**Pension Fund Swiss Re**
Mythenquai 50/60
8022 Zurich
www.pensionskasse-swissre.ch/en/

# CONTINUED EMPLOYMENT AFTER AGE 65

pursuant to Art 28 of the Pension Fund Swiss Re Regulations

Upon reaching age 65, you ("the insured") can opt for continued insurance (membership) in the Pension Fund up until age 70 if you remain employed with your employer and your annual salary is not less than the minimum salary pursuant to Art 3 BVV2 (see Appendix A to the Pension Fund Swiss Re Regulations). Your continued insurance ends if you resign your continued employment and request to retire, or in the event of disability or death, but, in any case, not later than your 70th birthday. Under continued insurance, you will not be eligible for disability benefits if you become incapacitated for work. Instead, you will receive the applicable retirement benefits. You may defer your retirement pension without paying the employee savings contribution (contribution, retirement credit). Deferments must be requested in writing not less than three months before you reach normal retirement age. No risk contributions or contributions to financing supplementary benefits are required.

**Selecting the retirement savings contributions payable once you reach age 65:**

**a. With contributions by your employer and by you (the employee)**
You can select your contribution level after age 65 as before by indicating the contribution category of your preference (Options 1–3):

| Contribution category | Retirement contributions as a % of your insured salary |
|---|---|
| 1 | 9.5 |
| 2 | 4.8 |
| 3 | 0 |

**b. Without contributions by your employer or by you (the employee)**
You may simply defer your retirement pension, i.e., if you choose to remain employed after age 65, you may opt out of making retirement savings contributions entirely.

**Please return the form completed and signed to us no later than three months before you reach the retirement age pursuant to the Pension Fund Regulations, either by email to Pensionskasse_swissre@swissre.com or via internal mail to Pension Fund Swiss Re, X1057.**

**Your details**

| | The Insured |
|---|---|
| First name, last name | |
| Employee ID (badge) no. | |
| Street address | |
| Postcode, town | |
| Email | |
| Phone | |
| Date of birth | |
| Marital status | |
| Date of retirement, if known | |

**Pension Fund Swiss Re**
Mythenquai 50/60
8022 Zurich
www.pensionskasse-swissre.ch/en/

**Select the retirement contributions from age 65:**

**a. With employer and employee contributions**

I select the following option:

☐ **Option contribution category 1**: My employer's contribution: 18.5% of my insured salary; my contribution: 9.5% of my insured salary
☐ **Option contribution category 2:** My employer's contribution: 18.5% of my insured salary; my contribution: 4.8% of my insured salary
☐ **Option contribution category 3:** My employer's contribution: 18.5% of my insured salary; my contribution: 0.0% of my insured salary

**b. Without employer and employee contributions**

☐ **Option no contribution**

**Declaration by the Insured**
By signing below, I certify that all information provided on this form is correct and complete and that I duly note the applicable provisions of law and the Regulations.

Place

Date

Insured's signature