduction, employee only gets credit for complete quarters that were purchased
- Complete retirement certification on the EWP**
 - [How to do a certification](#)

Helpful Employer Resources

Retirement sections in Employer Manual

- [Retirement – KPERS 1](#)
- [Retirement – KPERS 2](#)
- [Retirement – KPERS 3](#)
- [Retirement – KP&F \(manual\)](#)

KPERS Summer Pay for Retiring School Employees CHEAT SHEET

Licensed positions on 12-month contracts

| Contract End Date | Retirement Date | End Date | Report | Don't Report | Board of Ed Licensed Positions |
|-------------------|-----------------|----------|----------------------------|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 31 | June 1 | May 31 | Pay thru May 31 | June, July or add-on pay | <ul style="list-style-type: none"> Educator (Teacher, etc) Audiologist Speech pathologist Occupational therapists Physical therapists Social worker Registered nurse Dietitian Licensed professional counselor Psychologist Orientation and mobility instructor |
| | July 1 | June 30 | Pay thru June 30 | July or add-on pay | |
| | Aug 1 | July 31 | All pay, including add-on* | n/a | |
| 31 | June 1 | May 31 | Pay thru May 31 | June, July, Aug or add-on pay | |
| | July 1 | June 30 | Pay thru June 30 | July, Aug or add-on pay | |
| | Aug 1 | July 31 | Pay thru July 31 | Aug or add-on pay | |
| 31 | June 1 | May 31 | Pay thru May 31 | June, July, Aug or add-on pay | |
| | July 1 | June 30 | Pay thru June 30 | July, Aug or add-on pay | |
| | Aug 1 | July 31 | All pay, including add-on* | n/a | |

Administrators and superintendents

| Retirement Date | End Date | Report | Don't Report |
|-----------------|----------|----------------------------|--------------------------|
| June 1 | May 31 | Pay thru May 31 | June or add-on pay |
| July 1 | June 30 | All pay, including add-on* | n/a |
| June 1 | May 31 | Pay thru May 31 | July, July or add-on pay |
| July 1 | June 30 | Pay thru June 30 | July or add-on pay |
| Aug 1 | July 31 | All pay, including add-on* | n/a |

Cooks, secretaries, paras, bus drivers, custodians and other hourly employees

| End Date | Report |
|------------------------------------------|--------------------------------------------------------|
| Last day of month before retirement date | All pay, including summer checks & add-on pay* |
| Actual last day worked | All pay, including add-on pay* |
| Actual last day worked | All pay through retirement date, including add-on pay* |

July 1, 1993, add-on pay. On or after July 1, 1993, no add-on pay

INFOLINE: 1-888-275-5737 EMAIL: employers@kpers.org

SUMMER PAY 3/19

Leaving Employment Information

Standard Insurance Company

844-289-2306 Tel 971-321-5033 Fax
800 SW Jackson, Ste 1110, Topeka, KS 66612

INSTRUCTIONS – PLEASE READ CAREFULLY

Portability Of Insurance

You may be eligible to buy portable Group Life Insurance if your employment with your employer terminates. If KPERS' Group Life Insurance plan includes Accidental Death and Dismemberment (AD&D) and/or Dependents Insurance, you may also be eligible to buy those coverages.

To be eligible, you must meet the following criteria:

1. You must be able to perform which you are reasonably fit
2. You must be under age 80 on the day before your employment terminates
3. If you do not buy Life Insurance

The minimum and maximum amount of Life Insurance plan. The amounts of insurance you may convert depends on the reason for the cessation of your group insurance coverage. If your group life insurance coverage ended for any reason other than your failure to make a required premium contribution or the termination of the group policy, the maximum amount you can convert is the amount of your life insurance which ended. If your life insurance ended because of the termination or amendment of the group policy, or if your insurance has been reduced, then the amount you can convert may be different. Please refer to your Certificate of Insurance or contact your local office for a full description regarding the amount you may be entitled to convert.

NOTE: Refer to the Right To Convert to an individual life insurance provision and insurance you day before your employment terminates

If you are terminating employment due to sickness or injury, please contact your local office to determine eligibility for disability Waiver of Premium benefits before completing this application for conversion.

If you convert your group insurance coverage, you'll have continued protection with premiums payable to age 100. This policy will accumulate cash value, and will allow you to borrow against the cash value if sufficient. Interest on the policy loan will accrue daily and will be at a fixed rate (subject to policy terms and applicable state law). The policy does not share in dividends.

The amount of insurance you may convert depends on the reason for the cessation of your group insurance coverage. If your group life insurance coverage ended for any reason other than your failure to make a required premium contribution or the termination of the group policy, the maximum amount you can convert is the amount of your life insurance which ended. If your life insurance ended because of the termination or amendment of the group policy, or if your insurance has been reduced, then the amount you can convert may be different. Please refer to your Certificate of Insurance or contact your local office for a full description regarding the amount you may be entitled to convert.

To calculate your premium payments, use the attached Schedule of Rates and worksheet or the Group Conversion Calculator found at www.standard.com/mybenefits/kpers/conversion_premium.html.

To complete the conversion, you must return the enclosed application form and your check for the first premium payment within 60 days after the termination of your group insurance. Your application to convert your insurance may not be valid if received in our office after this 60 day period. If you had group life insurance on your dependents and want to convert their coverage also, please contact us for additional applications. This application will be attached to and made part of the policy.

If you have any questions about the application or other conversion options, contact your local office at 844-289-2306 or KPERAdmin@standard.com for assistance. We look forward to continuing to provide you with life insurance protection.

Kansas Public Employees Retirement System (KPERS) Group Life Portability Insurance Application

Standard Insurance Company
844-289-2306 Tel 971-321-5033 Fax
800 SW Jackson, Ste 1110, Topeka, KS 66612

Kansas Public Employees Retirement System (KPERS) Group Conversion Packet

Thank you for asking for more information about converting your group term life insurance to individual coverage.

Leaving Employment and Your Retirement System Benefits



If you're leaving employment, you may have questions about what will happen to your benefits. If you don't withdraw your contributions, you will become an inactive member. You'll still have access to your online account at kpers.org. And we'll continue to provide you with annual statements.

Life Insurance

Generally, your basic life insurance and any optional coverage ends when you leave employment or move to a position not covered by KPERS. However, you can continue some or all of your current coverage on your own. You have 60 days after you end employment to submit your form. You have two options.

1. Individual whole life insurance
2. Portable term life insurance

Conversion and Portability Election forms explain the benefits and costs for each option. You can get these forms from your employer or download them at kpers.org.

Note: KP&F members do not have basic life insurance coverage. KPERS members moving to a Board of Regents position keep their life insurance coverage.

Guaranteeing Your Benefit

When you are "vested," it means you have earned enough service to guarantee a retirement benefit, even if you leave covered employment.

- KPERS members vest their benefit with five years of service.
- KP&F members vest their benefit with 15 years (Tier I members) or 20 years (Tier II members).

Your vested status is an important consideration when deciding whether to withdraw your member contributions and interest.

If You Are Vested

You are guaranteed a monthly retirement benefit for the rest of your life if you leave your contributions in your account. Often, your vested benefit is more valuable than the amount of your actual contributions. You can apply for retirement benefits when you become eligible. You can continue to earn interest in the meantime, and you can withdraw at any time if you change your mind.

If You Are Not Vested

You are not guaranteed a retirement benefit. You need to withdraw your member contributions and interest within five years of the date you end employment. Your account earns interest for five years (two years for KPERS 3 members). After five years, you forfeit your service. If you don't withdraw and you return to KPERS employment within five years, you'll keep your past public service. But you'll return as a KPERS 3 member.



Important Points to Consider Now

- You have 60 days to submit your life insurance continuation form.
- If you're vested, you're guaranteed a retirement benefit.
- If you're not vested, you need to withdraw within five years.
- You can withdraw after 31 days.
- If you withdraw, a direct rollover is the best way to avoid federal taxes and penalties.
- We don't have your personal contact information. Please complete and return the address form on page 2. You can also update your address in your online account or email kpers@kpers.org.

Retirement Checklist for Employer

- Ask member if a retirement estimate was completed
- Enter end date in the EWP as soon as possible (up to 90 days ahead)
- Provide member the Application for Retirement Benefits
- Provide life insurance conversion and portability forms
- Discuss Working After Retirement rules
- If member is in a service purchase, have them contact KPERS as soon as possible
- Complete retirement certification on the EWP





Post-Retirement

After Retirement Date

- Congratulation letter mailed to member with monthly benefit/PLSO amount.
- Benefits paid on last working day of the month.
- Member Web Portal goes from Active to Retirement



Retiree Web Member Portal

- Beneficiaries
- Federal withholding
- Address and phone number
- 1099R tax form each January

Retired Member Web Portal

| Account Information | | | |
|----------------------------|--------------------|-----------------------------------|--------------|
| Benefit Start Date: | 08/01/2001 | Total Contributions: | \$187,569.52 |
| Benefit Option: | 75% Joint-Survivor | Lifetime Benefits to Date: | \$867,419.58 |

| Monthly Benefit Information | |
|--------------------------------------|-------------|
| Next Payment Date: 01/31/2018 | |
| Item | Item Amount |
| Taxable Base Benefit | \$4,741.68 |
| Fed Withholding - Monthly | \$970.00 |
| Net Amount | \$3,771.68 |

| Tax Withholding Information | | | |
|-------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Your current tax withholding info | | Update tax withholding information | |
| | | Type directly in the box below to update tax withholding. Click Add/Update button. For no withholding click the No Withholding button. | |
| Marital Status | Single | Marital Status | <input type="text" value="Single"/> |
| Allowances | 0 | Allowances | <input type="text" value="0"/> |
| Additional Amount | \$200.00 | Additional Amount | <input type="text" value="\$200.00"/> |
| Please see the Monthly Benefit section above to view the amount currently withheld from your benefit. | | | |

Contact Info

KPERS

Social Security

KPERS 457

Email: kpers@kpers.org

Website: ssa.gov

Email: kpers457@kpers.org

Toll-free: 1-888-275-5737

Toll-free: 1-800-772-1213

Toll-free: 1-800-232-0024

Topeka: 785-296-6166

Topeka: 1-888-327-1271

Topeka: 785-414-3600

Thank You!



Questions?