

## **Monthly Payment Election Form**

PBGC Form 717 Approved OMB 1212-0055

Expires

Pension Benefit Guaranty Corporation. P.O. Box 151750, Alexandria, Virginia 22315-1750

For assistance, call 1-800-400-7242

Plan Name: «PrismCase.CaseTitle» Plan Number: «PrismCase.CaseIdNmbr» DOPT: «PrismCase.DOPT» Date Printed: 02/02/2021

Participant Name: «PrismCust.FullName» Applicant Name:

**INSTRUCTIONS:** Use this form to tell PBGC you want to receive a monthly, rather than annual, payment. If you want to keep receiving annual payments, do not return this form.

## 1. About your benefit

**Annual payments** - While most people receive annuity benefits monthly, PBGC makes annual payments to anyone who would receive \$50 or less each month. Each year, we pay the full amount in the first month you should start receiving payments. For example, if your monthly benefit is \$20, and the first month you should start receiving benefits is February, you will receive \$240 in February. Your next payment will be February of the following year.

**Monthly payments** - If you are entitled to receive annual payments but want monthly payments instead, complete this form provided your monthly payment is \$20 or more. You will start receiving monthly payments a year after you received your last annual payment. For example, if your last annual payment was in June, you would receive your first monthly payment the following June.

| 2. | Annuity election  |      |  |
|----|---|------|--|
|    | My monthly payment amount is \$20 or more. I want this payment each month, not as one annual payment. |      |  |
|    | PAYEE'S SIGNATURE   | DATE |  |