



Woods Hole Oceanographic Institution Beneficiary Designation Form

| | |
|--|-------------------------------|
| Employee Name (Last, First, Middle) | Social Security Number |
| | |
| Address (Street, City, State, ZIP Code) | Email Address |
| | |
| <ul style="list-style-type: none"> • This beneficiary information applies to all coverages applicable to the covered employee and will replace any prior beneficiary designation. • The primary beneficiary is the individual(s) who will receive the insurance proceeds in the event of the insured's death. • In the event the primary beneficiary(ies) predecease(s) the insured, the contingent beneficiary(ies) will receive the insurance proceeds. • If no beneficiary is named, or no beneficiary survives the insured, settlement will be made in accordance with the terms of the Group Contract. • To change your beneficiaries, you must complete a new form. • If you wish to name more beneficiaries than this form provides space for, complete your list on an additional copy of this form and attach it. | |

| Primary Beneficiary (the total of all primary beneficiaries must equal 100%) | | | | | |
|--|----------------------------|---------------|------------------------|--------------|--------------|
| 1. | Name (Last, First, Middle) | Date of Birth | Social Security Number | Relationship | % of Benefit |
| | | | | | |
| | Address | | | Phone Number | |
| 2. | Name (Last, First, Middle) | Date of Birth | Social Security Number | Relationship | % of Benefit |
| | | | | | |
| | Address | | | Phone Number | |
| 3. | Name (Last, First, Middle) | Date of Birth | Social Security Number | Relationship | % of Benefit |
| | | | | | |
| | Address | | | Phone Number | |
| TOTAL | | | | | |
| <i>The total share of all primary beneficiaries must equal 100%.</i> | | | | | |

| Contingent Beneficiary (the total of all contingent beneficiaries must equal 100%) | | | | | |
|--|----------------------------|---------------|------------------------|--------------|--------------|
| 1. | Name (Last, First, Middle) | Date of Birth | Social Security Number | Relationship | % of Benefit |
| | | | | | |
| | Address | | | Phone Number | |
| 2. | Name (Last, First, Middle) | Date of Birth | Social Security Number | Relationship | % of Benefit |
| | | | | | |
| | Address | | | Phone Number | |
| 3. | Name (Last, First, Middle) | Date of Birth | Social Security Number | Relationship | % of Benefit |
| | | | | | |
| | Address | | | Phone Number | |
| 4. | Name (Last, First, Middle) | Date of Birth | Social Security Number | Relationship | % of Benefit |
| | | | | | |
| | Address | | | Phone Number | |
| TOTAL | | | | | |
| <i>The total share of all primary beneficiaries must equal 100%.</i> | | | | | |

Employee Signature: _____

Date: _____

Complete this form and retain a copy for your records.

Remember the following when completing your Beneficiary Designation form:

- Clearly identify your beneficiary(ies), providing each beneficiary's full name, date of birth, Social Security number, address, and relationship to you.
- You can name primary and contingent beneficiaries.
 - Primary:** The primary beneficiary is the individual(s) who will receive the insurance proceeds at the time of your death.
 - Contingent:** A contingent beneficiary, or secondary beneficiary, is the individual(s) who will receive the insurance proceeds if the primary beneficiary(ies) dies before you. Naming a contingent beneficiary is important, as you may outlive the primary beneficiary or die simultaneously.
- If you name more than one primary or contingent beneficiary, make sure the beneficiary percentages add up to 100 percent for each class of beneficiary (primary and contingent).
- **Minor child:** A minor child can be named as a beneficiary, but benefits cannot be released directly to the minor child. Benefits will be paid to the court-appointed guardian of the minor child's estate (or property). Parents are not automatically the guardians of a minor's estate. A parent may need to petition a local probate court where the child lives to be named guardian of the child's estate.
- Make sure you sign and date the beneficiary designation form.
- If no beneficiary is named, or if no beneficiary survives you, settlement will be made as provided in the Group Contract.

To assist you, here are some examples of clear beneficiary designations.

| One primary and two contingent beneficiaries | One primary and three contingent beneficiaries |
|---|---|
| <p>Primary Beneficiary: Jane Smith, spouse, 100%</p> <p>Contingent Beneficiaries: Paul Jones, brother, 50% Mary Park, sister, 50%</p> | <p>Primary Beneficiary: Gayle Rich, spouse, 100%</p> <p>Contingent Beneficiaries: Teresa Rich, daughter, 40% Susan Rich, daughter, 40% Jason Rich, brother, 20%</p> |