

Employee Group Term Life Certificate of Insurance

Securian Life Insurance Company • A Stock Company
400 Robert Street North • St. Paul, Minnesota 55101-2098

Effective March 31, 2025

Basic Life Insurance

POLICYHOLDER: University of Rochester

POLICY NUMBER: 70466

Read Your Certificate Carefully

If you meet the eligibility and enrollment requirements herein, you are insured under the group policy shown on the specifications page. This certificate contains the principal provisions of the group policy that affect you. In the event of a conflict between this certificate and the group policy, the terms of this certificate control. You may

examine the group policy at the principal office of the policyholder during regular working hours.

The policy permits the group policyholder to change, reduce, restrict or terminate your rights or benefits under the policy without your consent. Such change, reduction, restriction, or termination may occur at a time when your health status has changed and may affect your ability to procure individual coverage.

Renee D. Montz

Secretary

Stephen M. Jaffe

President

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GROUP TERM LIFE CERTIFICATE OF INSURANCE • NONPARTICIPATING •
ANNUALLY RENEWABLE • CONTRIBUTORY AND NON-CONTRIBUTORY

Certificate Specifications Page

Securian Life Insurance Company
400 Robert Street North • St. Paul, Minnesota 55101-2098

GENERAL INFORMATION

POLICYHOLDER: University of Rochester

POLICY NUMBER: 70466

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Securian Life by the policyholder for inclusion in the policy.

POLICY SITUS: The policy was issued and delivered in New York.

POLICY EFFECTIVE DATE: July 1, 2024. This specifications page represents the plan in effect as of March 31, 2025.

This certificate and/or certificate specifications page replaces any and all certificates and/or certificate specifications pages previously issued to you under the group policy. Please replace any certificate and/or certificate specifications page previously issued to you with this new certificate and/or specifications page.

GROUP: The group is composed of active employees and certain retirees of the policyholder and its associated companies in the following classes:

- Group 1 All regular full-time faculty or staff members except individuals represented by SEIU collective bargaining agreements.
- Group 2 All regular part-time faculty or staff members except individuals represented by SEIU collective bargaining agreements.
- Group 3a All full-time Residents and Fellows of Strong Memorial Hospital.
- Group 3b All part-time Residents and Fellows of Strong Memorial Hospital.

NOTE: An employee is only eligible to participate in Groups 5-7 if they were eligible for coverage under the policy as an active employee.

- Group 5 Closed group of grandfathered retirees who retired prior to July 1, 1996.
- Group 6 Open group of grandfathered retirees of the University of Rochester who were at least 50 years old or had 10 years of service as of July 1, 1996 (full-time)
- Group 7 Open group of grandfathered retirees of the University of Rochester who were at least 50 years old or had 10 years of service as of July 1, 1996 (part-time)
- Group 8 University of Rochester President

All new employees of the employer will be added to such group and classes for which they become eligible.

The following terms, as used in this policy, are defined as follows:

Regular: Period of appointment in nonexempt and/or professional, administrative, and supervisory (PAS) job classifications that is expected to exceed four months, unless otherwise defined in collective bargaining agreements; period of appointment for faculty-instructional staff that is at least one year (or one academic year) or, if shorter, is expected to be renewed. Appointments primarily for furthering education (for example, graduate assistants) are not considered regular appointments.

Full-time: For nonexempt job classifications (excluding those in PAS job classifications paid hourly): a regular weekly work schedule of at least 35 hours; for all professional, administrative, and supervisory (PAS) job classifications (including PAS paid on an hourly basis): a weekly work schedule of 40 hours or more; for faculty: a normal full teaching and research load as defined for the faculty by the college or school concerned.

Part-time: A regular weekly or monthly schedule which is less than that required for full-time status but generally not less than 17.5 hours per week in the case of those in nonexempt and/or professional, administrative, and supervisory (PAS) job classifications. For faculty, it indicates that the individual carries at least half the normal (full) teaching and research load as defined for faculty by the college or school concerned.

NO DOUBLE COVERAGE:

A person cannot be covered under more than one class. A person cannot be covered as both an active employee and a retiree.

ENROLLMENT PERIOD:

Not applicable for noncontributory insurance.

WAITING PERIOD:

None

**MINIMUM HOURS
PER WEEK REQUIRED:**

See definitions above in GROUP section.

PLAN OF INSURANCE

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

University-paid Life Insurance

<u>Eligible Class</u>	<u>Amount of Life Insurance</u>
Group 1	An amount of insurance equal to 50% of the insured's annual earnings, subject to a minimum of \$15,000 and a maximum of \$50,000.
Group 2	An amount of insurance equal to 50% of the insured's annual earnings, subject to a minimum of \$7,500 and a maximum of \$25,000.
Group 3a	An amount of insurance equal to 150% of the insured's annual earnings, subject to a minimum of \$15,000 and a maximum of \$50,000.
Group 3b	An amount of insurance equal to 150% of the insured's annual earnings, subject to a minimum of \$7,500 and a maximum of \$25,000.
Group 5	Frozen amounts ranging from \$2,500 to \$10,000 as indicated on the census submitted to Securian Life from the policyholder.

Group 6	\$10,000
Group 7	\$5,000
Group 8	An amount of insurance equal to 150% of the insured's annual earnings to a maximum of \$2,000,000.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

CONTRIBUTORY/NONCONTRIBUTORY: All insurance is noncontributory insurance.

GUARANTEED ISSUE AMOUNT: The guaranteed issue is the maximum amount of insurance an employee can receive without evidence of insurability when first eligible under the plan provided enrollment is made within the enrollment period. The amounts are as follows:

All University-paid insurance is guaranteed issue.

**EFFECTIVE DATE OF INCREASES
AND DECREASES DUE TO CHANGE
IN ELIGIBLE CLASS OR EARNINGS:**

The date of the change in eligible class or earnings. All increases are subject to the actively at work requirement.

ADDITIONAL INFORMATION

ELECTION CHANGES: Not applicable

EVIDENCE OF INSURABILITY: Evidence of insurability is not required for any insurance under this policy.

CERTIFICATE SUPPLEMENTS (found later in this document):

Accelerated Benefits	Applies to all Groups
Accidental Death and Dismemberment	See certificate supplement for applicable classes and benefit details.
Portability	Applies to Groups 1, 2, 3a, 3b, and 8

Definitions

application

Your application for insurance under the group policy and, if required, your evidence of insurability application.

associated company

Any company which is a subsidiary or affiliate of the policyholder which is designated by the policyholder and agreed to by us to participate under the group policy.

contributory insurance

Insurance for which you are required to make premium contributions.

earnings

For an hourly-paid staff member, annual salary is standard annual hours times the hourly rate of pay; for a salaried faculty or staff member, annual salary is 12 times the regular monthly salary or 24 times the regular semi-monthly salary. For faculty members under the School of Medicine and Dentistry Master Clinical Faculty Compensation Plan, annual salary means "Targeted Salary."

employee

An individual who is employed by the policyholder or by an associated company. A sole proprietor will be considered the employee of the proprietorship. A partner in a partnership will be considered an employee so long as the partner's principal work is the conduct of the partnership's business. The term employee does not include temporary employees or corporate directors who are not otherwise employees.

employer

The policyholder or any designated associated companies.

evidence of insurability

Evidence satisfactory to us of the good health of the prospective insured and any other underwriting information we require.

insured

A person who is eligible for and becomes insured according to the terms of this certificate, including any person insured by supplement to this certificate.

non-work day

A day on which you are not regularly scheduled to work, including scheduled time off for vacations, personal holidays, weekends and holidays, and approved leaves of absence for non-medical reasons.

Non-work day does not include time off for medical leave of absence, temporary layoff, employer suspension of operations in total or in part, strike, and any time off due to sickness or injury including sick days, short-term disability, or long-term disability.

noncontributory insurance

Insurance for which you are not required to make premium contributions.

policyholder

The owner of the group policy as shown on the specifications page.

waiting period

The period, if any, of continuous employment with the employer required prior to becoming eligible for coverage under this certificate. The waiting period is shown on the specifications page. You are not eligible until the first day following the waiting period.

we, our, us

Securian Life Insurance Company.

you, your

An insured employee.

General Information

What is your agreement with us?

If you meet the eligibility and enrollment requirements, you are insured under the group policy shown on the specifications page. Your application as defined under this certificate is a part of this certificate. This certificate contains the principal provisions of the group policy that affect your life insurance coverage. Coverage is provided under the group policy issued to the group policyholder. Only provisions contained in the policy, this certificate, any certificate supplement, amendment or endorsement signed by the policyholder and us, or in the copy of the policyholder's application shall affect the rights of you or your beneficiary.

Any statements made in your application as defined in this certificate will be considered representations and not warranties. Also, any statement you make will not be used to contest your insurance unless the statement is contained in the application, a copy of which is or has been furnished to you or to your beneficiary.

Can this certificate be amended?

Yes. Any amendment will be without prejudice to any claim incurred for benefits prior to the date of the amendment.

Who is eligible for insurance?

You are eligible if you:

- (1) are a member of the eligible group and of an eligible class as shown on the specifications page; and
- (2) work for the employer for at least the number of hours per week shown as the minimum hours per week requirement on the specifications page; and
- (3) have satisfied the waiting period as shown on the specifications page; and
- (4) meet the actively at work requirement as shown in the section entitled "What is the actively at work requirement?".

Are employees of associated companies eligible for insurance under the group policy?

Yes. Employees of associated companies may be eligible for insurance under the group policy. The policyholder represents any associated company in all transactions pertaining to the group policy. The policyholder's acts or omissions and every notice given by us to the policyholder shall be binding on every associated company. When an associated company ceases its participation under the policy, the policy shall be considered to be terminated for all employees of the associated company. All provisions related to the policy terminating will apply to such employees.

Are retired employees eligible for insurance?

If the policyholder's plan of insurance, as reflected in the specifications page, does not specifically provide insurance for retired employees, a retired employee shall not be eligible to become insured, nor have his or her insurance continued. If the policyholder's plan of insurance specifically provides insurance for retired employees, the minimum hours per week and actively at work requirements will not apply to such persons.

What is the actively at work requirement?

To be eligible to become insured or to receive an increase in the amount of insurance, you must be actively at work, fully performing your customary duties for your regularly scheduled number of hours at the employer's normal place of business, or at other places the employer's business requires you to travel.

If you are not working due to illness or injury you do not meet the actively at work requirement. If you are receiving sick pay, short-term disability benefits or long-term disability benefits, you do not meet the actively at work requirement.

If you are not actively at work on the date coverage would otherwise begin, or on the date an increase in your amount of insurance would otherwise be effective, you will not be eligible for the coverage or increase until you return to active work.

However, if the absence is on a non-work day, coverage will not be delayed provided you were actively at work on the work day immediately preceding the non-work day.

Except as otherwise provided for in this certificate, you are eligible to continue to be insured only while you remain actively at work.

Any insurance or increase in insurance which is elected or put in force while you are not actively at work will not be eligible for claim payment. You will receive a refund of premium for any contributory insurance for which you were not eligible.

When will we require evidence of insurability?

The specifications page describes when evidence of insurability is required.

When does insurance become effective?

Insurance becomes effective on the date that all of the following conditions have been met:

- (1) you meet all eligibility requirements; and
- (2) for contributory insurance, you apply for the insurance in accordance with the application methods agreed upon by the policyholder and us; and
- (3) we are satisfied with your evidence of insurability, if we require evidence.

Can your coverage be continued during sickness, injury, leave of absence or temporary layoff?

Yes. Insurance may, according to uniform practices established by the employer under its plan of insurance, be continued on an insured employee who is not actively at work due to sickness, injury, leave of absence or temporary layoff, including the employer's limits on the length of continuation allowed for the type of absence. Continuation is contingent upon continued premium payment and is subject to the following maximum time frames:

- (1) If you are on a medical leave of absence and receiving benefits under the Sick Leave Plan for Short-Term Disability and Worker's Compensation, insurance may be continued for up to six months while you are receiving benefits.
- (2) If you are on a medical leave of absence and receiving Long Term Disability benefits under the employer's plan, insurance may be continued for the duration of the time you are receiving Long Term Disability benefits.
- (3) If you are on an approved non medical NYS Paid Family Leave or Military Leave, insurance may be continued for the duration of the leave.
- (4) If you are placed on an indefinite layoff and you have two more more years of service, insurance may be continued for up to 12 months from the last day you were actively at work. If you have less than two years of service at the time of

placement on an indefinite layoff, insurance will terminate as of the effective date of the layoff.

- (5) If you are on any other approved non-medical leave of absence or temporary layoff, insurance may not be continued beyond 12 months from the last day you were actively at work.

Coverage during a leave of absence and upon return from a leave of absence shall meet all state and federal requirements. The above limits will be expanded if necessary in order to meet such requirements.

Premiums

When and how often are your premium contributions due?

Unless the policyholder and we have agreed to some other premium payment procedure, any premium contributions you are required to make for contributory insurance are to be paid by you to the policyholder on a regular, periodic basis. We apply premiums consecutively to keep the insurance in force.

How is the premium determined?

The premium will be the applicable premium rate multiplied by the number of \$1,000 units of insurance in force on the date premiums are due. The premium may also be computed by any other method on which the policyholder and we agree.

We may change the premium rate:

- (1) on any premium due date following the expiration of any rate guarantee period; or
- (2) anytime the policy terms are amended or the total amount of insurance in force changes by 10% or more.

Premiums for contributory coverage are based on your attained age and increase with age. We will notify the policyholder 31 days in advance of a change in premium rates.

Death Benefit

What is the amount of the death benefit?

The amount of the death benefit is equal to the amount of insurance for which you are insured, based on the plan of insurance applicable to your class as described on the specifications page, and your elections.

Can you request a change in the amount of your contributory insurance?

Yes. The specifications page describes when changes can be requested, when evidence of insurability will be required for such changes, and when the changes will become effective.

When will the death benefit be payable?

We will pay the death benefit upon receipt at our home office of written proof satisfactory to us as to both substance and form that you died while insured under this certificate. All payments by us are payable from our home office. The death benefit will be paid in a single sum or by any other method agreeable to us and the beneficiary.

To whom will we pay the death benefit?

We will pay the death benefit to the beneficiary or beneficiaries. You name a beneficiary to receive the death benefit to be paid at your death. You may name one or more beneficiaries. You can change the beneficiary designation at any time, provided all of the following are true:

- (1) your coverage is in force; and
- (2) we have written consent of all irrevocable beneficiaries; and
- (3) you have not assigned the ownership of your insurance.

A beneficiary designation must be made in writing or by any other method made available under the plan. Any beneficiary designation shall take effect as of the date it is signed, but will not affect any payment we make or action we take before receiving the designation.

You may also choose to name a beneficiary that you cannot change without the beneficiary's written consent. This is called an irrevocable beneficiary.

If there is more than one beneficiary, each will receive an equal share, unless you have requested another method in your beneficiary designation. To receive the death benefit, a beneficiary must be living at the time of your death. In the event a beneficiary is not living at the time of your death, that beneficiary's portion of the death benefit shall be equally distributed to the remaining surviving beneficiaries. In the event of the simultaneous deaths of you and a beneficiary, the death benefit will be paid as if you survived the beneficiary.

If there is no eligible beneficiary, or if you do not name one, we will pay the death benefit to:

- (1) your lawful spouse if living; otherwise
- (2) your natural or legally adopted child (children) in equal shares, if living; otherwise
- (3) your parents in equal shares, if living; otherwise
- (4) your natural or legally adopted siblings in equal shares, if living; otherwise
- (5) your estate.

Termination

When does your coverage terminate?

Your coverage ends on the earliest of the following:

- (1) the date the group policy ends; or

- (2) the date you no longer meet the eligibility requirements; or
- (3) the date the group policy is amended so you are no longer eligible; or
- (4) 31 days (the grace period) after the due date of any premium contribution which is not paid; or
- (5) the last day for which premium contributions have been paid following your written request to cease participation under this certificate.

Can your insurance be reinstated after termination?

Yes. When your coverage terminates because you are no longer eligible, and you become eligible again within three months after the date your coverage under this certificate terminated, your prior coverage may be reinstated, without evidence of insurability. If you die prior to our receipt of your reinstatement application and the required premium, no benefit will be paid.

When does the group policy terminate?

The policyholder may terminate the group policy by giving us 31 days prior written notice. We reserve the right to terminate the group policy on the earlier of the following to occur:

- (1) 31 days (the grace period) after the due date of any premiums which are not paid; or
- (2) any policy anniversary so long as we provide the policyholder 31 days notice of our intent to terminate the group policy.

Conversion Right

What is the conversion right?

You can convert this insurance to a new individual life insurance policy if all or part of your life insurance under the group policy terminates.

You may convert up to the full amount of terminated life insurance, including any supplemental life insurance, if termination or reduction occurs because:

- (1) you move from one existing eligible class to another;
- (2) you are no longer in an eligible class;
- (3) your employment terminates;
- (4) the policy is changed to reduce or terminate the insurance for you; or
- (5) your employment is terminated by the employer because you are totally and permanently disabled.

Can you convert your life insurance if the group policy terminates?

You may convert your insurance if the group policy is terminated. If the group policy terminates, you are eligible to convert an amount up to the amount of insurance you had just prior to the termination, less any amount you may become eligible for under any policyholder sponsored group policy within 45 days of the termination.

Can you convert your life insurance if your coverage reduces due to age?

You may convert any portion of your insurance which is reduced on or after the attainment of age sixty in any increment or series of increments totaling twenty percent or more of the amount of insurance in force under the group policy prior to the first reduction at age sixty.

To what type of policy can you convert?

You may convert your insurance to any type of individual policy of life insurance then customarily issued by us or by one of our associated companies, except term insurance. The individual policy will not include any supplemental benefits, including, but not limited to, any disability benefits, accidental death and dismemberment benefits, or accelerated benefits.

If your coverage terminates because you are totally and permanently disabled, you may convert your insurance to a policy of life insurance then customarily issued by us or by one of our associated companies, including term insurance, by paying premiums directly to us.

Preliminary Term Insurance

You may also elect to have issued to you a policy of term life insurance for a period of one year prior to converting to a policy of permanent insurance with us or by one of our associated companies. The premium rate for the preliminary term insurance may be higher than that paid under the group policy.

When must election to convert insurance be made?

You will be notified of your right to convert your group life insurance. If notification is made within 15 days before or after the event that results in termination or reduction of the group life coverage, you will have 31 days from the date the insurance terminates to elect conversion. If the notice is given more than 15 days but less than 90 days after the event, the time allowed for the exercise of the conversion privilege shall be extended to 45 days after such notice is sent. If the notice is not given within 90 days, the time allowed for the exercise of the conversion privilege expires 90 days after the terminating event. Such notice shall be mailed to you by us or an entity the policyholder designates at your last known address.

The conversion right is not available if your coverage under the group policy terminates due to your failure to make, when due, required premium contributions.

How do you convert your insurance?

You convert your insurance by applying for an individual policy and paying the first premium within the time period allowed for such election. No evidence of insurability will be required.

How is the premium for the individual policy determined?

We base the premium for the individual policy on the plan of insurance, your age, and the class of risk to which you belong under the group policy on the date of conversion.

When is the individual policy effective?

When all conversion election requirements are satisfied, the individual policy takes effect on the date the group insurance provided under the group policy terminates.

What happens if you die during the conversion election period?

If you die during the conversion election period or any extended notice period, we will pay a death benefit regardless of whether or not an application for coverage under an individual policy has been submitted. The death benefit will be the amount of insurance you would have been eligible to convert under the terms of the conversion right section. If you have completed a conversion application, we will pay the beneficiary designated on the conversion application. If you have not completed a conversion application, we will pay the beneficiary under your group insurance coverage.

We will return any premium you paid for an individual policy converted from this group insurance to your beneficiary as described above. In no event will we be liable under both the group policy and the individual policy.

Additional Information

What if your age has been misstated?

If your age has been misstated, the death benefit payable will be that amount to which you are entitled based on your correct age. An equitable premium adjustment from any benefit payable will be made so that the actual premium required at your correct age is paid. If your correct age is such that no benefit is payable, you will receive a refund of premium for the period your eligibility would have ended.

Is there any cash value to this coverage?

No. This is term life insurance and it does not build cash value.

What is the suicide limitation?

If you commit suicide within two years from the effective date of any contributory life insurance, our liability with respect to that coverage will be limited to an amount equal to the premiums paid for the coverage.

If there has been an increase in your amount of contributory life insurance for which you were required to apply or for which we required evidence of insurability, and if you die by suicide within two years of the effective date of the increase, our liability with respect to that increase will be limited to the premiums paid and attributable to such increase.

Can your insurance coverage be contested?

Yes. Your coverage will become incontestable after two years from your original effective date of coverage or the effective date of any increase in coverage you applied for, except for the non-payment of premiums by the policyholder. If we discover a material misrepresentation, your coverage may be contested.

Any statements you make in your application as defined under this certificate will be considered representations and not warranties. Also, any statement you make will not be used to contest the validity of your insurance unless the statement was made after such insurance has been in force for two years during the insured's lifetime and in no event unless the statement is contained in the application, a copy of which is or has been furnished to you or your beneficiary.

Who is the owner of this coverage?

Unless assigned otherwise, you, the insured employee, are the owner of all coverage provided under your certificate. Only the owner has the right to exercise ownership rights under the certificate, including but not limited to naming or changing a beneficiary, changing the amount of insurance, assigning any or all ownership rights, converting coverage to an individual policy and terminating the coverage.

Can your insurance be assigned?

Yes. However, we will not be bound by an assignment of the certificate or of any interest in it unless it is made as a written instrument, and you file the original instrument or a certified copy with us at our home office. The assignment shall take effect as of the date it is signed, but will not affect any payment we make or action we take before receiving the assignment.

We are not responsible for the validity of any assignment. You are responsible for ensuring that the assignment is legal in your state and that it accomplishes your intended goals. If a claim is based on an assignment, we may require proof of interest of the claimant. A valid assignment will take precedence over any claim of a beneficiary.

Can a change in ownership for a certificate be requested?

Yes. A change in ownership is a type of assignment. All provisions for assignments apply to ownership changes.

Is the policyholder required to maintain records?

Yes. The policyholder is required to maintain adequate records of any information necessary for us to administer the group policy, and shall provide access to such records when required for us to administer the policy.

If an administrative or clerical error is made in keeping records on or administering the insurance under the group policy, it will not affect otherwise valid insurance. Any clerical error is subject to the incontestability clause. A

clerical or administrative error, however, does not continue insurance which is otherwise stopped, make insurance effective when it should not have been or change the amount of insurance provided by the provisions of the policy and no claim shall be paid on amounts put into effect as a result of a past clerical or administrative error. If an error causes a change in premium payment, a fair adjustment will be made.

Will the provisions of this certificate conform with state law?

Yes. If any provision in this certificate, or in the provisions of the group policy, is in conflict with the applicable laws of New York, we will file a revised provision for approval. Any amendment will be signed by the policyholder and us. Nothing in the group policy invalidates or impairs any rights or benefits as stated in this certificate or granted by New York law.

Accelerated Benefits Certificate Supplement

Securian Life Insurance Company
400 Robert Street North • St. Paul, Minnesota 55101-2098

Benefits received under this Accelerated Benefits Certificate Supplement may be taxable. You should seek assistance from a personal tax advisor prior to requesting an accelerated payment of death benefits.

General Information

This supplement is subject to every term, condition, exclusion, limitation, and provision of the certificate unless otherwise expressly provided for herein.

What does this supplement provide?

This supplement provides for the accelerated payment of either the full or a partial amount of your death benefit provided under your certificate. If you have a terminal condition as defined in this supplement, you may request an accelerated payment of the applicable death benefit. An accelerated payment will not include any accidental death or dismemberment benefit payable under an Accidental Death and Dismemberment Certificate Supplement. You must give notice of claim while living and while your life insurance coverage is in force to be eligible for consideration of an accelerated benefit.

What is a terminal condition?

A terminal condition is a condition caused by sickness or accident which directly results in a life expectancy of 12 months or less. We must be given medical evidence in substance and in form that satisfies us that the insured has a terminal condition. That evidence must include certification by a physician. For purposes of this supplement, a physician is an individual who is licensed to practice medicine or treat illness in the state in which treatment is received. The physician cannot be you or your spouse, children, parents, grandparents, grandchildren, brothers or sisters, or the spouse of any such individuals.

Accelerated Benefit

Who may request an accelerated payment of the death benefit?

You may request an accelerated payment of the insurance on your life.

When can an accelerated benefit be requested?

An accelerated benefit can be requested any time, provided the following conditions are met:

- (1) the insurance is in force and all premiums due are fully paid; and
- (2) you have not assigned and are the sole owner of the certificate; and

- (3) the certificate does not have an irrevocable beneficiary.

Is there a minimum or maximum death benefit eligible for an accelerated benefit?

Yes. The minimum death benefit to be eligible for an accelerated benefit under this supplement is the lesser of 25% of the insured's amount of insurance or \$5,000. The maximum death benefit that can be accelerated is \$1,000,000.

Is a partial accelerated benefit available?

Yes. You may choose to accelerate only a portion of your death benefit, providing the remaining amount of insurance is the lesser of 25% of the insured's amount of insurance or \$5,000. This is called a partial accelerated benefit.

You may reapply for the payment of the remaining amount of insurance at any time. However, the total amount of the death benefit for all accelerated benefit payments for an insured cannot exceed \$1,000,000. We may ask for further evidence satisfactory to us in substance and in form that the insured meets all requirements for the accelerated benefit.

When will we pay an accelerated benefit?

We will pay an accelerated benefit upon receipt at our home office of written proof satisfactory to us in substance and in form that the insured meets the requirements herein.

The accelerated benefit will be paid in a single sum or by any other method agreeable to you and us.

To whom will we pay accelerated benefits?

We will pay the accelerated benefit to you unless you validly assign it otherwise. If you die before we issue payment of an accelerated benefit to you, we will pay the life insurance benefits to your life insurance beneficiary(s).

What is the effect on the insured's coverage of the receipt of an accelerated benefit?

If you elect to accelerate the full amount of your death benefit, your coverage and all other benefits under the certificate and any certificate supplements will end. If a partial accelerated benefit is chosen, coverage will remain in force and premiums will be reduced accordingly. The remaining amount of insurance under the certificate will be the full amount of insurance minus the amount of insurance that was accelerated.

Termination

When does your coverage under this supplement terminate?

Your accelerated benefits coverage terminates on the earliest of:

- (1) the date you are no longer insured for life insurance under the certificate; or
- (2) the date the accelerated benefits coverage is terminated for the policyholder's plan; or
- (3) the date the group policy is terminated.

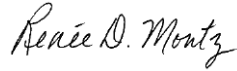
Additional Information

Is the request for an accelerated benefit voluntary?

Yes. An accelerated benefit will be made available on a voluntary basis only. An accelerated benefit under this supplement is not intended to cause an involuntary reduction of the death benefit ultimately payable to the beneficiary.

Do we have the right to obtain independent medical verification?

Yes. Although you are responsible for submitting proof satisfactory to us that you meet the requirements for the accelerated benefit, we do retain the right to have an insured medically examined at our expense to verify the insured's medical condition. We may do this as often as reasonably required while an accelerated benefit is being considered or paid.



Secretary



President

Accidental Death and Dismemberment
Certificate Supplement

Securian Life Insurance Company
400 Robert Street North • St. Paul, Minnesota 55101-2098

General Information

This certificate supplement is issued in consideration of the required premium and is subject to every term, condition, exclusion, limitation, and provision of the certificate unless otherwise expressly provided for herein. Coverage under this supplement will not be included in any insurance issued under the conversion right section of the certificate.

What does this supplement provide?

This supplement provides accidental death and dismemberment coverage subject to all terms, conditions, and exclusions herein.

Who is eligible for insurance under this supplement?

The following classes are eligible to be insured under this supplement:

Groups 1, 2, 3a, 3b, and 8

What is the amount of insurance?

The amount of insurance for each insured is based on his or her class, as follows:

Groups 1, 2, 3a, 3b	An amount equal to the amount of university-paid life insurance for which the employee is insured under the group policy.
Group 8	\$50,000

Basic insurance is noncontributory insurance.

When does insurance under this supplement become effective?

Insurance becomes effective on the date that all of the following conditions have been met:

- (1) the insured meets all eligibility requirements; and
- (2) for contributory coverage, application is made in accordance with the application methods agreed upon by the policyholder and us.

Accidental Death and Dismemberment (AD&D) Benefit

What does accidental death or dismemberment by accidental injury mean?

Accidental death and dismemberment coverage is limited coverage. This means this coverage will provide benefits only when an insured's loss, death, or dismemberment results, directly and independently from all other causes, from an accidental bodily injury which was unintended, unexpected, and unforeseen. Loss, death, or dismemberment caused by, resulting from, or where there is contribution from, bodily or mental or emotional disorders, or sickness are not considered accidental bodily injuries and are not covered under this supplement. The bodily injury must be the sole cause of the insured's death or dismemberment. The injury and accidental loss, death or dismemberment must occur while the insured's coverage is in force. The insured's loss, death or dismemberment must occur within 90 days after the

In no event will we pay the accidental death or dismemberment benefit where your accident, injury, loss, death, or dismemberment is caused directly or indirectly by, results in whole or in part from or during, or there is contribution from, any of the following:

- (1) intentionally self-inflicted injury; or
- (2) suicide or attempted suicide; or
- (3) your participation in a felony; or
- (4) your being intoxicated or under the influence of any narcotic unless administered on the advice of a physician; or
- (5) aviation, other than as a fare-paying passenger on a scheduled or charter flight operated by a scheduled airline; or
- (6) war or any act of war, whether declared or undeclared.

What is the amount of the accidental death and dismemberment benefit?

The amount of the benefit shall be a percentage of the amount of insurance shown on the specifications page. The percentage is determined by the type of loss as shown in the following table:

TYPE OF LOSS	PERCENT OF AMOUNT OF INSURANCE
Life	100%
Both Hands or Both Feet	100%
Sight of Both Eyes.....	100%
One Hand and One Foot.....	100%

One Foot and Sight of One Eye.....	100%
One Hand and Sight of One Eye	100%
Sight of One Eye	50%
One Hand or One Foot.....	50%

Loss of hands or feet means complete severance at or above the wrist or ankle joints. Loss of sight means the entire and irrecoverable loss of sight which cannot be corrected by medical or surgical treatment or by artificial means.

Under no circumstance will more than one payment be made for the loss of the same limb, eye, hand, foot or sight, if one payment has already been made for that loss.

Benefits may be paid for more than one accidental loss but the total amount of AD&D insurance payable under this supplement for any one accident will never exceed the full amount of an insured's AD&D insurance.

What notice of claim must be provided?

Written notice of claim must be given to us within 20 days of the date of a loss resulting from a covered accident. However, failure to give notice within the specified time frame does not reduce or invalidate a claim if it was not reasonably possible to give such notice and the notice was provided as soon as reasonably possible.

Will claim forms be provided?

Upon receipt of notice of claim, we will provide a claim form. If the claim form is not provided within 15 days after the insured has given notice of claim, we will deem the insured to have complied with the requirements for filing proof of a loss resulting from a covered accident if the insured submits, within the time period for filing proof of the loss, written proof of the occurrence, character and extent of the loss for which claim is made which is satisfactory to us.

When is proof of a loss resulting from a covered accident required?

Written proof of a loss resulting from a covered accident satisfactory to us must be provided to us within 120 days of the date of the loss.

Failure to provide proof of the loss within this time will not invalidate or reduce a claim if it was not reasonably possible to provide proof within this 120 day period, provided such proof was furnished as soon as reasonably possible.

When will the accidental death and dismemberment benefit be payable?

We will pay the AD&D benefit within 60 days after receipt at our home office of written proof satisfactory to us as to both substance and form that an insured died or suffered dismemberment as a result of an accidental injury. All payments by us are payable from our home office. The benefit will be paid in a single sum or by any other method agreeable to us and the beneficiary.

To whom do we pay the benefit?

In the case of your accidental death, we will pay the accidental death benefit to the beneficiary or beneficiaries under the terms of the group policy. The benefit for other losses sustained by you will be paid to you, if living, otherwise to your estate.

What are our physical examination rights?

After an insured has filed a claim and provided at his or her expense all requested claim forms and records, we have the right to have the insured examined by a physician of our choice and at our expense. This right may be exercised as often as reasonably necessary while an insured has a claim pending with us. We also have the right and opportunity to make an autopsy in the case of death unless prohibited by law.

Termination

When does an insured's coverage under this supplement terminate?

An insured's coverage ends on the earliest of:

- (1) the date the insured is no longer covered for life insurance under the group policy; or
- (2) 61 days (the grace period) after the due date of any premium contribution which is not paid; or
- (3) the date this supplement terminates.

When does this supplement terminate?

This supplement will terminate on the earlier of:

- (1) the date requested by the policyholder to cancel the Accidental Death and Dismemberment coverage for its plan; or
- (2) the date the group policy is terminated (we will provide the policyholder 31 days notice of our intent to terminate the group policy).

Additional Information

Can insurance under this supplement be converted to a policy of individual insurance upon termination?

No. Coverage under this supplement will not be included in any insurance issued under the conversion right section of the certificate.

Legal Actions

No legal action may be brought to recover on this certificate within the first sixty days after written proof of loss has been given as required by this certificate. No such action may be brought after two years from the time written proof of loss is required to be given.

Renee D. Montz

Assistant Secretary

Stephen M. Hoffman

President

Portability Certificate Supplement

Securian Life Insurance Company
400 Robert Street North • St. Paul, Minnesota 55101-2098

General Information

This certificate supplement is issued in consideration of the required premium and is subject to every term, condition, exclusion, limitation and provision of the certificate unless otherwise expressly provided for herein.

What does this supplement provide?

This supplement provides for continuation of insurance if an insured no longer meets the eligibility requirements of the certificate, except as provided for herein.

To continue insurance, the insured must make a written request and make the first premium payment within 31 days, or any extended notice period, after insurance provided by the group policy would otherwise terminate. Upon completion of all portability election requirements, coverage provided by this supplement will be effective the date the insured's coverage terminated under the group policy. This date is considered to be the insured's portability date and the insured is then considered to have portability status.

When must election to continue insurance be made?

You will be notified of your right to continue your group life insurance. If notification is made within 15 days before or after the event that results in termination or reduction of the group life coverage, you will have 31 days from the date the insurance terminates to elect continuation under this supplement. If the notice is given more than 15 days but less than 90 days after the event, the time allowed for of the exercise of the continuation privilege shall be extended to 45 days after such notice is sent. If the notice is not given within 90 days, the time allowed for the exercise of the continuation privilege expires 90 days after the terminating event. Such notice shall be mailed to you by us or an entity the policyholder designates at your last known address.

If you elect to continue your coverage you may later elect to convert your continued group life coverage to an individual policy at any time. All other conditions and provisions of the conversion right section of your certificate to which this supplement is attached will apply.

The continuation right is not available if your coverage under the group policy terminates due to your failure to make, when due, required premium contributions.

Who is eligible to continue insurance under this supplement?

An insured employee is eligible to continue group life insurance under the terms of this supplement if he or she no longer meets the eligibility requirements of the certificate due to any of the following:

- (1) the employee terminates employment, including retirement; or
- (2) the employee is no longer in a class eligible for insurance or is on a leave or layoff; or
- (3) a class or group of employees insured under the policy is no longer considered eligible and there is no successor plan for that class or group. Successor plan means an insurance policy or policies provided by us or another insurer that replaces insurance provided under this policy; or
- (4) an amendment to the group policy, provided that less than 25% of the total number of insureds under the group policy lose eligibility.

An insured will not be eligible to request coverage under this supplement if he or she:

- (1) has attained the age of 70; or
- (2) has converted his or her insurance to an individual life policy under the terms of the certificate's conversion right section; or
- (3) loses eligibility due to termination of the group policy.

Can insurance that is lost due to moving from one eligible class to another be ported?

No, with one exception: if an employee moves from an active class to a retiree class, he or she can port the amount of insurance lost due to the change in class, subject to all the provisions of this supplement.

What insurance can be continued under this supplement?

Noncontributory insurance may be continued under this supplement.

An insured may also continue coverage under all certificate supplements by which he or she was insured immediately preceding his or her portability date, except for the Accidental Death and Dismemberment Certificate Supplement, which will terminate upon porting.

Is there a minimum amount of insurance that can be continued under this supplement?

Yes. The minimum amount of insurance that can be continued on an employee's life under this supplement is \$7,500.

Is there a maximum amount of insurance that can be continued under this supplement?

Yes. The maximum amount of insurance that can be continued under this supplement is the amount of insurance that was in force on your portability date, but not more than \$500,000. However, if you are age 65 or older

on your portability date, the amount will not be more than 65% of the amount of insurance in force on your portability date subject to a maximum of \$325,000.

Amounts in excess of portability maximums stated above may be converted according to the Conversion Right section of your certificate.

Will the amount of insurance continued under this supplement change?

Yes. On the first day of the month following the date you attain age 65, the amount of insurance on your life continued under this supplement will reduce to 65% of the amount of insurance in force on the day prior to attainment of age 65. Insurance terminates at age 70.

Can you request a change in the amount of insurance continued under this supplement?

Yes. You may elect to reduce the amount of insurance on your life, subject to the minimum amount. The amount of insurance continued under this supplement will never increase.

How will premium contributions be paid?

Premium contributions will be paid directly to us on a monthly, quarterly, semi-annual, or annual basis and will be subject to an administrative charge per billing period. We may adjust the amount of the charge, but not more often than once per year.

Can the premium rate change?

Yes. The premium rate may increase on the portability date. The premium rate may also increase in the future but will not change more often than once per year.

Can insurance continued under this supplement be converted to a policy of individual insurance?

Yes. At any time after insurance has been continued under the provisions of this supplement, but not beyond 31 days, or any extended notice period, after coverage terminates under the provisions of this supplement, it may be converted to a policy of individual insurance with us. All other conditions and provisions of the conversion right section of the certificate to which this supplement is attached will apply. Coverage cannot be continued under both this supplement and the conversion privilege.

What happens if you again become eligible under the certificate?

If you are continuing coverage under the terms of this supplement, and again meet the eligibility requirements of the certificate, you shall no longer be considered to have portability status, ported coverage will terminate and only one death benefit will be paid under the coverage.

Insurance may be continued only under the terms of the certificate, not including this supplement unless and until you no longer meet the eligibility requirements of the certificate and again return to portability status as provided for herein.

What happens to insurance provided under this supplement when the group policy terminates?

Anything in the group policy notwithstanding, termination of the group policy will not terminate life insurance then in force for any person under the terms of this supplement. The group policy will be deemed to remain in force solely for the purpose of continuing such insurance, but without further obligation of the policyholder.

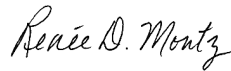
Any insurance continued under the terms of this supplement will remain in force until terminated by the provisions of the section entitled "When will insurance continued under this supplement terminate?".

No individual may elect coverage under this supplement on or after the date of termination of the group policy.

When will insurance continued under this supplement terminate?

Insurance being continued under this supplement will terminate on the earliest of the following:

- (1) your 70th birthday; or
- (2) the date you again meet the eligibility requirements of the certificate, not including the terms of this supplement; or
- (3) 31 days after the due date of any premium contribution which is not made; or
- (4) the date you request to terminate your coverage being continued under this supplement; or
- (5) the date the group policy is terminated.



Secretary



President

Securian Life Insurance Company • A Stock Company

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**GROUP TERM LIFE CERTIFICATE OF INSURANCE • NONPARTICIPATING •
ANNUALLY RENEWABLE • CONTRIBUTORY AND NON-CONTRIBUTORY**