

# Form 1 – Lump Sum Benefit Election



CenturyLink Retirement Component of the CenturyLink Combined Pension Plan

Prepared for: Harry Krause

**COMPLETE and MAIL BY: October 30, 2015**

## To Elect a Lump Sum Payment – Complete All Sections and Return

**1. LUMP SUM ELECTION:** I understand that by completing, signing and returning this form, I am electing to receive my vested pension benefit from the Plan in a lump sum payment. I understand that my lump sum payment from the Plan, as of October 1, 2015, is estimated to be \$41,639.96 but that the actual amount paid to me may be a different amount. I understand that once I am paid my vested pension benefit from the Plan in this lump payment, no additional pension payments will be payable to me or to my beneficiary, including after my death.

**2. INFORMATION VERIFICATION:** *If any information below is NOT correct, please cross out the incorrect information and print the correct information in the space provided. In order for your election to be processed, you must enter the correct information below.*

Information on Record		Corrections (if any)
<b>Name</b>	Harry Krause	
Provide proof of any changes in your name with your completed forms. Acceptable proof includes a copy of your current driver's license, current passport or Social Security card. Do NOT send originals.		
<b>Address</b>	171 Pioneer Rd Kalispell, MT 59901	
This address will be used for mailing your lump sum check and important tax information about your payment from the Plan.		

Please provide the information below. All fields must be accurately completed or your election will not be valid and will not be processed. To correct any information below, contact the CenturyLink Lump Sum Service Center at 1-855-215-4437.

Declarations	
<b>Date of Birth</b>	<p>December 13, 1955 <input type="checkbox"/> The date of birth listed is incorrect. My correct date of birth is: _____</p> <p>If you do not check the box above, it is assumed that the date of birth listed is correct. If your date of birth is incorrect, you <b>MUST</b> call the CenturyLink Lump Sum Service Center for a new Election Kit AND immediately mail this page along with a copy of your birth certificate, current passport or current driver's license to:</p> <p style="text-align: center;">CenturyLink Lump Sum Service Center P.O. Box 419044 Rancho Cordova, CA 95741 The CenturyLink Lump Sum Service Center can be reached at 1-855-215-4437.</p>
<b>Marital Status</b>	<p>My current marital status is:</p> <p><input type="checkbox"/> I am single. <input type="checkbox"/> I am legally separated.*</p> <p><input checked="" type="checkbox"/> I am married.* <input type="checkbox"/> I am widowed.</p> <p>*If you are married or legally separated, your Spouse's Consent is required if you want to elect a lump sum payment. Be sure to enclose the Form 3 - Spouse's Waiver of Survivor Annuity Form, completed, signed and properly notarized.</p>
<b>Divorce or Lien Notification (If Applicable)</b>	<p>You <b>must</b> disclose whether your pension benefit is subject to the following specific types of liens (check all applicable items).</p> <p><input type="checkbox"/> Qualified Domestic Relations Order(s) (QDRO)**</p> <p><input type="checkbox"/> Pending Domestic Relations Order(s) (DRO)**</p> <p><input type="checkbox"/> IRS Lien on Retirement Benefits**</p> <p>If any of these apply to you, you are not eligible to participate in this limited-time offer.</p> <p>**Provide a copy of the QDRO, DRO or IRS Form 668-A. Do not send documentation related to any other type of liens.</p>





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### 3. PARTICIPANT ACKNOWLEDGMENTS

By signing Form 1 – Lump Sum Benefit Election, I acknowledge that I have made an election regarding my payment options and based on my election, I consent to receive my pension benefit from the CenturyLink Retirement Component of the CenturyLink Combined Pension Plan. I have received information from the Plan Administrator regarding my pension benefit and payment options and I understand and represent all of the following:

#### ELECTION

- My Social Security Number (last 4 digits), full legal name and date of birth as provided or completed on **Form 1 – Lump Sum Benefit Election** are correct.
- By electing the lump sum payment, I waive my right to receive my pension benefits under the Plan in the form of a 50% Joint and Survivor Annuity (if I am married) or a Single Life Annuity ("SLA") (if I am not married). If I am married, my spouse has consented to this waiver by completing **Form 3 – Spouse's Waiver of Survivor Annuity**. My Spouse's signature is properly notarized.
- I have reviewed all of my payment options, and I understand the financial effect of waiving the Single Life Annuity ("SLA") option available to me.
- I have been provided with information estimating the amount of my pension benefit under each optional form of payment currently available under the terms of the Plan. I understand that my lump sum amount is an estimate and the final lump sum amount is subject to adjustments based on (1) the actual Interest Rates, if applicable, in effect on my Benefit Commencement Date of October 1, 2015 and (2) based on any changes in my personal data.
- I may rescind or cancel my election or revoke my waiver at any time prior to November 20, 2015. Call the CenturyLink Lump Sum Service Center at 1-855-215-4437 prior to November 20, 2015 for instructions.
- If I die before October 1, 2015, this election will be revoked and my surviving spouse or beneficiary, if applicable, may be eligible to receive the survivor annuity provided under the Plan's terms.

#### MARITAL STATUS AND SPOUSAL CONSENT

- My spouse's consent is irrevocable unless I revoke my waiver of the 50% Joint and Survivor Annuity.
- A notarized spousal consent is valid only for the spouse who signs the consent. If I am divorced and remarry, or if I am not now married, but I marry between the time I sign this form and my Benefit Commencement Date of October 1, 2015, I am required to notify the CenturyLink Lump Sum Service Center of my marriage, and if I fail to do so, I accept legal and financial liability for my failure to provide this notification.
- Any Qualified Domestic Relations Order (QDRO), pending Domestic Relations Order (DRO), divorce, legal separation or other legal decree that has assigned or will assign all or a portion of my pension benefit to an alternate payee or former spouse makes me ineligible for this offer. I am required to notify the CenturyLink Lump Sum Service Center of the existence of any such legal order, and if I fail to do so, accept legal and financial liability for my failure to notify the CenturyLink Lump Sum Service Center, which may include, but is not limited to, bearing the costs of the Plan's defense (including attorney's fees) of any action brought by a former spouse for pension benefits, including the amount of benefits sought. Except as disclosed in the section titled "Information Verification," I advise that there is no QDRO or pending DRO related to my pension, nor is there a DRO being negotiated or discussed as of the date this form is submitted.
- If I attested to being single or widowed in the "Marital Status" section of this form, I acknowledge and represent that I do not have a spouse as of the date this form is signed or submitted.



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# Form 1 – Lump Sum Benefit Election

CenturyLink Retirement Component of the CenturyLink Combined Pension Plan

Prepared for: Harry Krause

**COMPLETE and MAIL BY: October 30, 2015**

## DISTRIBUTION AND TAX INFORMATION

- I cannot change my Benefit Commencement Date of October 1, 2015.
- I have received and read **Notice 3 - Special Tax Notice**. I understand that I am encouraged to consult my professional tax advisor or financial planner about this distribution.
- I have at least 30 days to consider whether to elect a direct rollover to another eligible employer plan or an IRA.
- If payment is made directly to me, federal income tax will be withheld at the rate of 20%, as mandated by federal law, and state income tax will be withheld, if applicable. I may be subject to additional income taxes when I file my federal and state income tax returns.
- Federal and state income tax will not be withheld from payments which are made as a direct rollover to an IRA or other qualified plan.

## MY STATUS

- I am not currently employed by CenturyLink, Inc. or any of its affiliates. If I elect to receive a lump sum payment and am subsequently rehired by CenturyLink, Inc., or any of its affiliates, I will not be allowed to pay back this lump sum payment to the Plan. In making this election, I waive the right to any future pension payments from the Plan for the service used to calculate this lump sum.

## 4. ELECTION AND CERTIFICATION

By signing this form and inserting the last four digits of my Social Security Number in the space provided, I certify that I am the person named above and that the information in Section 2 – Information Verification portion of this form is correct and that I have elected to waive the available annuity options and receive my pension benefit under the Plan as a one-time, single lump sum payment.

I acknowledge that I have read and understand this Lump Sum Benefit Election form in its entirety (including the "Participant Acknowledgements") and other accompanying notices, and that I made this lump sum election with the understanding of the annuity payment options currently available to me. I understand that the lump sum distribution I receive is payment for my entire pension benefit under the Plan, and neither I nor my spouse or beneficiaries will be entitled to receive any future pension payments.

Harry Krause  
Signature of Participant

09/23/2015  
Today's Date

Harry Krause  
Printed Name of Participant

XXX-XX-6786  
Last 4 digits of Social Security Number  
(required)

<sup>406</sup>  
(406) 260-5478  
Daytime Telephone Number

**YOU WILL RECEIVE A WRITTEN CONFIRMATION STATEMENT APPROXIMATELY THREE WEEKS AFTER YOUR COMPLETED FORMS ARE RECEIVED. PLEASE RETAIN THIS STATEMENT FOR YOUR RECORDS.**



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**Form 2 – Payment Method Election**



CenturyLink Retirement Component of the CenturyLink Combined Pension Plan  
Prepared for: Harry Krause

**COMPLETE and MAIL BY: October 30, 2015**

**To Elect a Lump Sum Payment — Complete Form 2 and Return**

**CASH OR ROLLOVER ELECTION**

I have read and understand **Notice 3 - Special Tax Notice**, and I elect to receive my estimated lump sum pension payment of \$41,639.96 in early December, 2015, as follows:

**Traditional direct rollover into an eligible traditional IRA (one institution only) – Print Institution Name Below**

**Traditional direct rollover into an eligible employer plan (one institution only) – Print Eligible Employer Plan Below**

*MG TST CO ACF Whitefish CUA 401K FBO Harry Krause*

**Direct rollover into a Roth IRA (one institution only) – Print Institution Name Below**

**Cash payment directly to me**

**Split distribution of \$\_\_\_\_\_ (before taxes are withheld) cash paid directly to me, and the remainder of \$500 or more (choose one):**

- As a direct rollover into an eligible traditional IRA, or
- As a direct rollover into an eligible employer plan, or
- As a direct rollover into a Roth IRA

Print Institution Name or Eligible Employer Plan

**Additional Important Information**

**Cash Payment to Me:** If payment is to be made directly to me, I understand that federal income tax will be withheld at the rate of 20%, and additional state income tax may be withheld, if applicable. I may be subject to additional income taxes when I file my federal and state income tax returns.

**Direct ROLLOVER Payment:** If payment is made as a traditional or Roth direct rollover, I understand that federal and state income tax will not be withheld from my distribution. The direct rollover payment will be mailed directly to me in the form of a check made payable to the financial institution or eligible employer plan I have identified. **I am responsible for providing the correct official name of the IRA financial institution or the eligible employer plan, and for delivering the check to that institution or administrator.**

The name I print above for the financial institution or eligible employer plan will be **exactly** how my check will be printed. Please note that you will be limited to 32 characters in the name. You first must check with your Financial Institution or Eligible Employer Plan to confirm the appropriate name limited to 32 characters.



# Form 3 – Spouse’s Waiver of Survivor Annuity



CenturyLink Retirement Component of the CenturyLink Combined Pension Plan  
Prepared for: Harry Krause

**COMPLETE and MAIL BY: October 30, 2015**

## **If Married:** To Elect a Lump Sum Payment — Complete and Return this Waiver

By signing this document I, the spouse of Harry Krause, acknowledge the following:

- I have read and understand **Notice 1 – Your Lump Sum and Annuity Amounts** and **Notice 2 – Important Information**. I acknowledge that these notices explain the 50% Joint and Survivor Annuity form of payment and that all of my questions have been answered.
- I have been encouraged to seek the advice of my professional tax advisor or financial planner about this distribution.
- I am the legal spouse of the above-named participant in the Plan.
- I understand that the normal form of payment for a married participant from the Plan is the 50% Qualified Joint and Survivor Annuity (QJSA), which would provide a monthly pension benefit for my lifetime if my spouse died before me.
- I understand that my spouse has elected to receive his or her total pension benefit from the Plan in a one-time lump sum payment and that no further pension payments will be payable to me or anyone else at any time in the future, including after my spouse’s death.
- I understand that my spouse’s election is not valid unless I consent to it, I hereby consent to my spouse’s election and that my consent is irrevocable unless my spouse revokes the benefit election by November 20, 2015.
- I consent to my spouse’s election to receive his or her total pension benefit from the Plan as a one-time lump sum.
- I waive my right to receive a survivor annuity from the Plan.

**IMPORTANT! This form must be signed in the presence of a notary** and will not be accepted as complete if the Certification of Notary is missing.

**If prepared outside of the United States**, compliance with the notary requirements of the foreign jurisdiction is required.

Julene K Krause  
Signature of Spouse

Julene K Krause  
Spouse’s Printed Name

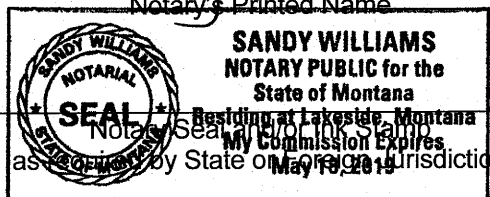
### CERTIFICATION OF NOTARY

On this 28<sup>th</sup> day of Sept, **2015**, the above listed spouse personally acknowledged and completed this instrument before me.

Sandy Williams  
Signature of Notary

Sandy Williams  
Notary’s Printed Name

May 18, 2019  
Commission Expiration



**Note: You can usually find a notary at your bank**

