

Life Benefit Summary

Group Number: 00486654

About Your Benefits:

Your family depends on you in many ways and you’ve worked hard to ensure their financial security. But if something happened to you, will your family be protected? Will your loved ones be able to stay in their home, pay bills, and prepare for the future. Life insurance provides a financial benefit that your family can depend on. And getting it at work is easier, more convenient and more affordable than doing it on your own. If you have financial dependents- a spouse, children or aging parents, having life insurance is a responsible and a smart decision. Enroll today to secure their future!

What Your Benefits Cover:

	BASIC LIFE	VOLUNTARY TERM LIFE
Employee Benefit	Your employer provides \$20,000 Basic Term Life coverage for all full time employees.	\$10,000 increments to a maximum of \$500,000. See Cost Illustration page for details.
Accidental Death and Dismemberment	Your Basic Life coverage includes Accidental Death and Dismemberment coverage equal to one times the employee's life benefits.	Employee, Spouse & Child(ren) coverage. Maximum 1 times life amount.
Spouse/Domestic Partner ‡ Benefit	N/A	\$5,000 increments to a maximum of \$250,000. See Cost Illustration page for details.
Child Benefit	N/A	Your dependent children age 14 days to 23 years (25 if full time student). \$1,000 increments to a maximum of \$10,000. Subject to state limits. See Cost Illustration page for details.
Guarantee Issue: The ‘guarantee’ means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when you sign up for coverage during the initial enrollment period.	Underwriting may be required, depending on amount and/or age	We Guarantee Issue coverage up to \$150,000 per employee, \$50,000 for a spouse and \$10,000 for dependent children
Premiums	Covered by your company if you meet eligibility requirements	Increase on plan anniversary after you enter next five-year age group
Portability: Allows you to take your coverage with you if you terminate employment.	Yes, with age and other restrictions, including evidence of insurability	Yes, with age and other restrictions
Conversion: Allows you to continue your coverage after your group plan has terminated.	Yes, with restrictions; see certificate of benefits	Yes, with restrictions; see certificate of benefits
Accelerated Life Benefit: A lump sum benefit is paid to you if you are diagnosed with a terminal condition, as defined by the plan.	Yes	Yes

BASIC LIFE**VOLUNTARY TERM LIFE**

Waiver of Premiums: Premium will not need to be paid if you are totally disabled.	For employees disabled prior to age 60, with premiums waived until age 65, if conditions are met	For employees disabled prior to age 60, with premiums waived until age 65, if conditions met
Benefit Reductions: Benefits are reduced by a certain percentage as an employee ages.	50% at age 70	35% at age 65, 60% at age 70, 75% at age 75, 85% at age 80

Subject to coverage limits

‡ **Spouse coverage terminates at age 70.**

Voluntary Life Cost Illustration:

To determine the most appropriate level of coverage, as a rule of thumb, you should consider about 6 - 10 times your annual income, factoring in projected costs to help maintain your family's current life style. To help you assess your needs, you can also go to Guardian Anytime and use our Life Insurance Explorer Tool.

Employee	Monthly premiums displayed.									
	Policy Election Cost Per Age Bracket									
Policy Election Amount	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69†
\$10,000	\$.63	\$.63	\$.69	\$.99	\$ 1.66	\$ 2.60	\$ 3.94	\$ 6.34	\$ 10.60	\$ 17.04
\$20,000	\$ 1.26	\$ 1.26	\$ 1.38	\$ 1.98	\$ 3.32	\$ 5.20	\$ 7.88	\$ 12.68	\$ 21.20	\$ 34.08
\$30,000	\$ 1.89	\$ 1.89	\$ 2.07	\$ 2.97	\$ 4.98	\$ 7.80	\$ 11.82	\$ 19.02	\$ 31.80	\$ 51.12
\$40,000	\$ 2.52	\$ 2.52	\$ 2.76	\$ 3.96	\$ 6.64	\$ 10.40	\$ 15.76	\$ 25.36	\$ 42.40	\$ 68.16
\$50,000	\$ 3.15	\$ 3.15	\$ 3.45	\$ 4.95	\$ 8.30	\$ 13.00	\$ 19.70	\$ 31.70	\$ 53.00	\$ 85.20
\$60,000	\$ 3.78	\$ 3.78	\$ 4.14	\$ 5.94	\$ 9.96	\$ 15.60	\$ 23.64	\$ 38.04	\$ 63.60	\$ 102.24
\$70,000	\$ 4.41	\$ 4.41	\$ 4.83	\$ 6.93	\$ 11.62	\$ 18.20	\$ 27.58	\$ 44.38	\$ 74.20	\$ 119.28
\$80,000	\$ 5.04	\$ 5.04	\$ 5.52	\$ 7.92	\$ 13.28	\$ 20.80	\$ 31.52	\$ 50.72	\$ 84.80	\$ 136.32
\$90,000	\$ 5.67	\$ 5.67	\$ 6.21	\$ 8.91	\$ 14.94	\$ 23.40	\$ 35.46	\$ 57.06	\$ 95.40	\$ 153.36
\$100,000	\$ 6.30	\$ 6.30	\$ 6.90	\$ 9.90	\$ 16.60	\$ 26.00	\$ 39.40	\$ 63.40	\$ 106.00	\$ 170.40
\$110,000	\$ 6.93	\$ 6.93	\$ 7.59	\$ 10.89	\$ 18.26	\$ 28.60	\$ 43.34	\$ 69.74	\$ 116.60	\$ 187.44
\$120,000	\$ 7.56	\$ 7.56	\$ 8.28	\$ 11.88	\$ 19.92	\$ 31.20	\$ 47.28	\$ 76.08	\$ 127.20	\$ 204.48
\$130,000	\$ 8.19	\$ 8.19	\$ 8.97	\$ 12.87	\$ 21.58	\$ 33.80	\$ 51.22	\$ 82.42	\$ 137.80	\$ 221.52
\$150,000	\$ 9.45	\$ 9.45	\$ 10.35	\$ 14.85	\$ 24.90	\$ 39.00	\$ 59.10	\$ 95.10	\$ 159.00	\$ 255.60
\$200,000	\$ 12.60	\$ 12.60	\$ 13.80	\$ 19.80	\$ 33.20	\$ 52.00	\$ 78.80	\$ 126.80	\$ 212.00	\$ 340.80
\$250,000	\$ 15.75	\$ 15.75	\$ 17.25	\$ 24.75	\$ 41.50	\$ 65.00	\$ 98.50	\$ 158.50	\$ 265.00	\$ 426.00
\$280,000	\$ 17.64	\$ 17.64	\$ 19.32	\$ 27.72	\$ 46.48	\$ 72.80	\$ 110.32	\$ 177.52	\$ 296.80	\$ 477.12
\$300,000	\$ 18.90	\$ 18.90	\$ 20.70	\$ 29.70	\$ 49.80	\$ 78.00	\$ 118.20	\$ 190.20	\$ 318.00	\$ 511.20
\$350,000	\$ 22.05	\$ 22.05	\$ 24.15	\$ 34.65	\$ 58.10	\$ 91.00	\$ 137.90	\$ 221.90	\$ 371.00	\$ 596.40
\$400,000	\$ 25.20	\$ 25.20	\$ 27.60	\$ 39.60	\$ 66.40	\$ 104.00	\$ 157.60	\$ 253.60	\$ 424.00	\$ 681.60
\$450,000	\$ 28.35	\$ 28.35	\$ 31.05	\$ 44.55	\$ 74.70	\$ 117.00	\$ 177.30	\$ 285.30	\$ 477.00	\$ 766.80
\$500,000	\$ 31.50	\$ 31.50	\$ 34.50	\$ 49.50	\$ 83.00	\$ 130.00	\$ 197.00	\$ 317.00	\$ 530.00	\$ 852.00
Spouse/DP	Policy Election Amount									
\$5,000	\$.32	\$.32	\$.35	\$.50	\$.83	\$ 1.30	\$ 1.97	\$ 3.17	\$ 5.30	\$ 8.52
\$10,000	\$.63	\$.63	\$.69	\$.99	\$ 1.66	\$ 2.60	\$ 3.94	\$ 6.34	\$ 10.60	\$ 17.04
\$15,000	\$.95	\$.95	\$ 1.04	\$ 1.49	\$ 2.49	\$ 3.90	\$ 5.91	\$ 9.51	\$ 15.90	\$ 25.56
\$20,000	\$ 1.26	\$ 1.26	\$ 1.38	\$ 1.98	\$ 3.32	\$ 5.20	\$ 7.88	\$ 12.68	\$ 21.20	\$ 34.08
\$25,000	\$ 1.58	\$ 1.58	\$ 1.73	\$ 2.48	\$ 4.15	\$ 6.50	\$ 9.85	\$ 15.85	\$ 26.50	\$ 42.60
\$30,000	\$ 1.89	\$ 1.89	\$ 2.07	\$ 2.97	\$ 4.98	\$ 7.80	\$ 11.82	\$ 19.02	\$ 31.80	\$ 51.12
\$35,000	\$ 2.21	\$ 2.21	\$ 2.42	\$ 3.47	\$ 5.81	\$ 9.10	\$ 13.79	\$ 22.19	\$ 37.10	\$ 59.64

Voluntary Life Cost Illustration *continued*

	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69†
\$40,000	\$2.52	\$2.52	\$2.76	\$3.96	\$6.64	\$10.40	\$15.76	\$25.36	\$42.40	\$68.16
\$45,000	\$2.84	\$2.84	\$3.11	\$4.46	\$7.47	\$11.70	\$17.73	\$28.53	\$47.70	\$76.68
\$50,000	\$3.15	\$3.15	\$3.45	\$4.95	\$8.30	\$13.00	\$19.70	\$31.70	\$53.00	\$85.20
\$55,000	\$3.47	\$3.47	\$3.80	\$5.45	\$9.13	\$14.30	\$21.67	\$34.87	\$58.30	\$93.72
\$60,000	\$3.78	\$3.78	\$4.14	\$5.94	\$9.96	\$15.60	\$23.64	\$38.04	\$63.60	\$102.24
\$65,000	\$4.10	\$4.10	\$4.49	\$6.44	\$10.79	\$16.90	\$25.61	\$41.21	\$68.90	\$110.76
\$75,000	\$4.73	\$4.73	\$5.18	\$7.43	\$12.45	\$19.50	\$29.55	\$47.55	\$79.50	\$127.80
\$100,000	\$6.30	\$6.30	\$6.90	\$9.90	\$16.60	\$26.00	\$39.40	\$63.40	\$106.00	\$170.40
\$125,000	\$7.88	\$7.88	\$8.63	\$12.38	\$20.75	\$32.50	\$49.25	\$79.25	\$132.50	\$213.00
\$140,000	\$8.82	\$8.82	\$9.66	\$13.86	\$23.24	\$36.40	\$55.16	\$88.76	\$148.40	\$238.56
\$150,000	\$9.45	\$9.45	\$10.35	\$14.85	\$24.90	\$39.00	\$59.10	\$95.10	\$159.00	\$255.60
\$175,000	\$11.03	\$11.03	\$12.08	\$17.33	\$29.05	\$45.50	\$68.95	\$110.95	\$185.50	\$298.20
\$200,000	\$12.60	\$12.60	\$13.80	\$19.80	\$33.20	\$52.00	\$78.80	\$126.80	\$212.00	\$340.80
\$225,000	\$14.18	\$14.18	\$15.53	\$22.28	\$37.35	\$58.50	\$88.65	\$142.65	\$238.50	\$383.40
\$250,000	\$15.75	\$15.75	\$17.25	\$24.75	\$41.50	\$65.00	\$98.50	\$158.50	\$265.00	\$426.00
Policy Election Amount										
Child(ren)										
\$1,000	\$0.17	\$0.17	\$0.17	\$0.17	\$0.17	\$0.17	\$0.17	\$0.17	\$0.17	\$0.17
\$2,000	\$0.33	\$0.33	\$0.33	\$0.33	\$0.33	\$0.33	\$0.33	\$0.33	\$0.33	\$0.33
\$3,000	\$0.50	\$0.50	\$0.50	\$0.50	\$0.50	\$0.50	\$0.50	\$0.50	\$0.50	\$0.50
\$4,000	\$0.67	\$0.67	\$0.67	\$0.67	\$0.67	\$0.67	\$0.67	\$0.67	\$0.67	\$0.67
\$5,000	\$0.84	\$0.84	\$0.84	\$0.84	\$0.84	\$0.84	\$0.84	\$0.84	\$0.84	\$0.84
\$6,000	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00
\$7,000	\$1.17	\$1.17	\$1.17	\$1.17	\$1.17	\$1.17	\$1.17	\$1.17	\$1.17	\$1.17
\$8,000	\$1.34	\$1.34	\$1.34	\$1.34	\$1.34	\$1.34	\$1.34	\$1.34	\$1.34	\$1.34
\$9,000	\$1.50	\$1.50	\$1.50	\$1.50	\$1.50	\$1.50	\$1.50	\$1.50	\$1.50	\$1.50
\$10,000	\$1.67	\$1.67	\$1.67	\$1.67	\$1.67	\$1.67	\$1.67	\$1.67	\$1.67	\$1.67

Guarantee Issue Amount: Employee \$150,000; Spouse \$50,000; Child \$10,000

Premiums for Voluntary Life Increase in five-year increments

‡Spouse/DP coverage premium is based on Employee age. Coverage for the spouse terminates at spouse's age 70.

†Benefit reductions apply.

LIMITATIONS AND EXCLUSIONS:

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS FOR LIFE AND AD&D COVERAGE:

You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period. Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific variations. Evidence of Insurability is required on all late enrollees. This coverage will not be effective until approved by a Guardian underwriter. This proposal is hedged subject to satisfactory financial evaluation. Please refer to certificate of coverage for full plan description.

Dependent life insurance will not take effect if a dependent, other than a newborn, is confined to the hospital or other health care facility or is unable to perform the normal activities of someone of like age and sex.

Accelerated Life Benefit is not paid to an employee under the following circumstances: one who is required by law to use the benefit to pay creditors; is required by court order to pay the benefit to another person; is required by a government agency to use the payment to receive a government benefit; or loses his or her group coverage before an accelerated benefit is paid.

Voluntary Life Only:

We pay no benefits if the insured's death is due to suicide within two years from the insured's original effective date. This two year limitation also applies to any increase in benefit. This exclusion may vary according to state law. Late entrants and benefit increases require underwriting approval.

GP-I-R-LB-90, GP-I-R-EOPT-96

Guarantee Issue/Conditional Issue amounts may vary based on age and case size. See your Plan Administrator for details. Late entrants and benefit increases require underwriting approval.

For AD&D: We pay no benefits for any loss caused: by willful self-injury; sickness, disease or medical treatment; by participating in a civil disorder or committing a felony; Traveling on any type of aircraft while having duties or on that aircraft; by declared or undeclared act of war or armed aggression; while a member of any armed force (May vary by state); while driving a motor vehicle without a current, valid driver's license; by legal intoxication; or by voluntarily using a non-prescription controlled substance. Contract #GP-I-R-ADCLI-00 et al. We won't pay more than 100% of the Insurance amount for all losses due to the same accident, except as stated. The loss must occur within 365 days of the accident. Please see contract for specific definition; definition of loss may vary depending on the benefit payable.

This handout is for illustration purposes only and is an approximation, premium amounts may be amended.

Accidental Death and Dismemberment Life Cost Illustration:

AD&D coverage provides additional benefits following an accidental death or certain bodily injuries. Election amount will equal 1 times the election amount for Voluntary life election.

Employee Policy Election Amount	Monthly Premiums displayed	Spouse Policy Election Amount	Monthly Premiums displayed	Child(ren) Policy Election Amount	Monthly Premiums displayed
\$10,000	\$0.30	\$5,000	\$0.15	\$1,000	\$0.03
\$20,000	\$0.60	\$10,000	\$0.30	\$2,000	\$0.06
\$30,000	\$0.90	\$15,000	\$0.45	\$3,000	\$0.09
\$40,000	\$1.20	\$20,000	\$0.60	\$4,000	\$0.12
\$50,000	\$1.50	\$25,000	\$0.75	\$5,000	\$0.15
\$60,000	\$1.80	\$30,000	\$0.90	\$6,000	\$0.18
\$70,000	\$2.10	\$35,000	\$1.05	\$7,000	\$0.21
\$80,000	\$2.40	\$40,000	\$1.20	\$8,000	\$0.24
\$90,000	\$2.70	\$45,000	\$1.35	\$9,000	\$0.27
\$100,000	\$3.00	\$50,000	\$1.50	\$10,000	\$0.30
\$110,000	\$3.30	\$55,000	\$1.65		
\$120,000	\$3.60	\$60,000	\$1.80		
\$130,000	\$3.90	\$65,000	\$1.95		
\$150,000	\$4.50	\$75,000	\$2.25		
\$200,000	\$6.00	\$100,000	\$3.00		
\$250,000	\$7.50	\$125,000	\$3.75		
\$280,000	\$8.40	\$140,000	\$4.20		
\$300,000	\$9.00	\$150,000	\$4.50		
\$350,000	\$10.50	\$175,000	\$5.25		
\$400,000	\$12.00	\$200,000	\$6.00		
\$450,000	\$13.50	\$225,000	\$6.75		
\$500,000	\$15.00	\$250,000	\$7.50		

Benefit reductions apply.

Manage Your Benefits:

Go to www.GuardianAnytime.com to access secure information about your Guardian benefits. Your on-line account will be set up within 30 days after your plan effective date.

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 PM, EST. Refer to your member ID (social security number) and your plan number: 00486654

LIMITATIONS AND EXCLUSIONS:

A SUMMARY OF PLAN LIMITATION AND EXCLUSIONS FOR AD&D

You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period. Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific variations. This proposal is hedged subject to satisfactory financial evaluation. Please refer to policy booklet for full plan description.

Dependent life insurance will not take effect if a dependent, other than a newborn, is confined to the hospital or other health care facility or is unable to perform the normal activities of someone of like age and sex.

We pay no benefits for any loss caused: by willful self-injury; sickness, disease or medical treatment; by participating in a civil disorder or committing a felony; Traveling on any type of aircraft while having duties on that aircraft; by declared

or undeclared act of war or armed aggression; while a member of any armed force (May vary by state); while driving a motor vehicle without a current, valid driver's license; by legal intoxication; or by voluntarily using a non-prescription controlled substance. Contract #GP-I-R-ADCLI-00 et al. We won't pay more than 100% of the Insurance amount for all losses due to the same accident, except as stated.

The loss must occur within 365 days of the accident. Please see contract for specific definition; definition of loss may vary depending on the benefit payable.

This handout is for illustration purposes only and is an approximation, premium amounts may be amended.