

# Employee & Family Voluntary Term Life Insurance

Underwritten by:  
Reliance Standard Life Insurance Company (“the Company”)  
Administered by:  
Bay Bridge Administrators, LLC

**What Coverage is available?** As an active full-time employee you are eligible to purchase, at your own expense, Voluntary Term Life for yourself and Family Life Insurance on your Spouse and Child.

**Employee Voluntary Life Insurance:** You may enroll for any amount from \$25,000 to \$500,000 in \$5,000 increments not to exceed five times your basic earnings.

**When can I apply for coverage?** You are eligible to apply for this coverage when you are a new hire.

**How do I qualify?** If you apply when you are a new hire, you are eligible for this coverage up to the *Guaranteed Issue Amount* with no evidence of insurability required.

Your *Guarantee Issue Amount* is based on your attained age, as follows:

Less than age 60: \$200,000

Age 60 to 64: \$25,000

Age 65 & Over: No Guarantee Issue

As a new hire, if you’d like coverage over the Guarantee Issue Amount, you will have to provide Evidence of Insurability. If you do not apply as a new hire, or elect to increase coverage later, you will have to provide Evidence of Insurability. In the event you need to supply Evidence of Insurability, you do not have coverage until the Company approves this Evidence of Insurability, and you may be denied coverage.

Guarantee Issue is subject to underwriting rules and is not available in all circumstances

**Effective Date:** Your insurance benefit that is less than or equal to the Guaranteed Issue Amount, indicated above, begins on the latest of: (1) the effective date of the Participating Employer’s plan, if you are eligible prior to such date; or (2) the first day of the month following the date you become eligible; provided you have enrolled and the required premium has been paid. Any insurance benefit that is in excess of the Guaranteed Issue Amount will become effective on the first day of the month following the date the Company approves your request and the applicable Evidence of Insurability. If you are not Actively-At-Work, your coverage will be delayed until the date you return to Active Work.

**Effect of Prior Coverage:** If you were participating in and insured by the Participating Employer’s prior plan on the date immediately prior to the Participating Employer’s Effective Date shown on the Policy Schedule and are Actively At Work on such date: All amounts that were in force under the Participating Employer’s prior plan on the date immediately preceding the Participating Employer’s Effective Date with the Company are guaranteed issue up to the maximum benefit amount available under this plan.

Employees currently insured for less than the Guaranteed Issue Amount can increase coverage up to the Guarantee Issue Amount during the initial Open Enrollment period without providing Evidence of Insurability. During the Open Enrollment period currently insured Employees can also request an increase in the amount of coverage in excess of the Guarantee Issue Amount but are required to provide Evidence of Insurability satisfactory to the Company before the amounts in excess of the Guaranteed Issue Amount will become effective.

For each Insured Person’s or Insured Dependent’s individual coverage, coverage will be deemed continuous and uninterrupted and no change will have retroactive effect. However, if you elect to increase your amount of coverage, the increased amounts will be subject to any other plan provisions.

**Employee Annual Re-Enrollment:**

**On Participating Employer’s Anniversary Date;**

- 1) If you are actively at work, are less than age 60 and are not currently enrolled in this plan you may elect \$25,000. Evidence of Insurability is required for amounts that exceed \$25,000.
- 2) If you are actively at work, are less than age 60 and insured under this plan for at least 6 months you may enroll for an additional \$25,000 each annual re-enrollment period without Evidence of Insurability. Additional amounts that exceed \$25,000 will require Evidence of Insurability. The additional \$25,000 available during the annual re-enrollment is limited to a cumulative total of \$100,000 of additional coverage or up to the Guarantee Issue Amount whichever is less. Evidence of Insurability will be required for amounts that exceed the Guarantee Issue Amount. In no event will your benefit amount exceed the \$500,000 plan maximum or be greater than 5 times your annual earnings.

**NOTE: Annual Re-Enrollment is not applicable to Spouse and Children.**

**What are the benefit Limitations?** Benefits will reduce 50% at age 70.

No Life Insurance benefits will be payable under the Policy for death caused by suicide or self-destruction, or any attempt at it within 24 months after the person’s coverage under the Reliance Standard Life Insurance Company Policy becomes effective.

**What is the cost?**

**Employee Monthly Premium**

Benefit Amount	Age 19 & Under	20 to 24	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64	65 & Older
\$25,000	\$0.93	\$0.93	\$0.93	\$1.38	\$1.60	\$1.85	\$4.48	\$7.75	\$15.00	\$28.50	\$42.75
\$30,000	\$1.11	\$1.11	\$1.11	\$1.65	\$1.92	\$2.22	\$5.37	\$9.30	\$18.00	\$34.20	\$51.30
\$35,000	\$1.30	\$1.30	\$1.30	\$1.93	\$2.24	\$2.59	\$6.27	\$10.85	\$21.00	\$39.90	\$59.85
\$40,000	\$1.48	\$1.48	\$1.48	\$2.20	\$2.56	\$2.96	\$7.16	\$12.40	\$24.00	\$45.60	\$68.40
\$45,000	\$1.67	\$1.67	\$1.67	\$2.48	\$2.88	\$3.33	\$8.06	\$13.95	\$27.00	\$51.30	\$76.95
\$50,000	\$1.85	\$1.85	\$1.85	\$2.75	\$3.20	\$3.70	\$8.95	\$15.50	\$30.00	\$57.00	\$85.50
\$55,000	\$2.04	\$2.04	\$2.04	\$3.03	\$3.52	\$4.07	\$9.85	\$17.05	\$33.00	\$62.70	\$94.05
\$60,000	\$2.22	\$2.22	\$2.22	\$3.30	\$3.84	\$4.44	\$10.74	\$18.60	\$36.00	\$68.40	\$102.60
\$65,000	\$2.41	\$2.41	\$2.41	\$3.58	\$4.16	\$4.81	\$11.64	\$20.15	\$39.00	\$74.10	\$111.15
\$70,000	\$2.59	\$2.59	\$2.59	\$3.85	\$4.48	\$5.18	\$12.53	\$21.70	\$42.00	\$79.80	\$119.70
\$75,000	\$2.78	\$2.78	\$2.78	\$4.13	\$4.80	\$5.55	\$13.43	\$23.25	\$45.00	\$85.50	\$128.25
\$80,000	\$2.96	\$2.96	\$2.96	\$4.40	\$5.12	\$5.92	\$14.32	\$24.80	\$48.00	\$91.20	\$136.80
\$85,000	\$3.15	\$3.15	\$3.15	\$4.68	\$5.44	\$6.29	\$15.22	\$26.35	\$51.00	\$96.90	\$145.35
\$90,000	\$3.33	\$3.33	\$3.33	\$4.95	\$5.76	\$6.66	\$16.11	\$27.90	\$54.00	\$102.60	\$153.90
\$95,000	\$3.52	\$3.52	\$3.52	\$5.23	\$6.08	\$7.03	\$17.01	\$29.45	\$57.00	\$108.30	\$162.45
\$100,000	\$3.70	\$3.70	\$3.70	\$5.50	\$6.40	\$7.40	\$17.90	\$31.00	\$60.00	\$114.00	\$171.00
\$105,000	\$3.89	\$3.89	\$3.89	\$5.78	\$6.72	\$7.77	\$18.80	\$32.55	\$63.00	\$119.70	\$179.55
\$110,000	\$4.07	\$4.07	\$4.07	\$6.05	\$7.04	\$8.14	\$19.69	\$34.10	\$66.00	\$125.40	\$188.10
\$115,000	\$4.26	\$4.26	\$4.26	\$6.33	\$7.36	\$8.51	\$20.59	\$35.65	\$69.00	\$131.10	\$196.65
\$120,000	\$4.44	\$4.44	\$4.44	\$6.60	\$7.68	\$8.88	\$21.48	\$37.20	\$72.00	\$136.80	\$205.20
\$125,000	\$4.63	\$4.63	\$4.63	\$6.88	\$8.00	\$9.25	\$22.38	\$38.75	\$75.00	\$142.50	\$213.75
\$130,000	\$4.81	\$4.81	\$4.81	\$7.15	\$8.32	\$9.62	\$23.27	\$40.30	\$78.00	\$148.20	\$222.30
\$135,000	\$5.00	\$5.00	\$5.00	\$7.43	\$8.64	\$9.99	\$24.17	\$41.85	\$81.00	\$153.90	\$230.85
\$140,000	\$5.18	\$5.18	\$5.18	\$7.70	\$8.96	\$10.36	\$25.06	\$43.40	\$84.00	\$159.60	\$239.40
\$145,000	\$5.37	\$5.37	\$5.37	\$7.98	\$9.28	\$10.73	\$25.96	\$44.95	\$87.00	\$165.30	\$247.95
\$150,000	\$5.55	\$5.55	\$5.55	\$8.25	\$9.60	\$11.10	\$26.85	\$46.50	\$90.00	\$171.00	\$256.50
\$155,000	\$5.74	\$5.74	\$5.74	\$8.53	\$9.92	\$11.47	\$27.75	\$48.05	\$93.00	\$176.70	\$265.05
\$160,000	\$5.92	\$5.92	\$5.92	\$8.80	\$10.24	\$11.84	\$28.64	\$49.60	\$96.00	\$182.40	\$273.60
\$165,000	\$6.11	\$6.11	\$6.11	\$9.08	\$10.56	\$12.21	\$29.54	\$51.15	\$99.00	\$188.10	\$282.15
\$170,000	\$6.29	\$6.29	\$6.29	\$9.35	\$10.88	\$12.58	\$30.43	\$52.70	\$102.00	\$193.80	\$290.70
\$175,000	\$6.48	\$6.48	\$6.48	\$9.63	\$11.20	\$12.95	\$31.33	\$54.25	\$105.00	\$199.50	\$299.25
\$180,000	\$6.66	\$6.66	\$6.66	\$9.90	\$11.52	\$13.32	\$32.22	\$55.80	\$108.00	\$205.20	\$307.80

\$185,000	\$6.85	\$6.85	\$6.85	\$10.18	\$11.84	\$13.69	\$33.12	\$57.35	\$111.00	\$210.90	\$316.35
\$190,000	\$7.03	\$7.03	\$7.03	\$10.45	\$12.16	\$14.06	\$34.01	\$58.90	\$114.00	\$216.60	\$324.90
\$195,000	\$7.22	\$7.22	\$7.22	\$10.73	\$12.48	\$14.43	\$34.91	\$60.45	\$117.00	\$222.30	\$333.45
\$200,000	\$7.40	\$7.40	\$7.40	\$11.00	\$12.80	\$14.80	\$35.80	\$62.00	\$120.00	\$228.00	\$342.00
\$205,000	\$7.59	\$7.59	\$7.59	\$11.28	\$13.12	\$15.17	\$36.70	\$63.55	\$123.00	\$233.70	\$350.55
\$210,000	\$7.77	\$7.77	\$7.77	\$11.55	\$13.44	\$15.54	\$37.59	\$65.10	\$126.00	\$239.40	\$359.10
\$215,000	\$7.96	\$7.96	\$7.96	\$11.83	\$13.76	\$15.91	\$38.49	\$66.65	\$129.00	\$245.10	\$367.65
\$220,000	\$8.14	\$8.14	\$8.14	\$12.10	\$14.08	\$16.28	\$39.38	\$68.20	\$132.00	\$250.80	\$376.20
\$225,000	\$8.33	\$8.33	\$8.33	\$12.38	\$14.40	\$16.65	\$40.28	\$69.75	\$135.00	\$256.50	\$384.75
\$230,000	\$8.51	\$8.51	\$8.51	\$12.65	\$14.72	\$17.02	\$41.17	\$71.30	\$138.00	\$262.20	\$393.30
\$235,000	\$8.70	\$8.70	\$8.70	\$12.93	\$15.04	\$17.39	\$42.07	\$72.85	\$141.00	\$267.90	\$401.85
\$240,000	\$8.88	\$8.88	\$8.88	\$13.20	\$15.36	\$17.76	\$42.96	\$74.40	\$144.00	\$273.60	\$410.40
\$245,000	\$9.07	\$9.07	\$9.07	\$13.48	\$15.68	\$18.13	\$43.86	\$75.95	\$147.00	\$279.30	\$418.95
\$250,000	\$9.25	\$9.25	\$9.25	\$13.75	\$16.00	\$18.50	\$44.75	\$77.50	\$150.00	\$285.00	\$427.50
\$255,000	\$9.44	\$9.44	\$9.44	\$14.03	\$16.32	\$18.87	\$45.65	\$79.05	\$153.00	\$290.70	\$436.05
\$260,000	\$9.62	\$9.62	\$9.62	\$14.30	\$16.64	\$19.24	\$46.54	\$80.60	\$156.00	\$296.40	\$444.60
\$265,000	\$9.81	\$9.81	\$9.81	\$14.58	\$16.96	\$19.61	\$47.44	\$82.15	\$159.00	\$302.10	\$453.15
\$270,000	\$9.99	\$9.99	\$9.99	\$14.85	\$17.28	\$19.98	\$48.33	\$83.70	\$162.00	\$307.80	\$461.70
\$275,000	\$10.18	\$10.18	\$10.18	\$15.13	\$17.60	\$20.35	\$49.23	\$85.25	\$165.00	\$313.50	\$470.25
\$280,000	\$10.36	\$10.36	\$10.36	\$15.40	\$17.92	\$20.72	\$50.12	\$86.80	\$168.00	\$319.20	\$478.80
\$285,000	\$10.55	\$10.55	\$10.55	\$15.68	\$18.24	\$21.09	\$51.02	\$88.35	\$171.00	\$324.90	\$487.35
\$290,000	\$10.73	\$10.73	\$10.73	\$15.95	\$18.56	\$21.46	\$51.91	\$89.90	\$174.00	\$330.60	\$495.90
\$295,000	\$10.92	\$10.92	\$10.92	\$16.23	\$18.88	\$21.83	\$52.81	\$91.45	\$177.00	\$336.30	\$504.45
\$300,000	\$11.10	\$11.10	\$11.10	\$16.50	\$19.20	\$22.20	\$53.70	\$93.00	\$180.00	\$342.00	\$513.00
\$305,000	\$11.29	\$11.29	\$11.29	\$16.78	\$19.52	\$22.57	\$54.60	\$94.55	\$183.00	\$347.70	\$521.55
\$310,000	\$11.47	\$11.47	\$11.47	\$17.05	\$19.84	\$22.94	\$55.49	\$96.10	\$186.00	\$353.40	\$530.10
\$315,000	\$11.66	\$11.66	\$11.66	\$17.33	\$20.16	\$23.31	\$56.39	\$97.65	\$189.00	\$359.10	\$538.65
\$320,000	\$11.84	\$11.84	\$11.84	\$17.60	\$20.48	\$23.68	\$57.28	\$99.20	\$192.00	\$364.80	\$547.20
\$325,000	\$12.03	\$12.03	\$12.03	\$17.88	\$20.80	\$24.05	\$58.18	\$100.75	\$195.00	\$370.50	\$555.75
\$330,000	\$12.21	\$12.21	\$12.21	\$18.15	\$21.12	\$24.42	\$59.07	\$102.30	\$198.00	\$376.20	\$564.30
\$335,000	\$12.40	\$12.40	\$12.40	\$18.43	\$21.44	\$24.79	\$59.97	\$103.85	\$201.00	\$381.90	\$572.85
\$340,000	\$12.58	\$12.58	\$12.58	\$18.70	\$21.76	\$25.16	\$60.86	\$105.40	\$204.00	\$387.60	\$581.40
\$345,000	\$12.77	\$12.77	\$12.77	\$18.98	\$22.08	\$25.53	\$61.76	\$106.95	\$207.00	\$393.30	\$589.95
\$350,000	\$12.95	\$12.95	\$12.95	\$19.25	\$22.40	\$25.90	\$62.65	\$108.50	\$210.00	\$399.00	\$598.50
\$355,000	\$13.14	\$13.14	\$13.14	\$19.53	\$22.72	\$26.27	\$63.55	\$110.05	\$213.00	\$404.70	\$607.05
\$360,000	\$13.32	\$13.32	\$13.32	\$19.80	\$23.04	\$26.64	\$64.44	\$111.60	\$216.00	\$410.40	\$615.60
\$365,000	\$13.51	\$13.51	\$13.51	\$20.08	\$23.36	\$27.01	\$65.34	\$113.15	\$219.00	\$416.10	\$624.15
\$370,000	\$13.69	\$13.69	\$13.69	\$20.35	\$23.68	\$27.38	\$66.23	\$114.70	\$222.00	\$421.80	\$632.70
\$375,000	\$13.88	\$13.88	\$13.88	\$20.63	\$24.00	\$27.75	\$67.13	\$116.25	\$225.00	\$427.50	\$641.25
\$380,000	\$14.06	\$14.06	\$14.06	\$20.90	\$24.32	\$28.12	\$68.02	\$117.80	\$228.00	\$433.20	\$649.80
\$385,000	\$14.25	\$14.25	\$14.25	\$21.18	\$24.64	\$28.49	\$68.92	\$119.35	\$231.00	\$438.90	\$658.35
\$390,000	\$14.43	\$14.43	\$14.43	\$21.45	\$24.96	\$28.86	\$69.81	\$120.90	\$234.00	\$444.60	\$666.90
\$395,000	\$14.62	\$14.62	\$14.62	\$21.73	\$25.28	\$29.23	\$70.71	\$122.45	\$237.00	\$450.30	\$675.45
\$400,000	\$14.80	\$14.80	\$14.80	\$22.00	\$25.60	\$29.60	\$71.60	\$124.00	\$240.00	\$456.00	\$684.00
\$405,000	\$14.99	\$14.99	\$14.99	\$22.28	\$25.92	\$29.97	\$72.50	\$125.55	\$243.00	\$461.70	\$692.55
\$410,000	\$15.17	\$15.17	\$15.17	\$22.55	\$26.24	\$30.34	\$73.39	\$127.10	\$246.00	\$467.40	\$701.10
\$415,000	\$15.36	\$15.36	\$15.36	\$22.83	\$26.56	\$30.71	\$74.29	\$128.65	\$249.00	\$473.10	\$709.65
\$420,000	\$15.54	\$15.54	\$15.54	\$23.10	\$26.88	\$31.08	\$75.18	\$130.20	\$252.00	\$478.80	\$718.20
\$425,000	\$15.73	\$15.73	\$15.73	\$23.38	\$27.20	\$31.45	\$76.08	\$131.75	\$255.00	\$484.50	\$726.75
\$430,000	\$15.91	\$15.91	\$15.91	\$23.65	\$27.52	\$31.82	\$76.97	\$133.30	\$258.00	\$490.20	\$735.30
\$435,000	\$16.10	\$16.10	\$16.10	\$23.93	\$27.84	\$32.19	\$77.87	\$134.85	\$261.00	\$495.90	\$743.85
\$440,000	\$16.28	\$16.28	\$16.28	\$24.20	\$28.16	\$32.56	\$78.76	\$136.40	\$264.00	\$501.60	\$752.40
\$445,000	\$16.47	\$16.47	\$16.47	\$24.48	\$28.48	\$32.93	\$79.66	\$137.95	\$267.00	\$507.30	\$760.95
\$450,000	\$16.65	\$16.65	\$16.65	\$24.75	\$28.80	\$33.30	\$80.55	\$139.50	\$270.00	\$513.00	\$769.50
\$455,000	\$16.84	\$16.84	\$16.84	\$25.03	\$29.12	\$33.67	\$81.45	\$141.05	\$273.00	\$518.70	\$778.05
\$460,000	\$17.02	\$17.02	\$17.02	\$25.30	\$29.44	\$34.04	\$82.34	\$142.60	\$276.00	\$524.40	\$786.60
\$465,000	\$17.21	\$17.21	\$17.21	\$25.58	\$29.76	\$34.41	\$83.24	\$144.15	\$279.00	\$530.10	\$795.15
\$470,000	\$17.39	\$17.39	\$17.39	\$25.85	\$30.08	\$34.78	\$84.13	\$145.70	\$282.00	\$535.80	\$803.70
\$475,000	\$17.58	\$17.58	\$17.58	\$26.13	\$30.40	\$35.15	\$85.03	\$147.25	\$285.00	\$541.50	\$812.25
\$480,000	\$17.76	\$17.76	\$17.76	\$26.40	\$30.72	\$35.52	\$85.92	\$148.80	\$288.00	\$547.20	\$820.80
\$485,000	\$17.95	\$17.95	\$17.95	\$26.68	\$31.04	\$35.89	\$86.82	\$150.35	\$291.00	\$552.90	\$829.35
\$490,000	\$18.13	\$18.13	\$18.13	\$26.95	\$31.36	\$36.26	\$87.71	\$151.90	\$294.00	\$558.60	\$837.90

\$495,000	\$18.32	\$18.32	\$18.32	\$27.23	\$31.68	\$36.63	\$88.61	\$153.45	\$297.00	\$564.30	\$846.45
\$500,000	\$18.50	\$18.50	\$18.50	\$27.50	\$32.00	\$37.00	\$89.50	\$155.00	\$300.00	\$570.00	\$855.00

Premiums will change automatically each year when you attain an age that qualifies you for a new age bracket rate.

**When Employee Voluntary Life Insurance Ends:**

Your Voluntary Life Insurance ends if: 1. your employment ends; 2. you are no longer Actively At Work; 3. premiums are not paid; 4. you are no longer an eligible employee; 5. Voluntary Life Insurance is no longer provided by the Participating Employer; 6. the policy terminates; 7. you enter the military, naval or air force of any country or international organization on a full-time active duty basis.; or 8. the Participating Employer’s coverage under the policy ends.

**Family Life Insurance**

Spouse: \$10,000 to \$100,000 in \$5,000 increments not to exceed 50% of the Employees Insured Amount. Coverage terminates at age 70.

Child:

10 days to 6 months: \$1,000

6 months to age 19, or 25 if full-time student, \$10,000 or \$20,000 as elected.

**Guarantee Issue Amounts for Dependents**

**Spouse:**

Less than age 60 \$25,000

Age 60 but less than age 70 None

Spouse Coverage terminates at age 70

**Children:**

10 days to 6 months- \$1,000

6 months to age 19 (25 full-time student) \$10,000 or \$20,000

Guarantee Issue is subject to underwriting rules and is not available in all circumstances

**Effective Date of Dependents**

**Coverage:**

You may apply for Family Life Insurance Benefits for your spouse, less than age 70 at the time of application, or child. Such benefit that is less than or equal to the Guaranteed Issue Amount begins on the latest of the following: 1. the Participating Employer’s Effective Date, if you apply for Family Life Insurance prior to such date; 2. your Effective Date if application for Family Life Insurance is made within 31 days of your eligibility date; 3. the date we approve the application for Family Life Insurance, subject to proof of Evidence of Insurability, if application is made more than 31 days after your eligibility date; 4. the date we approve the application for Family Life Insurance, if application is made within 31 days of you acquiring a new spouse or child; 5. the date we approve the application for Family Life Insurance, subject to proof of Evidence of Insurability, if application is made more than 31 days after acquiring a new spouse or child.

Any Family Life Insurance benefit that is in excess of the guaranteed issue amount will become effective when we approve the required Evidence of Insurability.

No Family Life Insurance benefit will be effective until the required premium is paid.

Note: Dependent coverage may only be taken in conjunction with Employee coverage. Dependent coverage may not be taken on a stand alone basis. A spouse or child who is insured as an Employee under this plan cannot also be insured as a dependent. If both you & your spouse are insured under this plan as employees, only one of you may insure your children as dependents.

## Spouse Monthly Premium

Benefit Amount	Under age 30	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64	65 to 69
\$10,000	\$1.45	\$1.45	\$1.79	\$2.82	\$4.35	\$6.91	\$10.24	\$19.80	\$19.80
\$15,000	\$2.18	\$2.18	\$2.69	\$4.23	\$6.53	\$10.37	\$15.36	\$29.70	\$29.70
\$20,000	\$2.90	\$2.90	\$3.58	\$5.64	\$8.70	\$13.82	\$20.48	\$39.60	\$39.60
\$25,000	\$3.63	\$3.63	\$4.48	\$7.05	\$10.88	\$17.28	\$25.60	\$49.50	\$49.50
\$30,000	\$4.35	\$4.35	\$5.37	\$8.46	\$13.05	\$20.73	\$30.72	\$59.40	\$59.40
\$35,000	\$5.08	\$5.08	\$6.27	\$9.87	\$15.23	\$24.19	\$35.84	\$69.30	\$69.30
\$40,000	\$5.80	\$5.80	\$7.16	\$11.28	\$17.40	\$27.64	\$40.96	\$79.20	\$79.20
\$45,000	\$6.53	\$6.53	\$8.06	\$12.69	\$19.58	\$31.10	\$46.08	\$89.10	\$89.10
\$50,000	\$7.25	\$7.25	\$8.95	\$14.10	\$21.75	\$34.55	\$51.20	\$99.00	\$99.00
\$55,000	\$7.98	\$7.98	\$9.85	\$15.51	\$23.93	\$38.01	\$56.32	\$108.90	\$108.90
\$60,000	\$8.70	\$8.70	\$10.74	\$16.92	\$26.10	\$41.46	\$61.44	\$118.80	\$118.80
\$65,000	\$9.43	\$9.43	\$11.64	\$18.33	\$28.28	\$44.92	\$66.56	\$128.70	\$128.70
\$70,000	\$10.15	\$10.15	\$12.53	\$19.74	\$30.45	\$48.37	\$71.68	\$138.60	\$138.60
\$75,000	\$10.88	\$10.88	\$13.43	\$21.15	\$32.63	\$51.83	\$76.80	\$148.50	\$148.50
\$80,000	\$11.60	\$11.60	\$14.32	\$22.56	\$34.80	\$55.28	\$81.92	\$158.40	\$158.40
\$85,000	\$12.33	\$12.33	\$15.22	\$23.97	\$36.98	\$58.74	\$87.04	\$168.30	\$168.30
\$90,000	\$13.05	\$13.05	\$16.11	\$25.38	\$39.15	\$62.19	\$92.16	\$178.20	\$178.20
\$95,000	\$13.78	\$13.78	\$17.01	\$26.79	\$41.33	\$65.65	\$97.28	\$188.10	\$188.10
\$100,000	\$14.50	\$14.50	\$17.90	\$28.20	\$43.50	\$69.10	\$102.40	\$198.00	\$198.00

### Spouse Coverage Terminates at age 70

#### Children Premium:

\$10,000 Benefit: \$2.00 per Month

\$20,000 Benefit: \$4.00 per Month

Premiums will change automatically each year when your spouse attained age qualifies for a new age bracket rate.

**When Family Coverage Ends:** Your Insured Spouse's or Insured Child's Life Insurance ends if: 1. your coverage ends; 2. the Participating Employer's coverage under the policy ends; 3 you are no longer eligible for Family Life Insurance; 4. you notify us in writing to discontinue the Family Life Insurance; 5. the premium is not paid; 6. Family Life Insurance is no longer provided by the policy; 7. your Insured Spouse or Insured Child ceases to qualify for coverage under the policy, 8. your Insured Spouse or Insured Child enters the military, naval or air force of any country or international organization on a full-time active duty basis; or 9. your Spouse attains age 70.

#### Exceptions to When Coverage Terminates:

Under certain circumstances coverage may be extended and premium waived if you are no longer actively at work due to total disability. Please see your Certificate of Coverage for more details.

#### Accelerated Death Benefit:

Allows you to receive a percentage of the life amount if diagnosed with a terminal condition while covered under the policy. Also applies to your spouse coverage. Please see your Certificate of Coverage for more details.

#### Portability:

If you cease to be employed by the Participating Employer for any reason other than retirement you may be entitled to continue all or a portion of your life insurance under the Continuation of Coverage Provision. You may elect to continue your Life Insurance benefits provided you have not attained age 70 and you must make such election within 31 days of termination of employment. You will be responsible for paying the entire premium for coverage continued under this section. Premiums for continued coverage will be billed directly to you on a quarterly, semi-annual or annual basis. Such premiums may exceed the group rate applicable to the amount of coverage being continued. Coverage continued under this provision will be subject to all of the provisions and limitations of the policy, including reductions/termination at an age or any other termination provision. However, in no event will coverage continue beyond age 70. Please see your Certificate of Coverage for more details.

**Conversion:**

Under certain circumstances you may be entitled to convert all or a portion of your life insurance when your coverage terminates due to your employment ending, you ceasing to be in the eligible classes or policy termination. Please see your Certificate of Coverage for more details.

**Definitions:**

**Active Work/Actively At Work** means expending time and energy in the performance of regular duties for the Participating Employer at the usual place of employment, or at a location to which the Employer requires the Insured to travel and for which you are receiving Basic Earnings for such duties. You will be considered Actively At Work on each regularly scheduled non-work day if you were Actively At Work on the immediately preceding scheduled work day.

**Basic Earnings** means your basic rate of pay. It does not include overtime, bonus or any other form of additional compensation.

**Evidence of Insurability** means a written statement, application, or medical evidence of good health that, in our sole judgment, qualifies the person for coverage under the policy. We may require the person to pay the cost of providing this information.

**Guaranteed Issue Amount** means the highest amount of insurance that will be issued to a person without Evidence of Insurability.

**Can I still apply if I did not enroll as a new hire?**

It is important to enroll for RELIANCE STANDARD LIFE INSURANCE COMPANY'S Voluntary Term Life Insurance when you are first eligible. If you do not enroll as a new hire, and you decide you'd like coverage or increased coverage at a later time, you will be required to provide evidence of insurability. Your future opportunities to enroll in the plan may be limited, and you may be denied coverage.

If you enroll in the plan as a new hire, you will not have to provide medical evidence of insurability to qualify coverage up to the *Guarantee Issue Amount*. You will need to provide evidence for amounts over the Guarantee Issue Amount.

**A final note....**

This information is a brief description of the important features of the insurance plan. It is not a contract of insurance. The terms and conditions of coverage are set forth in Policy number VG 600901, on Policy Form number LRS-9388-0107. The Policy is subject to the laws of the state in which it is issued. Please keep this information as a reference.

Every effort has been made to ensure the accuracy of this enrollment brochure. The information described applies to the residents of most states, however state laws do vary. The laws of your state may affect this benefit program, but these differences generally do not reduce your benefits. This brochure is not a legal document. The contractual terms and conditions of coverage are set forth in the group policies. In the event of a discrepancy, the policies would be the determining factor. Insurance products and services are provided through Reliance Standard Life Insurance Company, which is licensed in all states (except New York), the District of Columbia, Puerto Rico, & the U.S. Virgin Islands. Reliance Standard Life Insurance Company reserves the right to change the premiums it charges for its plans.

**Marketing by OFG Financial Services, Inc.  
Townsite Plaza, Building 2, Suite 105  
120 SE 6th Avenue  
Topeka, KS 66603  
785-233-4071**

**RELIANCE STANDARD**  
LIFE INSURANCE COMPANY  
A MEMBER OF THE TOKIO MARINE GROUP

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