TVA RETIREMENT SYSTEM Spousal Consent for the Death-In-Service Benefit

This form applies to all benefits from the TVA Retirement System, except the 401(k) Plan.

SECTION 1 - PARTICIPANT INFORMATION				
Name (Last)	(First)	(Middle)	Social Security Number	
Daytime Phone (Area Code/Number)			For TVARS Use Only	
SECTION 2 - EXPLA	NATION OF DEATH-IN-SE	RVICE BENEFIT AND SPO	USAL CONSENT REQUIREMENT	

Beneficiaries are entitled to the following TVA Retirement System (TVARS) benefits when a member dies while employed:

If the member has a cash balance account and MORE than 10 years of TVARS service as of October 1, 2016, the beneficiary is entitled to the member's balance in the Fixed and/or Variable Funds, if any, and a TVA-funded death benefit. The death benefit is the higher of (1) the value of the member's cash balance account or (2) a payment equal to 50% of the member's base salary plus five-twelfths (5/12) of 1% of the base salary for each month of creditable service, up to a maximum of 200% of the member's base salary.

If the member has a cash balance account and LESS than 10 years of TVARS service as of October 1, 2016, the beneficiary is entitled to the member's balance in the Fixed and/or Variable Funds, if any, and a lump-sum payment of the value of the member's cash balance account, if vested.

If the member is in the Original Benefit Structure, the beneficiary is entitled to a benefit equal to the member's balance in the Fixed and/or Variable Funds, if any, and a death benefit equal to 50% of the member's base salary plus five-twelfths (5/12) of 1% of the base salary for each month of creditable service, up to a maximum of 200% of the member's base salary. Benefits may exceed 200% of the annual salary to include credit for unused sick leave and annual leave forfeited after January 1, 1980.

Married employees who first became a TVARS member after January 1, 1990, are required to name their spouse as the sole primary beneficiary for the death-in-service benefit. This requirement can only be waived if the spouse consents by signing below. Once the spouse consents, the member has the right to change the beneficiary designation at any time without obtaining the spouse's additional consent.

SECTION 3 - TO BE COMPLETED BY CURRENT SPOUSE OF PARTICIPANT				
I hereby acknowledge that I have read and understand section	n 2 above.			
I hereby consent to my spouse's election of a beneficiary or be acknowledge that (1) my spouse's election of another benefici consent may be that any death-in-service benefit will be paid t and my spouse will have the right to change beneficiary design	iary is not valid unle to someone other tl	ess I consent by signing this form, (2) the effect of my nan me, and (3) my consent is final (not revocable)		
Signature of Spouse To be completed by a notary public:	Date			
State	-	County		
I certify that the person named above presented identification (or was known) to me, gave consent, signed or marked this form, and acknowledged that the consent was freely given in my presence on this the day of				
Expiration Date Of Commission	_ Seal	Notary Public Signature		

Privacy Act Statement The authority for requesting this information is the TVA Act. The information you furnish will be used in administering the TVA Retirement System and in providing the benefits of that System to System members and retirees and their designated surviving beneficiaries. The information you provide may be shared with contractors engaged in helping the System administer its programs and with Federal, state, and local governmental agencies which have a need to know the information. It may also be used to respond to a Congressional referral. In addition, to the extent that this information indicates a possible violation of civil or criminal law, it may be shared with appropriate Federal, state, or local law enforcement agencies. While you are not required to supply the information requested, it may not be possible to process your elections or provide System benefits if you fail to do so. RS-200 [04-13-2018] Page 2 of 2 PLEASE RETAIN A COPY FOR YOUR RECORDS TVA Retirement System, WT 8A-K Previous Edition Obsolete 400 West Summit Hill Drive