



**Note:** If you need more space when completing this form, see "What if I need more room?" in the instructions on the Back of Part 2.

### *Examples of Designations*

**1. How to designate one beneficiary** Show beneficiary's full name. Do not write names as M.E. Brown or as Mrs. John H. Brown. If you want to designate your estate, enter "My estate" in the beneficiary column.

First name, middle initial, and last name of each beneficiary	Social Security Number	Address (Including ZIP code)	Relationship	Percent or fraction designated
Mary E. Brown	000-00-0000	214 Central Avenue Munice, IN 47303	Niece	100%

**2. How to designate more than one beneficiary** Be sure that the shares to be paid to the several beneficiaries add up to 100 percent or 1.0. Read instructions on the Back of Part 2 if you need more room.

First name, middle initial, and last name of each beneficiary	Social Security Number	Address (Including ZIP code)	Relationship	Percent or fraction designated
Jose P. Lopez	111-11-1111	360 Williams Street Red Band, NJ 07701	Domestic Partner	one-half
Rosa L. Rowe	222-22-2222	792 Broadway Whiting, IN 46392	Mother	one-half

**3. How to designate a contingent beneficiary** *(Someone to receive the benefits if the person you designate dies before the Insured dies)*

First name, middle initial, and last name of each beneficiary	Social Security Number	Address (Including ZIP code)	Relationship	Percent or fraction designated
John M. Parrish, if living	333-33-3333	810 West 180th Street New York, NY 10033	Spouse	100%
Otherwise to: Susan A. Parrish	444-44-4444	810 West 180th Street New York, NY 10033	Sister	100%

**4. How to designate different beneficiaries for Basic and Optional**

You cannot designate Option C - Family.

First name, middle initial, and last name of each beneficiary	Social Security Number	Address (Including ZIP code)	Relationship	Percent or fraction designated
Leroy D. White	555-55-5555	124 Elm Street Dayton, OH 45420	Father	100% Basic
Jane M. Smith	666-66-6666	421 Spring Avenue Portland, ME 04101	Sister	100% Option A
Elizabeth J. Allen	777-77-7777	234 Fifth Avenue New York, NY 10029	Daughter	50% Option B
Ann J. Borden	888-88-8888	678 Ninth Street Philadelphia, PA 19123	Daughter	50% Option B

**5. How to designate an inter vivos trust (A trust that you set up during your lifetime)**

First name, middle initial, and last name of each beneficiary	Social Security Number	Address (Including ZIP code)	Relationship	Percent or fraction designated
Trustee(s) or Successor Trustee(s) as provided in the John Q. Public Trust Agreement dated 10/15/2013, if valid. Otherwise to:			Trustee	100%
Mary E. Brown	000-00-0000	214 Central Avenue Munice, IN 47303	Niece	100%

**6. How to designate a testamentary trust (A trust that is set up when you die, according to terms in your will)**

First name, middle initial, and last name of each beneficiary	Social Security Number	Address (Including ZIP code)	Relationship	Percent or fraction designated
Trustee(s) or Successor Trustee(s) as provided in my Last Will and Testament, if valid. Otherwise to:			Trustee	100%
Maria Sufuentes	999-99-9999	5909 Pacific Avenue, NW Washington, DC 20019	Niece	100%

**7. How to cancel all designations of beneficiary**

First name, middle initial, and last name of each beneficiary	Social Security Number	Address (Including ZIP code)	Relationship	Percent or fraction designated
Cancel prior designations				

**INSTRUCTIONS:** The Insured or assignee must sign this form. Two people must witness the signature and sign as witnesses. The Insured's agency (or U.S. Office of Personnel Management [OPM], if the Insured is an annuitant or insured as a compensationer) must receive the designation before the Insured's death. A person with a power of attorney or other similar legal authority may not sign for the Insured or assignee. A witness cannot be a beneficiary. The agency or OPM, as appropriate, must receive valid court orders involving FEGLI before the Insured's death.

**Please read the additional instructions below before completing this form.**

**"You" and "your" refer to the person completing this form (the Insured or an assignee). The "Insured" is the insured employee, annuitant or compensationer. The "Assignee" is a person(s), firm(s), or trust(s) (usually named on an Assignment form, RI 76-10) who owns and controls the Insured's life insurance coverage. An assignment is NOT the same as a designation of beneficiary.**

**Who receives benefits when the Insured dies?** By law, the Office of Federal Employees' Group Life Insurance (OFEGLI) pays benefits in this order:

- ❖ If the Insured assigned ownership of his/her insurance (usually by filing an RI 76-10, *Assignment of Life Insurance*), OFEGLI will pay:  
*First*, to the beneficiary(ies) the assignee(s) validly designated;  
*Second*, if none, to the assignee(s).
- ❖ If the Insured did not assign ownership and there is a valid court order (see Part 870 of title 5, Code of Federal Regulations) on file with the agency or OPM, as appropriate, OFEGLI will pay benefits according to the court order.
- ❖ If the Insured did not assign ownership and there is no valid court order on file with the agency or OPM, as appropriate, then OFEGLI will pay:  
*First*, to the beneficiary(ies) the Insured validly designated;  
*Second*, if none, to the Insured's widow or widower;  
*Third*, if none of the above, to the Insured's child or children in equal shares, and the descendants of any deceased children (a court will usually have to appoint a guardian to receive payment for a minor child);  
*Fourth*, if none of the above, to the Insured's parents in equal shares, or the entire amount to the surviving parent;  
*Fifth*, if none of the above, to the court-appointed executor or administrator of the Insured's estate;  
*Sixth*, if none of the above, to the Insured's other next of kin entitled under the laws of the State where the Insured lived.

**Do I have to designate a beneficiary?** No. But if you want OFEGLI to pay differently than listed above and you have not assigned the life insurance and there is no valid court order on file with the agency or OPM, as appropriate, you need to designate a beneficiary.

**What if one of the beneficiaries dies or is disqualified for any reason?** Unless you indicate otherwise on your designation of beneficiary, OFEGLI will distribute that beneficiary's share equally among the surviving beneficiaries, or entirely to the sole survivor.

**What if none of the beneficiaries is living when the Insured dies?** OFEGLI will pay the benefits according to the order of precedence listed above.

**Can I cancel or change this designation at any time?** Yes, you may cancel or change your designation at any time, without the knowledge of or consent of the beneficiary(ies), unless you assigned the insurance or there is a valid court order on file with the agency or OPM, as appropriate.

**Is a change or cancellation of beneficiary in my last will or testament valid?** It is valid only if you sign your will, two people who witnessed your signature sign your will, and your agency (or OPM, for retirees or insured compensationers) receives your will before the Insured's death.

**What if I don't know a beneficiary's social security number?** If you don't know the number, leave it blank. But having the number helps speed up the payment of benefits.

**Can a witness receive benefits as a designated beneficiary?** No.

**Who can I name as a beneficiary?** You may name any person, firm, corporation or legal entity (except an agency of the Federal or District of Columbia government).

**Can I use a common disaster clause?** Yes. A common disaster clause is a statement that says that a designated beneficiary is entitled to the benefits only if he/she survives the Insured by a specified minimum number of days. The number of days cannot exceed 30. You can name a contingent beneficiary. If you don't name a

#### Privacy Act and Public Burden Statements

Title 5, U.S. Code, chapter 87, Life Insurance, authorizes solicitation of this information. The Office of Federal Employees' Group Life Insurance (OFEGLI) will use the information you furnish to determine your beneficiary(ies) for benefits under the Federal Employees' Group Life Insurance Program. OFEGLI is not a Federal agency. It is staffed by employees of the contracted life insurance carrier. It may share this information with the Office of Personnel Management (OPM). Agencies and/or OPM will place this information in the Insured's Official Personnel Folder or retirement file. OPM or OFEGLI may disclose this information to other Federal agencies or Congressional offices which may have a need to know it in connection with your application for a job, license, grant or other benefit. It may also be shared and is subject to verification, via paper, electronic media, or through the use of computer matching programs, with national, state, local or other charitable or social security administrative agencies to determine and issue benefits under their programs. In addition, to the extent this information indicates possible violation of civil or criminal law, it may be shared and verified, as noted above, with an appropriate Federal, state, or local law enforcement agency.

We also ask for the Insured's Social Security Number to use it as an individual identifier in the Federal Employees' Group Life Insurance Program.

**KEEP YOUR DESIGNATION CURRENT. SUBMIT A NEW ONE IF THE ADDRESS OF ONE OF YOUR BENEFICIARIES CHANGES OR IF YOUR INTENTIONS CHANGE (FOR EXAMPLE, DUE TO A CHANGE IN FAMILY STATUS, SUCH AS MARRIAGE, DIVORCE, DEATH, BIRTH, ETC.).**