

Life Benefit Summary

Group Number: 00498351

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 \$300,000. See Cost Illustration page for details.		
Accidental Death and Dismemberment	Your Basic Life coverage includes Enhanced Accidental Death and Dismemberment coverage.	Employee, Spouse & Child(ren) coverage. Maximum I times life amount.		
Spouse/Domestic Partner‡ Benefit	N/A	\$5,000 increments to a maximum of \$150,000. See Cost Illustration page for details.		
Child Benefit	N/A	Your dependent children age 14 days to 26 years. You may elect one of the following benefit options: \$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.	Guarantee Issue coverage up to \$20,000 per employee	We Guarantee Issue coverage up to: Employee \$150,000. Spouse \$30,000. Dependent children \$10,000. An Additional \$100,000 per employee, \$25,000 for a spouse can be obtained with a "No" response to the Health question (on your enrollment form). Evidence of Insurability is required if the elected amount exceeds the Guarantee Issue plus Additional amount.		
Premiums	Covered by your company if you meet eligibility requirements	Increase on plan anniversary after you enter next five-year age group		

Benefit information illustrated within this material reflects the plan covered by Guardian as of 02/13/2018 TUSCULUM COLLEGE ALL OTHER ELIGIBLE EMPLOYEE Benefit Summary The Guardian Life Insurance Company of America, 7 Hanover Square, New York, NY 10004

	BASIC LIFE	VOLUNTARY TERM LIFE		
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		
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		
LifeAssistSM: Provides supplemental income that is calculated based off a percentage of your Life benefit to a specified dollar amount if you are ADL disabled. Benefits are paid to the lesser of 100 months or to when waiver of premium ends.	Yes	Yes		
Benefit Reductions: Benefits are reduced by a certain percentage as an employee ages.	35% at age 65, 60% at age 70, 75% at age 75	35% at age 65, 60% at age 70, 75% at age 75		

Subject to coverage limits

[‡] Spouse coverage terminates at age 70.

Manage Your Benefits:

Go to www.GuardianAnytime.com to access secure information about Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 your Guardian benefits. Your on-line account will be set up within 30 days after your plan effective date.

Need Assistance?

PM, EST. Refer to your member ID (social security number) and your plan number: 00498351

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 view a video: <u>https://www.guardiananytime.com/gafd/wps/portal/fdhome/employees/products-coverage/life</u>

Policy Election	n Amount	Monthly premiums displayed. Cost of AD&D is included. Amount Policy Election Cost Per Age Bracket							
Employee	< 30	30–34	35-39	40-44	45–49	50–54	55-59	60–64	65–69 [†]
\$10,000	\$.95	\$1.05	\$1.35	\$2.05	\$3.25	\$4.75	\$6.95	\$11.25	\$20.15
\$20,000	\$1.90	\$2.10	\$2.70	\$4.10	\$6.50	\$9.50	\$13.90	\$22.50	\$40.30
\$30,000	\$2.85	\$3.15	\$4.05	\$6.15	\$9.75	\$14.25	\$20.85	\$33.75	\$60.45
\$40,000	\$3.80	\$4.20	\$5.40	\$8.20	\$13.00	\$19.00	\$27.80	\$45.00	\$80.60
\$50,000	\$4.75	\$5.25	\$6.75	\$10.25	\$16.25	\$23.75	\$34.75	\$56.25	\$100.75
\$60,000	\$5.70	\$6.30	\$8.10	\$12.30	\$19.50	\$28.50	\$41.70	\$67.50	\$120.90
\$70,000	\$6.65	\$7.35	\$9.45	\$14.35	\$22.75	\$33.25	\$48.65	\$78.75	\$141.05
\$80,000	\$7.60	\$8.40	\$10.80	\$16.40	\$26.00	\$38.00	\$55.60	\$90.00	\$161.20
\$90,000	\$8.55	\$9.45	\$12.15	\$18.45	\$29.25	\$42.75	\$62.55	\$101.25	\$181.35
\$100,000	\$9.50	\$10.50	\$13.50	\$20.50	\$32.50	\$47.50	\$69.50	\$112.50	\$201.50
\$110,000	\$10.45	\$11.55	\$14.85	\$22.55	\$35.75	\$52.25	\$76.45	\$123.75	\$221.65
\$120,000	\$11.40	\$12.60	\$16.20	\$24.60	\$39.00	\$57.00	\$83.40	\$135.00	\$241.80
\$130,000	\$12.35	\$13.65	\$17.55	\$26.65	\$42.25	\$61.75	\$90.35	\$146.25	\$261.95
\$140,000	\$13.30	\$14.70	\$18.90	\$28.70	\$45.50	\$66.50	\$97.30	\$157.50	\$282.10
\$150,000	\$14.25	\$15.75	\$20.25	\$30.75	\$48.75	\$71.25	\$104.25	\$168.75	\$302.25
\$160,000	\$15.20	\$16.80	\$21.60	\$32.80	\$52.00	\$76.00	\$111.20	\$180.00	\$322.40
\$170,000	\$16.15	\$17.85	\$22.95	\$34.85	\$55.25	\$80.75	\$118.15	\$191.25	\$342.55
\$180,000	\$17.10	\$18.90	\$24.30	\$36.90	\$58.50	\$85.50	\$125.10	\$202.50	\$362.70
\$190,000	\$18.05	\$19.95	\$25.65	\$38.95	\$61.75	\$90.25	\$132.05	\$213.75	\$382.85
\$200,000	\$19.00	\$21.00	\$27.00	\$41.00	\$65.00	\$95.00	\$139.00	\$225.00	\$403.00
\$210,000	\$19.95	\$22.05	\$28.35	\$43.05	\$68.25	\$99.75	\$145.95	\$236.25	\$423.15
\$220,000	\$20.90	\$23.10	\$29.70	\$45.10	\$71.50	\$104.50	\$152.90	\$247.50	\$443.30
\$230,000	\$21.85	\$24.15	\$31.05	\$47.15	\$74.75	\$109.25	\$159.85	\$258.75	\$463.45
\$240,000	\$22.80	\$25.20	\$32.40	\$49.20	\$78.00	\$114.00	\$166.80	\$270.00	\$483.60
\$250,000	\$23.75	\$26.25	\$33.75	\$51.25	\$81.25	\$118.75	\$173.75	\$281.25	\$503.75
\$260,000	\$24.70	\$27.30	\$35.10	\$53.30	\$84.50	\$123.50	\$180.70	\$292.50	\$523.90
\$270,000	\$25.65	\$28.35	\$36.45	\$55.35	\$87.75	\$128.25	\$187.65	\$303.75	\$544.05
\$280,000	\$26.60	\$29.40	\$37.80	\$57.40	\$91.00	\$133.00	\$194.60	\$315.00	\$564.20
\$290,000	\$27.55	\$30.45	\$39.15	\$59.45	\$94.25	\$137.75	\$201.55	\$326.25	\$584.35
\$300,000	\$28.50	\$31.50	\$40.50	\$61.50	\$97.50	\$142.50	\$208.50	\$337.50	\$604.50

	•	stration continue < 30	30–34	35-39	40-44	45–49	50-54	55-59	60–64	65–69 [†]
			30-34	33-39	40–44	45-49	50-54	33-39	00-04	03-07
	Policy Election	Amount								
Spouse/	\$5,000	\$.48	\$.53	\$.68	\$1.03	\$1.63	\$2.38	\$3.48	\$5.63	\$10.08
	\$10,000	\$.95	\$1.05	\$1.35	\$2.05	\$3.25	\$4.75	\$6.95	\$11.25	\$20.15
	\$15,000	\$1.43	\$1.58	\$2.03	\$3.08	\$4.88	\$7.13	\$10.43	\$16.88	\$30.23
	\$20,000	\$1.90	\$2.10	\$2.70	\$4.10	\$6.50	\$9.50	\$13.90	\$22.50	\$40.30
	\$25,000	\$2.38	\$2.63	\$3.38	\$5.13	\$8.13	\$11.88	\$17.38	\$28.13	\$50.38
	\$30,000	\$2.85	\$3.15	\$4.05	\$6.15	\$9.75	\$14.25	\$20.85	\$33.75	\$60.45
	\$35,000	\$3.33	\$3.68	\$4.73	\$7.18	\$11.38	\$16.63	\$24.33	\$39.38	\$70.53
	\$40,000	\$3.80	\$4.20	\$5.40	\$8.20	\$13.00	\$19.00	\$27.80	\$45.00	\$80.60
	\$45,000	\$4.28	\$4.73	\$6.08	\$9.23	\$14.63	\$21.38	\$31.28	\$50.63	\$90.68
	\$50,000	\$4.75	\$5.25	\$6.75	\$10.25	\$16.25	\$23.75	\$34.75	\$56.25	\$100.75
	\$55,000	\$5.23	\$5.78	\$7.43	\$11.28	\$17.88	\$26.13	\$38.23	\$61.88	\$110.83
	\$60,000	\$5.70	\$6.30	\$8.10	\$12.30	\$19.50	\$28.50	\$41.70	\$67.50	\$120.90
	\$65,000	\$6.18	\$6.83	\$8.78	\$13.33	\$21.13	\$30.88	\$45.18	\$73.13	\$130.98
	\$70,000	\$6.65	\$7.35	\$9.45	\$14.35	\$22.75	\$33.25	\$48.65	\$78.75	\$141.05
	\$75,000	\$7.13	\$7.88	\$10.13	\$15.38	\$24.38	\$35.63	\$52.13	\$84.38	\$151.13
	\$80,000	\$7.60	\$8.40	\$10.80	\$16.40	\$26.00	\$38.00	\$55.60	\$90.00	\$161.20
	\$85,000	\$8.08	\$8.93	\$11.48	\$17.43	\$27.63	\$40.38	\$59.08	\$95.63	\$171.28
	\$90,000	\$8.55	\$9.45	\$12.15	\$18.45	\$29.25	\$42.75	\$62.55	\$101.25	\$181.35
	\$95,000	\$9.03	\$9.98	\$12.83	\$19.48	\$30.88	\$45.13	\$66.03	\$106.88	\$191.43
	\$100,000	\$9.50	\$10.50	\$13.50	\$20.50	\$32.50	\$47.50	\$69.50	\$112.50	\$201.50
	\$105,000	\$9.98	\$11.03	\$14.18	\$21.53	\$34.13	\$49.88	\$72.98	\$118.13	\$211.58
	\$110,000	\$10.45	\$11.55	\$14.85	\$22.55	\$35.75	\$52.25	\$76.45	\$123.75	\$221.65
	\$115,000	\$10.93	\$12.08	\$15.53	\$23.58	\$37.38	\$54.63	\$79.93	\$129.38	\$231.73
	\$120,000	\$11.40	\$12.60	\$16.20	\$24.60	\$39.00	\$57.00	\$83.40	\$135.00	\$241.80
	\$125,000	\$11.88	\$13.13	\$16.88	\$25.63	\$40.63	\$59.38	\$86.88	\$140.63	\$251.88
	\$130,000	\$12.35	\$13.65	\$17.55	\$26.65	\$42.25	\$61.75	\$90.35	\$146.25	\$261.95
	\$135,000	\$12.83	\$14.18	\$18.23	\$27.68	\$43.88	\$64.13	\$93.83	\$151.88	\$272.03
	\$140,000	\$13.30	\$14.70	\$18.90	\$28.70	\$45.50	\$66.50	\$97.30	\$157.50	\$282.10
	\$145,000	\$13.78	\$15.23	\$19.58	\$29.73	\$47.13	\$68.88	\$100.78	\$163.13	\$292.18
	\$150,000	\$14.25	\$15.75	\$20.25	\$30.75	\$48.75	\$71.25	\$104.25	\$168.75	\$302.25

Voluntary Life Cost Illustration continued

	< 30	30–34	35–39	40–44	45–49	50–54	55-59	60–64	65–69 †	
Policy Election Amount										
Child(ren)										
\$10,000	\$2.00	\$2.00	\$2.00	\$2.00	\$2.00	\$2.00	\$2.00	\$2.00	\$2.00	

Refer to Guarantee Issue row on page above for Voluntary Life GI+AA amounts.

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.

Manage Your Benefits:

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Need Assistance?

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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.

A person is ADL-disabled if he or she is (a) physically unable to perform two or more ADLs without continuous physical assistance; or (b) cognitively impaired, and requires verbal cueing to protect himself/herself or others. ADLs are bathing, dressing, toileting, transferring, continence, and eating.

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-1-R-LB-90, GP-1-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 er 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-ADCL1-00 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 a specified period of time of the accident. Please see contract for specific definition; definition of loss may vary depending on the benefit payable.

Enhanced AD&D: A loss may be defined as death, quadriplegia, loss of speech and hearing, loss of cognitive function, comatose state in excess of one month, hemiplegia or paraplegia. The loss must occur within a specified period of time of the accident. Please see contract for specific definition; definition of loss may vary depending on the benefit payable.

This handout is for illustrative purposes only and is an approximation. If any discrepancies between this handout and your paycheck stub exist, your paycheck stub prevails.