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ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

B-15126 (04-15)
ReliaStar Life Insurance Company (ReliaStar Life) certifies that it has issued the Group Policy listed below to the Policyholder. All benefits are controlled by the terms and conditions of the Group Policy. The Group Policy is on file in the Policyholder's office. You may look at the Group Policy there.

**Group Policy Number**
68437-6GAT

**Policyholder**
Oberlin College

The Dependent's Insurance part of this certificate applies to you only if you are insured for it.

Your beneficiary is the last beneficiary you named, according to the records on file in ReliaStar Life's Home Office or on file with the Plan Administrator, if applicable. You may change your beneficiary any time, according to the terms of the Group Policy.

The certificate summarizes and explains the parts of the Group Policy which apply to you. This certificate is not an insurance policy. In any case of differences or errors, the Group Policy rules.

This certificate replaces any other certificates ReliaStar Life may have given you under the Group Policy.

[Signature]
Registrar
**Supplemental Life and Accidental Death and Dismemberment (AD&D) Insurance**

<table>
<thead>
<tr>
<th>Class</th>
<th>Amount of Life Insurance*</th>
<th>Full Amount of AD&amp;D Insurance*</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Eligible Employees</td>
<td>$10,000 to a maximum of $500,000; chosen in increments of $10,000, not to exceed 5 times your Basic Yearly Earnings.</td>
<td>$10,000 to a maximum of $500,000; chosen in increments of $10,000, not to exceed 5 times your Basic Yearly Earnings.</td>
</tr>
<tr>
<td>Employees approved for portability</td>
<td>Approved ported amount, but the total amount of ported Basic and Supplemental Life will not to exceed the lesser of 5 times your Basic Yearly Earnings or $750,000</td>
<td>Approved ported amount, not to exceed ported Life amount</td>
</tr>
</tbody>
</table>

*Beginning on and after your 70th birthday, ReliaStar Life decreases the amount of your insurance. ReliaStar Life pays a percentage of the amount otherwise payable as follows:

- From your 70th birthday to age 75, ReliaStar Life pays 65%.
- From your 75th birthday and after, ReliaStar Life pays 50%.

Your minimum amount of ported coverage, including decreases, is $5,000 total Life Insurance and $5,000 total AD&D Insurance.

**Basic Yearly Earnings**—the yearly salary or wage you receive for work done for the Policyholder. It does not include bonuses, commissions or overtime pay.

To determine benefits, your amount of insurance is rounded to the next higher $1,000 multiple unless the amount equals a multiple of $1,000.

**Accelerated Death Benefit for All Eligible Employees**

This benefit is equal to 50% of your amount of Basic and Supplemental Life Insurance in force, or $250,000, whichever is less. This benefit is available to employees only. You must have at least $10,000 of Life Insurance coverage in force to qualify for this benefit.

**Dependent Life and Accidental Death and Dismemberment (AD&D) Insurance**

<table>
<thead>
<tr>
<th>Class</th>
<th>Amount of Life Insurance</th>
<th>Full Amount of AD&amp;D Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>· Spouse or Domestic Partner</td>
<td>$5,000 to a maximum of $250,000; chosen in increments of $5,000, not to exceed 50% of your amount of insurance.**</td>
<td>$5,000 to a maximum of $250,000; chosen in increments of $5,000, not to exceed 50% of your amount of insurance.**</td>
</tr>
<tr>
<td>· Child (each)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>– From birth but less than 14 days of age</td>
<td>$100</td>
<td>$100</td>
</tr>
<tr>
<td>– 14 days but less than 6 months of age</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>– 6 months but less than 26 years of age</td>
<td>$2,000 to a maximum of $10,000; chosen in increments of $2,000</td>
<td>$2,000 to a maximum of $10,000; chosen in increments of $2,000</td>
</tr>
<tr>
<td>· Spouse or Domestic Partner approved for portability</td>
<td>Approved ported amount, not to exceed the employee’s ported Life amount</td>
<td>Approved ported amount, not to exceed ported Dependent Life amount</td>
</tr>
</tbody>
</table>
SCHEDULE OF BENEFITS

- Child approved for portability
  Approved ported amount, not to exceed the lesser of the employee’s ported Life amount or $10,000
  Approved ported amount, not to exceed ported Dependent Life amount

**Beginning on and after your 70th birthday, ReliaStar Life decreases the amount of dependent’s insurance on your spouse or domestic partner. ReliaStar Life pays a percentage of the amount otherwise payable as follows:
- From the 70th birthday to age 75, ReliaStar Life pays 65%,
- From the 75th birthday and after, ReliaStar Life pays 50%.

The minimum amount of ported Dependent’s Insurance for each insured dependent, including decreases, is $1,000 total Dependent Life Insurance and $1,000 total Dependent AD&D Insurance.

If your ported coverage stops decreasing, the ported coverage on your dependent spouse or domestic partner will also stop decreasing.

Dependent Spouse or Domestic Partner Accelerated Death Benefit
This benefit is equal to 50% of Supplemental Dependent Spouse or Domestic Partner Life Insurance in force, or $250,000, whichever is less. You must have at least $10,000 of Dependent Spouse or Domestic Partner Life Insurance coverage in force qualify for this benefit.

Proof of Good Health
Proof of good health is required for amounts in excess of the limits described below. Coverage is subject to the Group Policy’s proof of good health requirements that are in force on the effective date of coverage. Any increase to coverage is subject to the Group Policy’s proof of good health requirements that are in force on the effective date of the increase. For proof of good health, a completed Evidence of Insurability form must be submitted to ReliaStar Life for approval.

Employee-Supplemental Life Insurance | Limit without Proof
--- | ---
- Coverage on the Group Policy Effective Date continued from the Policyholder's prior plan... | Current amount, up to $500,000
- Enrollment on the Group Policy Effective Date, for employees who had no supplemental coverage under the Policyholder's prior plan... | None. Proof of good health is required.
- Initial eligibility after the Group Policy Effective Date... | $100,000 or 5 times Basic Yearly Earnings, whichever is less. This dollar limit reduces to 50% if hired at age 75 and over.
- All other applications for new coverage more than 31 days after the date you become eligible for insurance... | None. Proof of good health is required.
- All other applications for an increase to existing supplemental coverage... | None. Proof of good health is required.

Dependent Life Insurance | Limit without Proof
--- | ---
- Coverage on the Group Policy Effective Date continued from the Policyholder's prior plan... | Current amount, up to $25,000 on your spouse or domestic partner, and up to $10,000 on your child(ren).
SCHEDULE OF BENEFITS

- Enrollment on the Group Policy Effective Date, for employees who had no dependent coverage under the Policyholder's prior plan... None. Proof of good health is required.

- Initial eligibility for dependent coverage after the Group Policy Effective Date... $25,000 on your spouse or domestic partner, and $10,000 on your child(ren).

- All other applications for new dependent coverage more than 31 days after the date you become eligible for dependent's insurance... None. Proof of good health is required.

- All other applications for an increase to existing dependent coverage... None. Proof of good health is required.
EMPLOYEE'S INSURANCE

Eligibility
You are eligible on the later of the following dates:
- The Group Policy's Effective Date, July 1, 2014.
- The date you begin continuous service with the Policyholder.

You must meet the following conditions to become insured:
- Be eligible for the insurance.
- Be actively at work.
- Apply for the insurance, if you have to pay any part of the premium.
- Give to ReliaStar Life proof of good health, which it approves, as required on the Schedule of Benefits.

Effective Date of Employee's Insurance
Your insurance starts on the latest of the following dates:
- The date you become eligible.
- The date you return to active work if you are not actively at work on the date insurance would otherwise start. **Exception:** Your insurance starts on a nonworking day if you were actively at work on your last scheduled working day before the nonworking day.
- The date you apply for insurance, if you have to pay any part of the premium.
- The date ReliaStar Life approves your proof of good health, if proof is required.

Effective Date of Change in Amount of Insurance
If there is an increase in the amount of your insurance, the increase will take effect on:
- The date of the increase, if you are actively at work on that date.
- The date you return to active work, if you are not actively at work on the date your insurance increases.
- The nonworking day on which the increase was effective, if you were actively at work on your last scheduled working day before the nonworking day.

If proof of good health is required, the increase will take effect on the later of the dates indicated above or the date ReliaStar Life approves your proof of good health.

A decrease in the amount of your insurance will take effect on the date of the decrease.

Termination of Insurance
Your insurance stops on the earliest of the following dates:
- For coverage not ported, the last day of the month during which you were last actively at work for the Policyholder.
- For coverage not ported, the last day of the month during which you are no longer eligible for insurance under the Group Policy.
- For coverage not ported, the last day of the month during which you retire.
- The end of the period for which you paid premiums, if you do not make the next required premium contribution when due.
- The date the Policyholder replaces the Life Insurance under this plan with a similar life insurance plan through another insurance carrier, if you are actively at work for the Policyholder on that date.
- The date the Group Policy terminates.
- For ported Life Insurance, the date you attain age 80.
- For ported AD&D Insurance, the date you attain age 70.
- For all AD&D Insurance, the date your Life Insurance terminates. For coverage not ported, AD&D Insurance stops at the beginning of the period in which you are eligible to convert your Life Insurance.
- For Accelerated Death Benefit, the date your Life Insurance terminates. For coverage not ported, the Accelerated Death Benefit stops at the beginning of the period in which you are eligible to convert your Life Insurance.
- For Accelerated Death Benefit on ported Life Insurance, the date you attain age 70.

ReliaStar Life stops providing a specific benefit to you on the date that benefit is no longer provided under the Group Policy.
EMPLOYEE’S INSURANCE

Family and Medical Leave Act of 1993
Certain employers are subject to the FMLA. If you have a leave from active work certified by your employer, then for purposes of eligibility and termination of coverage you will be considered to be actively at work. Your coverage will remain in force so long as you continue to meet the requirements as set forth in the FMLA.

Continuation of Life Insurance
If you are no longer eligible for Life Insurance because you stop active work, the Policyholder may continue your insurance. Premiums must be paid. Your continuation of insurance is subject to all other terms of the Group Policy.

The length of time your insurance continues depends on the reason you stop active work.
Your continuation of insurance stops on the earliest of the following dates:
· The end of the period for which your premiums were paid, if the next premium contribution is not paid on time.
· For coverage not continued under the portability option, the date the Group Policy stops.
· The end of the 12th policy month after the policy month during which you stop active work, if you stop active work due to non-medical leave of absence, temporary layoff, or the Policyholder suspending operations.
· For coverage not continued under the portability option, the date you attain age 65 if you stop active work due to sickness or accidental injury, but you are not totally disabled on the date you stop active work.
· For coverage not continued under the portability option, the date your Life Insurance has been continued for 12 months if you stop work due to sickness or accidental injury, including total disability.
· The date you are no longer totally disabled, if you are totally disabled on the date you stop active work.
· The date you do not provide proof of total disability when asked, if you are totally disabled on the date you stop active work.

Portability
You can apply to continue your terminated Basic and Supplemental Life and AD&D Insurance until age 80 if certain conditions are met. AD&D Insurance may only be ported if Life Insurance is ported, and before you reach age 70. You may elect to decrease your ported coverage. You will not be eligible to increase your ported coverage.

The minimum amount of your Life Insurance that you can apply to port is $5,000. See the Schedule of Benefits for maximum amounts. If your total amount of terminated Life Insurance otherwise eligible to be ported is less than $5,000, then you may be eligible for conversion as described in the Conversion Rights section.

You must apply for portability within 31 days of the date your insurance terminates due to the following:
· You terminate employment with the Policyholder, if coverage is in effect for active employees under the Group Policy; or
· The Policyholder terminates Basic and Supplemental Life Insurance for active employees under the Group Policy and does not replace it with a similar life insurance plan; or
· You are no longer eligible for Employee’s Insurance under the Group Policy; or
· All other continuation under the Group Policy ends.

If your amount of insurance reduces due to age or a change in employment status, this is not considered a termination of insurance for purposes of portability. Please refer to the Conversion Rights section for more information about conversion following reductions in coverage.

Your application for portability is subject to approval by ReliaStar Life. If you are not approved for portability, you may still be eligible for conversion as described in the Conversion Rights section.

Ported coverage does not include the Waiver of Premium Disability Benefit.

The Incontestability provision in the General Provisions section also applies to ported coverage starting with the effective date of your ported coverage and continuing for two years while you are living.

If you port coverage and then later become eligible as an active employee for Employee’s Insurance under a Group Policy issued by ReliaStar Life, then your amount of ported coverage will be reduced by your amount of insurance as an active employee.
EMPLOYEE'S INSURANCE

Reinstatement
ReliaStar Life will reinstate your insurance not eligible for portability if you stop work and then return to work within 12 months. You will be eligible for insurance on the date you return to active work with the Policyholder.
NOTE: YOUR DOMESTIC PARTNER AND YOUR DOMESTIC PARTNER'S CHILD MAY BE ELIGIBLE FOR INSURANCE UNDER THIS PLAN, AS DEFINED UNDER DEFINITIONS OF DEPENDENT AND DOMESTIC PARTNER AND CHILD. YOU SHOULD CONSULT WITH YOUR PERSONAL TAX ADVISER TO ASSESS POSSIBLE TAX IMPLICATIONS.

Eligibility
You are eligible for Dependent's Insurance on the later of the following dates:

· The date you are eligible for Employee's Supplemental Life Insurance.
· The date you first acquire a dependent as defined.

You must meet all of the following conditions to become insured for Dependent's Insurance:

· Be insured for Employee's Supplemental Life Insurance.
· Apply for Dependent's Insurance, if you must pay any part of the premium. You must apply for all dependents you have within 31 days of the date you are initially eligible for Dependent's Insurance.
· Give ReliaStar Life proof of good health for your dependent, which it approves, as required on the Schedule of Benefits.

If you and your spouse or domestic partner are insured as employees under the Group Policy, either you or your spouse or domestic partner, but not both, can apply for Dependent's Insurance. If the spouse or domestic partner carrying the Dependent's Insurance stops being insured as an employee, the other spouse or domestic partner may become insured for Dependent's Insurance by applying within 31 days.

Any person eligible for insurance as an employee under the Group Policy is not considered an eligible dependent for Dependent's Insurance.

Effective Date of Dependent's Insurance
Your dependent's insurance starts on the latest of the following dates:

· The date you become eligible for Dependent's Insurance.
· The date your dependent is no longer confined at home or in any facility for care and treatment of sickness or accidental injury, for any dependent, other than a newborn, who is confined at home or in such facility on the date your dependent's insurance starts.
· The date ReliaStar Life approves your dependent's proof of good health, if ReliaStar Life requires proof.
· The date you apply for Dependent's Insurance, if you have to pay any part of the premium.

If you acquire a new dependent and additional premium is required, you must apply within 31 days of acquiring the new dependent. If you acquire a new dependent while insured for Dependent's Insurance, and no additional premium is required, you should complete an enrollment form.

A newborn child will be covered from the date of eligibility. A foster or adopted child will be covered from the date of placement in the home.

Effective Date of Change in Amount of Insurance
If there is an increase in the amount of your dependent's insurance, the increase will take effect on the latest of the following dates:

· The date you are eligible to increase Dependent's Insurance.
· The date your dependent is no longer confined at home or in any facility for care and treatment of sickness or accidental injury, if your dependent is so confined on the date of the increase.
· The date ReliaStar Life approves your dependent's proof of good health, if proof is required.

A decrease in the amount of your dependent's insurance will take effect on the date of the decrease.

Termination of Dependent's Insurance
Your dependent's insurance stops on the earliest of the following dates:

· The date your insurance terminates.
· For dependent's insurance not ported, the last day of the month during which you retire.
· The end of the period for which you made your last premium contribution for Dependent's Insurance if you do not make the next required contribution when due.
· The date the Dependent's Insurance part of the Group Policy terminates.
· The date the Group Policy terminates.
· The last day of the month during which your insured dependent is no longer an eligible dependent as defined.
DEPENDENT'S INSURANCE

- The date your dependent's life insurance is converted.
- For Dependent AD&D Insurance, the date your dependent's life insurance terminates. For coverage not ported, your dependent's AD&D insurance stops at the beginning of the period in which your dependent's life insurance is eligible for conversion.
- For ported Dependent AD&D Insurance, the date your ported AD&D Insurance terminates.

ReliaStar Life stops providing a specific benefit under your dependent's insurance on the date that benefit is no longer provided under the Group Policy.

Family and Medical Leave Act of 1993
If your coverage remains in force due to a certified leave under the FMLA, then your dependents' coverage will also remain in force so long as you continue to meet the requirements as set forth in the FMLA.

Continuation of Insurance
Your insured dependent's insurance may be continued. Premiums must be paid. Your insured dependent's insurance stops at the end of the period for which the last premium was paid if the next premium is not paid on time. Your insured dependent's continuation is subject to all other terms of the Group Policy.

You Stop Active Work
If you stop active work and your insurance is being continued, your dependent's insurance will also be continued as shown in the Employee's Insurance part of this certificate.

Handicapped Dependent Child
If your insured dependent child is physically handicapped or mentally retarded and reaches the maximum age for Dependent's Insurance, you may continue this child's insurance as long as all required premiums are paid. You must give ReliaStar Life proof that:
- The child is handicapped and not self-supporting.
- The child became handicapped before reaching the maximum age for Dependent's Insurance.
- The child is dependent on you for support.

Proof must be given within 31 days after the date the child reaches the maximum age for insurance. Before granting a continuation of this child's insurance, ReliaStar Life may require that a doctor examine the child. ReliaStar Life will specify the doctor and pay the fee for all exams ReliaStar Life requires. During the 2 years after the child reaches the maximum age, ReliaStar Life may ask for regular proof of the child's continued handicap. After the 2 year period, ReliaStar Life will not ask for proof, including doctor's exams, more often than once a year.

This handicapped child's continuation stops on the earliest of the following dates:
- The date the child becomes covered under any other group plan.
- The date the child is no longer handicapped.
- The date you do not give ReliaStar Life proof of the child's handicap when requested.
- The end of the period for which you paid premiums for this continuation, if you do not make the next required premium contribution when due.
- The date your Dependent's Insurance would otherwise stop under the Group Policy.

The Conversion Right will be available to your insured dependent child when all continuation is exhausted.

Portability
You can apply to continue your terminated Dependent's Insurance at the same time you apply for portability of your coverage. Dependent Life Insurance may only be ported if your Life Insurance is ported. Dependent AD&D Insurance may only be ported if Dependent Life Insurance and your AD&D Insurance are ported. You may elect to decrease ported coverage. You will not be eligible to increase ported coverage.

Your application for portability of Dependent's Insurance is subject to approval by ReliaStar Life. If your Dependent's Insurance is not approved for portability, your insured dependent may still be eligible for conversion as described in the Conversion Rights section.
The Incontestability provision in the General Provisions section also applies to ported coverage starting with the effective date of ported coverage and continuing for two years while your insured dependent is living.

If you port Dependent's Insurance and then later become eligible as an active employee for Dependent's Insurance under a Group Policy issued by ReliaStar Life, then your amount of ported Dependent's Insurance will be reduced by your amount of Dependent's Insurance as an active employee.
Empolyee’s Life Insurance
ReliaStar Life pays a death benefit to your beneficiary if written proof is received that you have died while this insurance is in force. The death benefit is the amount of Life Insurance for your class shown on the Schedule of Benefits in effect on the date of your death.

ReliaStar Life pays the death benefit for all causes of death. However, if you commit suicide, while sane or insane, within 2 years of the date your insurance starts, ReliaStar Life will refund the amount of premiums paid for your Life Insurance under the Group Policy instead of paying a death benefit.

Beneficiary
The beneficiary is named to receive the proceeds to be paid at your death. You may name more than one beneficiary. The Policyholder cannot be the beneficiary.

You may name, add or change beneficiaries by written request as described below. You may also choose to name a beneficiary that you cannot change without his or her consent. This is an irrevocable beneficiary.

You may name, add or change beneficiaries by written request if all of the following conditions are met:
- Your coverage is in force.
- ReliaStar Life has written consent of all irrevocable beneficiaries.
- You have not assigned the ownership of your insurance. The rights of an assignee are described in the Assignment section.

All requests are subject to the approval of ReliaStar Life. A change will take effect as of the date it is signed but will not affect any payment ReliaStar Life makes or action it takes before receiving your notice.

Payment of Proceeds
ReliaStar Life pays proceeds to the beneficiary. If there is more than one beneficiary, each receives an equal share, unless you have requested otherwise, in writing. To receive proceeds, a beneficiary must be living on the earlier of the following dates:
- The date ReliaStar Life receives proof of your death.
- The tenth day after your death.

If there is no eligible beneficiary or if you did not name one, ReliaStar Life pays the proceeds in the following order:
1. Your spouse or domestic partner.
2. Your natural and adopted children.
3. Your parents.
4. Your estate.

The person must be living on the tenth day after your death.

Settlement Options
Settlement options are alternative ways of paying the proceeds under the Group Policy. Proceeds is the amount of each benefit ReliaStar Life pays when you die. To find out more about settlement options, please contact the Policyholder.

Accelerated Death Benefit for All Eligible Employees
THE RECEIPT OF ACCELERATED DEATH BENEFITS MAY BE A TAXABLE EVENT. YOU SHOULD SEEK ADDITIONAL INFORMATION ABOUT THE TAX STATUS OF THE PAYMENT FROM A PERSONAL TAX ADVISOR.

Your amount of Life Insurance will be reduced if you receive an Accelerated Death Benefit payment. Accelerated Death Benefit proceeds is the amount ReliaStar Life pays to you, while you are living, if you have a terminal condition. The Accelerated Death Benefit proceeds are paid in one lump sum and are paid only once. This lump sum payout is the only Settlement Option available to you prior to your death.

The benefit is the amount of the Accelerated Death Benefit Benefit shown on the Schedule of Benefits in effect on the date you apply for Accelerated Death Benefit proceeds.
LIFE INSURANCE

Conditions for the Accelerated Death Benefit
To receive this benefit, all of the following conditions must be met:
- Any required Life Insurance premium is paid through the date you request this benefit.
- You request this benefit in writing while you are living. If you are unable to request this benefit yourself, your legal representative may request it on your behalf.
- You are insured for Life Insurance benefits under the Group Policy.
- You are insured for the minimum amount of Life Insurance as shown on the Schedule of Benefits in order to be eligible for an Accelerated Death Benefit.
- You provide to ReliaStar Life a doctor’s statement that gives the diagnosis of your medical condition and states that because of the nature and severity of such condition your life expectancy is no more than 12 months. ReliaStar Life may require that you be examined by a doctor of its choosing, at its expense.
- You provide to ReliaStar Life written consent from any irrevocable beneficiary and, in community property states, from your spouse.

Accelerated Death Benefit Payment
ReliaStar Life pays the benefit proceeds immediately upon receipt of due written proof of eligibility. If you request a claim form and do not receive it within 15 days of your request, then you may submit proof of eligibility without waiting for the claim form. If the proof you submit shows that all of the conditions above are met, then this proof will be deemed sufficient without a claim form.

Proceeds are payable to you. If you are physically or mentally unable to receive and cash the lump sum payment, then ReliaStar Life will pay the proceeds instead to one of the following:
- A representative appointed by the courts to act on your behalf.
- A person who takes care of you.
- An institution that takes care of you.
- Any other person ReliaStar Life considers entitled to receive the payments as your trustee.

If you have made an absolute assignment of your insurance, the benefit proceeds are payable to the current owner.

Any payment ReliaStar Life makes in good faith will discharge its liability to the extent of such payment.

Accelerated Death Benefit Payment Effects on Coverage
When ReliaStar Life pays this benefit, your coverage is affected in the following ways:
- Your Supplemental/Optional Life Insurance amount is reduced by the Accelerated Death Benefit proceeds paid under this provision.
- Your Life Insurance amount that you may convert is reduced by the Accelerated Death Benefit proceeds paid under this provision.
- You will not be eligible to increase your Life Insurance amount.
- Premium is based upon the Life Insurance amount in force prior to any proceeds paid under this provision. Such premium must be paid to keep the Life Insurance coverage in force.
- Your remaining Life Insurance amount is subject to future age reductions, if any, as shown on the Schedule of Benefits.
- You will not be able to reinstate your coverage to its full amount in the event of a recovery from a terminal condition.

Your dependents' Life Insurance coverage will be unaffected by Accelerated Death Benefit proceeds paid to you. If any death benefit remains after payment of the Accelerated Death Benefit, your Accidental Death and Dismemberment coverage will be unaffected by Accelerated Death Benefit proceeds paid to you.

Accidental Death & Dismemberment (AD&D) Insurance
ReliaStar Life pays this benefit if you suffer a covered loss due to a covered accident. All of the following conditions must be met:
- You are covered for AD&D Insurance on the date of the accident.
- Loss occurs within 180 days of the date of the accident.
- The cause of the loss is not excluded.

ReliaStar Life pays the benefit shown below if you suffer any of the losses listed. The Full Amount is shown on the Schedule of Benefits. ReliaStar Life pays only one Full Amount while the Group Policy is
LIFE INSURANCE

in effect. If you have a loss for which ReliaStar Life paid 1/2 of the Full Amount, ReliaStar Life pays no more than 1/2 of the Full Amount for the next loss.

For: ................................................................. The benefit is:
Loss of life .................................................................................................................. Full Amount
Loss of both hands, both feet or sight of both eyes ......................................................... Full Amount
Loss of one hand and one foot ..................................................................................... Full Amount
Loss of speech and hearing in both ears ........................................................................ Full Amount
Loss of one hand or one foot and sight of one eye ........................................................ Full Amount
Loss of one hand or one foot or sight of one eye ............................................................ 1/2 Full Amount
Loss of speech ............................................................................................................ 1/4 Full Amount
Loss of hearing in both ears ......................................................................................... 1/4 Full Amount
Loss of thumb and index finger of same hand ............................................................... 1/4 Full Amount
Quadriplegia ............................................................................................................. Full Amount
Paraplegia ................................................................................................................ 1/2 Full Amount
Hemiplegia ............................................................................................................... 1/2 Full Amount

Loss of hands or feet means loss by being permanently, physically severed at or above the wrist or ankle. Loss of sight means total and permanent loss of sight. Loss of speech and hearing means total and permanent loss of speech and hearing. Loss of thumb and index finger means loss by being permanently, physically, entirely severed.

Quadriplegia means total paralysis of all four limbs. Paraplegia means total paralysis of both lower limbs. Hemiplegia means paralysis of one arm and one leg on the same side of the body.

Paralysis must be the result of a spinal cord injury which is due to an accident. ReliaStar Life does not pay an AD&D benefit for any paralysis caused by a stroke. Paralysis must be determined by competent medical authority to be permanent, complete and irreversible.

ReliaStar Life does not pay a benefit for loss of use of the hand or foot or thumb and index finger. Death benefits are paid to your beneficiary. All other benefits are paid to you.

Exposure and Disappearance Benefit
ReliaStar Life pays an Exposure benefit if:
- the loss is from injury caused by exposure to the elements, and
- is the result of a covered accident.

ReliaStar Life pays a Disappearance benefit if:
- you are in a conveyance, including but not limited to an automobile, airplane, ship or train, that disappears, sinks or wrecks; and
- you disappear and your body is not found, and the disappearance is the result of a covered accident; and
- a reasonable period of time, but no more than one year, has lapsed since the accident, and
- ReliaStar Life has reviewed all evidence and there is no reason to believe that you are living.

The amount payable for the Exposure benefit is contained in the table above. The amount payable for the Disappearance benefit is the AD&D benefit for loss of life. If benefits are paid for Exposure or Disappearance, no other AD&D benefits will be payable under the Group Policy.

Exposure benefits are paid to you if living, otherwise to your beneficiary. Disappearance benefits are paid to your beneficiary.

If ReliaStar Life pays the Disappearance benefit and it is later found you are alive, the amount of benefits paid must be refunded to ReliaStar Life.

Safe Driver Benefit
ReliaStar Life pays a Safe Driver benefit in addition to the AD&D benefit and subject to the exclusions listed below if you were:
- killed due to an automobile accident, and
- wearing a properly fastened safety belt at the time of the accident.

An additional amount will be paid if you were also driving in or riding in an automobile equipped with a factory installed airbag that operated properly upon impact.
**LIFE INSURANCE**

<table>
<thead>
<tr>
<th>For loss of:</th>
<th>The benefit is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life (with safety belt only)</td>
<td>An additional 10% of Full Amount of AD&amp;D Insurance up to a maximum of $25,000</td>
</tr>
<tr>
<td>Life (with safety belt and airbag)</td>
<td>An additional 15% of Full Amount of AD&amp;D Insurance up to a maximum of $40,000</td>
</tr>
</tbody>
</table>

**Automobile** means any self-propelled private passenger vehicle which has four or more tires and which is not being used for commercial purposes. **Safety belt** means a passenger restraint system properly installed in the vehicle in which you were riding. **Airbag** means an additional restraint system which inflates for added protection to the head and chest areas.

ReliaStar Life will not pay the Safe Driver benefit if the loss of life was caused directly or indirectly by any use of intoxicating liquors, marijuana, narcotic drugs, depressants or similar substances, whether or not prescribed by a doctor, by you or by the driver of the automobile in which you were riding.

Safe Driver benefits are paid to your beneficiary.

**Coma Benefit**

ReliaStar Life pays a **Coma** benefit if, due to an accident, you are in a coma. Coma benefit payments will stop when you are no longer in a coma or when maximum benefits have been paid, whichever comes first.

<table>
<thead>
<tr>
<th>In the event of:</th>
<th>The benefit is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coma</td>
<td>An additional 2% of Full Amount of AD&amp;D Insurance per month for up to 12 months to a total maximum of $24,000</td>
</tr>
</tbody>
</table>

**Coma** means that you remain unresponsive to any stimuli and speechless for a period of time not less than 30 days, as determined by a competent medical authority.

If you are physically and mentally incapable of receiving and cashing Coma benefit payments, then the payments instead will be made to a person legally authorized to receive the payments on your behalf.

**Education Benefit**

ReliaStar Life pays an **Education** benefit in addition to the AD&D benefit and subject to the conditions below if you die due to an accident. This benefit will be paid at the end of each annual period following your death to your dependent who is enrolled as a full-time student in an accredited post-secondary institution of higher learning beyond grade 12 within 365 days following the date of your death. Benefit payments will stop if either of the following is true during the preceding annual period –

- the student's full-time school attendance is less than 6 months; or
- the student would no longer be considered your eligible dependent under the definition of dependent in the policy.

<table>
<thead>
<tr>
<th>For:</th>
<th>The benefit is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>An additional 5% of Full Amount of AD&amp;D Insurance per year for up to 4 years to a maximum of $3,000 per year</td>
</tr>
</tbody>
</table>

Education benefits are paid to each eligible dependent student, or to the dependent's legal guardian.

**Transportation Benefit**

ReliaStar Life pays a **Transportation** benefit in addition to the AD&D benefit if you die due to an accident that occurs at least 75 miles from your primary residence.
LIFE INSURANCE

For: Transportation ................................................................. An additional 2% of Full Amount of AD&D Insurance up to a maximum of $2,000

Transportation benefits are paid to your beneficiary.

Child Care Benefit
ReliaStar Life pays a Child Care benefit in addition to the AD&D benefit if you die due to an accident, and your dependent child under age 13 years is enrolled in a licensed day care center within 90 days of your death. This benefit is paid on behalf of each eligible dependent child at the end of each annual period following your death. Benefit payments will stop if either of the following is true during the preceding annual period —

· your dependent child does not attend a licensed day care center for at least 1000 hours; or
· your dependent child is not under age 13 years for any part of that year.

For: Child Care ................................................................. An additional 3% of Full Amount of AD&D Insurance per year for up to 6 years to a maximum of $2,000 per year

Child Care benefits are paid to the person who has incurred the cost of day care expenses for your eligible dependent child.

Occupational Assault Benefit
ReliaStar Life pays an Occupational Assault benefit in addition to the AD&D benefit if you suffer a covered loss due to an accident, and:

· the loss is due to an intentional and unlawful act of physical violence directed at you by another person,
· you are actively at work, performing assigned duties on behalf of the Policyholder at the time of the assault, and
· a report of criminal activity has been filed on your behalf with the appropriate law enforcement authority within 48 hours of the assault.

For loss due to: Occupational Assault ................................................................. An additional AD&D Amount equal to the AD&D amount otherwise payable for this loss up to a maximum of $10,000

Occupational Assault benefits are paid to you if living, otherwise to your beneficiary.

Accidental Death and Dismemberment Exclusions
ReliaStar Life does not pay benefits for loss directly or indirectly caused by any of the following:

· Suicide or intentionally self-inflicted injury, while sane or insane.
· Physical or mental illness.
· Bacterial infection or bacterial poisoning. Exception: Infection from a cut or wound caused by an accident.
· Riding in or descending from an aircraft as a pilot or crew member.
· Any armed conflict, whether declared as war or not, involving any country or government.
· Injury suffered while in the military service for any country or government.
· Injury which occurs when you commit or attempt to commit a felony.
· Use of any drug, narcotic or hallucinogenic agent —
  – unless prescribed by a doctor.
  – which is illegal.
  – not taken as directed by a doctor or the manufacturer.
· Your intoxication. Intoxication means your blood alcohol content meets or exceeds the legal presumption of intoxication under the laws of the state where the accident occurred.
Dependent’s Life Insurance

ReliaStar Life pays a death benefit in the amount of the Dependent's Life Insurance shown on the Schedule of Benefits. ReliaStar Life pays according to the Schedule of Benefits in effect on the date your insured dependent dies.

ReliaStar Life pays the death benefit for all causes of death. However, for Dependent Life Insurance, if your insured dependent, while sane or insane, commits suicide within 2 years from the date his or her coverage starts, ReliaStar Life will refund the amount of premiums already paid for Dependent Life Insurance instead of paying a death benefit.

ReliaStar Life requires that proof of your insured dependent's death be mailed to ReliaStar Life at its Home Office.

ReliaStar Life pays benefits for your insured dependent's death to you, if you are living on the earlier of the following:

• The date ReliaStar Life receives proof of your insured dependent's death at its Home Office.
• The tenth day after your insured dependent's death.

If you are not living on either of these dates, ReliaStar Life pays the proceeds to the following in the order listed:
1. Your spouse or domestic partner, if living.
2. Your estate.

Dependent Spouse or Domestic Partner Accelerated Death Benefit

THE RECEIPT OF ACCELERATED DEATH BENEFITS MAY BE A TAXABLE EVENT. YOU SHOULD SEEK ADDITIONAL INFORMATION ABOUT THE TAX STATUS OF THE PAYMENT FROM A PERSONAL TAX ADVISOR.

The amount of your Dependent Spouse or Domestic Partner Life Insurance will be reduced if you receive a Dependent Spouse or Domestic Partner Accelerated Death Benefit payment.

Dependent Spouse or Domestic Partner Accelerated Death Benefit proceeds is the amount ReliaStar Life pays to you, while you are living, if your insured dependent spouse or domestic partner has a terminal condition. The proceeds are paid in one lump sum and are paid only once. This lump sum payout is the only Settlement Option available to you prior to your spouse's or domestic partner's death.

The benefit is the amount of the Dependent Spouse or Domestic Partner Accelerated Death Benefit shown on the Schedule of Benefits in effect on the date you apply for Dependent Spouse or Domestic Partner Accelerated Death Benefit proceeds.

Conditions for the Dependent Spouse or Domestic Partner Accelerated Death Benefit

To receive this benefit, all of the following conditions must be met:

• Any required Life Insurance premium is paid through the date you request this benefit.
• You request this benefit in writing while your insured dependent spouse or domestic partner is living. If you are unable to request this benefit yourself, your legal representative may request it on your behalf.
• Your spouse or domestic partner is insured for Dependent Spouse or Domestic Partner Life Insurance benefits under the Group Policy.
• Your spouse or domestic partner is insured for the minimum amount of Dependent Spouse or Domestic Partner Life Insurance as shown on the Schedule of Benefits in order to be eligible for a Dependent Spouse or Domestic Partner Accelerated Death Benefit.
• You provide to ReliaStar Life a doctor's statement that gives the diagnosis of your insured dependent spouse's or domestic partner's medical condition and states that because of the nature and severity of such condition his/her life expectancy is no more than 12 months. ReliaStar Life may require that your spouse or domestic partner be examined by a doctor of its choosing, at its expense.
• You provide to ReliaStar Life written consent from any irrevocable beneficiary and, in community property states, from your spouse.
LIFE INSURANCE

Dependent Spouse or Domestic Partner Accelerated Death Benefit Payment
ReliaStar Life pays the benefit proceeds immediately upon receipt of due written proof of eligibility. If you request a claim form and do not receive it within 15 days of your request, then you may submit proof of eligibility without waiting for the claim form. If the proof you submit shows that all of the conditions above are met, then this proof will be deemed sufficient without a claim form.

Proceeds are payable to you. If you are physically or mentally unable to receive and cash the lump sum payment, then ReliaStar Life will pay the proceeds instead to one of the following:
• A representative appointed by the courts to act on your behalf.
• A person who takes care of you.
• An institution that takes care of you.
• Any other person ReliaStar Life considers entitled to receive the payments as your trustee.

If you have made an absolute assignment of your insurance, the benefit proceeds are payable to the current owner.

Any payment ReliaStar Life makes in good faith will discharge its liability to the extent of such payment.

Dependent Spouse or Domestic Partner Accelerated Death Benefit Payment Effects on Coverage
When ReliaStar Life pays this benefit, your dependents' coverage is affected in the following ways:
• Your Supplemental Dependent Spouse or Domestic Partner Life Insurance amount is reduced by the Dependent Spouse or Domestic Partner Accelerated Death Benefit proceeds paid under this provision.
• The Dependent Spouse or Domestic Partner Life Insurance amount that you or your dependent spouse or domestic partner may convert is reduced by the Dependent Spouse or Domestic Partner Accelerated Death Benefit proceeds paid under this provision.
• You will not be eligible to increase your contributory Dependent Spouse or Domestic Partner Life Insurance amount.
• Premium is based upon your Dependent Spouse or Domestic Partner Life Insurance amount in force prior to any proceeds paid under this provision. Such premium must be paid to keep the Dependent Spouse or Domestic Partner Life Insurance coverage in force.
• Your remaining Dependent Spouse or Domestic Partner Life Insurance amount is subject to future age reductions, if any, as shown on the Schedule of Benefits.
• You will not be able to reinstate your Dependent Spouse or Domestic Partner Life Insurance coverage to its full amount in the event of a recovery from a terminal condition.

Your Life Insurance amount will be unaffected by Dependent Spouse or Domestic Partner Accelerated Death Benefit proceeds paid to you. Your Dependent Children Life Insurance amount, if any, will be unaffected by Dependent Spouse or Domestic Partner Accelerated Death Benefit proceeds paid to you. If any death benefit remains after payment of the Dependent Spouse or Domestic Partner Accelerated Death Benefit, your Dependent Spouse or Domestic Partner Accidental Death and Dismemberment coverage will be unaffected by Dependent Spouse or Domestic Partner Accelerated Death Benefit proceeds paid to you.

Dependent's Accidental Death & Dismemberment (AD&D) Insurance
ReliaStar Life pays this benefit if your insured dependent suffers a covered loss due to a covered accident. All of the following conditions must be met:
• Your insured dependent is covered for AD&D Insurance on the date of the accident.
• Loss occurs within 180 days of the accident.
• The cause of the loss is not excluded.

ReliaStar Life pays the benefit shown below if your insured dependent suffers any of the losses listed. The Full Amount is shown on the Schedule of Benefits. ReliaStar Life pays only one Full Amount while the Group Policy is in effect. If your insured dependent has a loss for which ReliaStar Life paid 1/2 of the Full Amount, ReliaStar Life pays no more than 1/2 of the Full Amount for the next loss.

For: ........................................................................................................ The benefit is:
Loss of life ..................................................................................................................Full Amount
Loss of both hands, both feet or sight of both eyes ..................................................Full Amount
Loss of one hand and one foot .................................................................................Full Amount
Loss of speech and hearing in both ears ....................................................................Full Amount
LIFE INSURANCE

Loss of one hand or one foot and sight of one eye ................................. Full Amount
Loss of one hand or one foot or sight of one eye ................................................ 1/2 Full Amount
Loss of speech ........................................................................................................... 1/4 Full Amount
Loss of hearing in both ears .............................................................................. 1/4 Full Amount
Loss of thumb and index finger of same hand ............................................... 1/4 Full Amount
Quadriplegia ........................................................................................................... Full Amount
Paraplegia .............................................................................................................. 1/2 Full Amount
Hemiplegia ............................................................................................................... 1/2 Full Amount

Loss of hands or feet means loss by being permanently, physically severed at or above the wrist or ankle. Loss of sight means total and permanent loss of sight. Loss of speech and hearing means total and permanent loss of speech and hearing. Loss of thumb and index finger means loss by being permanently, physically, entirely severed.

Quadriplegia means total paralysis of all four limbs. Paraplegia means total paralysis of both lower limbs. Hemiplegia means paralysis of one arm and one leg on the same side of the body.

Paralysis must be the result of a spinal cord injury which is due to an accident. ReliaStar Life does not pay an AD&D benefit for any paralysis caused by a stroke. Paralysis must be determined by competent medical authority to be permanent, complete and irreversible.

ReliaStar Life does not pay a benefit for loss of use of the hand or foot or thumb and index finger.

ReliaStar Life pays all dismemberment and paralysis benefits for your insured dependent to you.

Exposure and Disappearance Benefit
ReliaStar Life pays an Exposure benefit if:
• your insured dependent's loss is from injury caused by exposure to the elements, and
• is the result of a covered accident.

ReliaStar Life pays a Disappearance benefit if:
• your insured dependent is in a conveyance, including but not limited to an automobile, airplane, ship or train, that disappears, sinks or wrecks; and
• your insured dependent disappears and your insured dependent's body is not found, and the disappearance is the result of a covered accident; and
• a reasonable period of time, but no more than one year, has lapsed since the accident, and
• ReliaStar Life has reviewed all evidence and there is no reason to believe that your insured dependent is living.

The amount payable for the Exposure benefit is contained in the table above. The amount payable for the Disappearance benefit is the AD&D benefit for loss of life. If benefits are paid for Exposure or Disappearance, no other AD&D benefits will be payable under the Group Policy.

Exposure and Disappearance benefits for your insured dependent are paid to you.

If ReliaStar Life pays the Disappearance benefit and it is later found your insured dependent is alive, the amount of benefits paid must be refunded to ReliaStar Life.

Safe Driver Benefit
ReliaStar Life pays a Safe Driver benefit in addition to the AD&D benefit and subject to the exclusions listed below if your insured dependent was:
• killed due to an automobile accident, and
• wearing a properly fastened safety belt at the time of the accident.

An additional amount will be paid if your insured dependent was also driving in or riding in an automobile equipped with a factory installed airbag that operated properly upon impact.

Your dependent must be insured for at least $25,000 Dependent AD&D Insurance as shown on the Schedule of Benefits in order to be eligible for a Safe Driver benefit.

For loss of:  The benefit is:
Life (with safety belt only) ................................................................. An additional 10% of Full Amount of Dependent AD&D Insurance up to a maximum of $25,000
LIFE INSURANCE

Life (with safety belt and airbag) .................................................................................................................. An additional 15% of Full Amount of Dependent AD&D Insurance up to a maximum of $40,000

Automobile means any self-propelled private passenger vehicle which has four or more tires and which is not being used for commercial purposes. Safety belt means a passenger restraint system properly installed in the vehicle in which your insured dependent was riding. Airbag means an additional restraint system which inflates for added protection to the head and chest areas.

ReliaStar Life will not pay the Safe Driver benefit if the loss of life was caused directly or indirectly by any use of intoxicating liquors, marijuana, narcotic drugs, depressants or similar substances, whether or not prescribed by a doctor, by your insured dependent or by the driver of the automobile in which your insured dependent was riding.

Coma Benefit
ReliaStar Life pays a Coma benefit if, due to an accident, your insured dependent is in a coma. Coma benefit payments will stop when your insured dependent is no longer in a coma or when maximum benefits have been paid, whichever comes first. Your dependent must be insured for at least $25,000 Dependent AD&D Insurance as shown on the Schedule of Benefits in order to be eligible for a Coma benefit.

In the event of: ................................................................. The benefit is: .................................................................

Coma ........................................................................................................ An additional 2% of Full Amount of Dependent AD&D Insurance per month for up to 12 months to a total maximum of $24,000

Coma means that your insured dependent remains unresponsive to any stimuli and speechless for a period of time not less than 30 days, as determined by a competent medical authority.

Coma benefits for your insured dependent are paid to you.

Education Benefit
ReliaStar Life pays an Education benefit in addition to the AD&D benefit and subject to the conditions below if your insured dependent spouse dies due to an accident. This benefit will be paid at the end of each annual period following your dependent spouse's death to your spouse's dependent who is enrolled as a full-time student in an accredited post-secondary institution of higher learning beyond grade 12 within 365 days following the date of your spouse's death. Benefit payments will stop if either of the following is true during the preceding annual period –

• the student's full-time school attendance is less than 6 months; or
• the student would no longer be considered your spouse's eligible dependent under the definition of dependent in the policy.

Your dependent spouse must be insured for at least $25,000 Dependent AD&D Insurance as shown on the Schedule of Benefits in order for the dependent student to be eligible for an Education benefit.

For: ........................................................................................................ The benefit is: .................................................................

Education ........................................................................................................ An additional 5% of Full Amount of Dependent AD&D Insurance per year for up to 4 years to a maximum of $3,000 per year

Education Benefit
ReliaStar Life pays an Education benefit in addition to the AD&D benefit and subject to the conditions below if your insured dependent spouse or domestic partner dies due to an accident. This benefit will be paid at the end of each annual period following your dependent spouse's or domestic partner's death to your spouse's or domestic partner's dependent who is enrolled as a full-time student in an accredited post-secondary institution of higher learning beyond grade 12 within 365 days following the date of your spouse's or domestic partner's death. Benefit payments will stop if either of the following is true during the preceding annual period –
LIFE INSURANCE

- the student's full-time school attendance is less than 6 months; or
- the student would no longer be considered your spouse's or domestic partner's eligible dependent under the definition of dependent in the policy.

Your dependent spouse or domestic partner must be insured for at least $25,000 Dependent AD&D Insurance as shown on the Schedule of Benefits in order for the dependent student to be eligible for an Education benefit.

For: Education ...................................................................................................................... The benefit is:

- An additional 5% of Full Amount of Dependent AD&D Insurance per year for up to 4 years
to a maximum of $3,000 per year

Education benefits are paid to each eligible dependent student, or to the dependent's legal guardian.

Transportation Benefit
ReliaStar Life pays a Transportation benefit in addition to the AD&D benefit if your insured dependent dies due to an accident that occurs at least 75 miles from his or her primary residence. Your dependent must be insured for at least $25,000 Dependent AD&D Insurance as shown on the Schedule of Benefits in order to be eligible for a Transportation benefit.

For: Transportation ............................................................................................................. The benefit is:

- An additional 2% of Full Amount of Dependent AD&D Insurance up to a maximum of $2,000

Transportation benefits for your insured dependent are paid to you.

Accidental Death and Dismemberment Exclusions
ReliaStar Life does not pay benefits for loss directly or indirectly caused by any of the following:
- Suicide or intentionally self-inflicted injury, while sane or insane.
- Physical or mental illness.
- Bacterial infection or bacterial poisoning. Exception: Infection from a cut or wound caused by an accident.
- Riding in or descending from an aircraft as a pilot or crew member.
- Any armed conflict, whether declared as war or not, involving any country or government.
- Injury suffered while in the military service for any country or government.
- Injury which occurs when your insured dependent commits or attempts to commit a crime.
- Use of any drug, narcotic or hallucinogenic agent –
  – unless prescribed by a doctor.
  – which is illegal.
  – not taken as directed by a doctor or the manufacturer.
- Your insured dependent's intoxication. Intoxication means your insured dependent's blood alcohol content meets or exceeds the legal presumption of intoxication under the laws of the state where the accident occurred.
CONVERSION RIGHTS

Life Insurance
You or your insured dependent may convert this insurance to an individual life insurance policy if any part of your or your insured dependent's Life Insurance under the Group Policy stops. Proof of good health is not required.

Conditions for Conversion
You or your insured dependent may convert Life Insurance if it terminates for any of the following reasons:
- For coverage not ported, you are no longer actively at work.
- For coverage not ported, you are no longer eligible for Employee's Insurance under the Group Policy.
- For ported coverage, you have reached the termination age under the Group Policy.
- The Group Policy is changed or cancelled, and your Life Insurance under the Group Policy has been in effect for at least 5 years in a row.
- For your Life Insurance, the amount of insurance is reduced.
- For your dependent's life insurance –
  – your dependent's life insurance terminates.
  – your dependent is no longer an eligible dependent as defined.
  – your dependent's life insurance shown on the Schedule of Benefits is reduced.
  – your Life Insurance premiums are waived due to total disability.
  – you die.

You or your insured dependent may convert this insurance by applying and paying the first premium for an individual policy within 31 days after any part of your or your insured dependent's insurance stops.

If you or your insured dependent are not given written notice of this conversion right within 16 days after any part of this insurance stops, you or your insured dependent will have more time to apply and pay the first premium for the individual policy. This additional time period will end 15 days after you or your insured dependent are given written notice of this conversion right. In no event will the time period for conversion be more than 91 days after any part of your Life Insurance or Dependent's Life Insurance stops.

ReliaStar Life or the Policyholder must be notified if you or your insured dependent wish to convert. ReliaStar Life will supply you or your insured dependent with a conversion form to complete and return.

If your insured dependent is too young to contract for life insurance, the following people may apply in this order:
1. You, while living.
2. Your spouse, while living.
3. The court-appointed guardian of your insured dependent.

Type of Converted Policy
You or your insured dependent may purchase any individual nonparticipating policy offered by ReliaStar Life, except term insurance. The new policy must provide for a level amount of insurance and have premiums at least equal to those of ReliaStar Life's whole life plan with the lowest premium.

If your previous coverage included additional benefits such as disability, Accidental Death and Dismemberment Insurance or the Accelerated Death Benefit, the new insurance will not include these benefits.

Amount of Conversion Coverage
If your or your insured dependent's Life Insurance is changed or cancelled because the Group Policy is changed or cancelled, and your Life Insurance under the Group Policy has been in effect for at least 5 years in a row, the amount of the individual policy is limited to the lesser of –
- $10,000 or
- the amount of your or your insured dependent's Life Insurance which stops, minus the amount of other group insurance for which you or your insured dependent becomes eligible, within 31 days of the date your or your insured dependent's insurance stops.

If your or your insured dependent's Life Insurance stops for any reason other than the above, the amount of your or your insured dependent's individual policy may be any amount up to the amount of your or your insured dependent's Life Insurance that stopped.
CONVERSION RIGHTS

Effective Date
The new policy takes effect 31 days after the part of your or your insured dependent's Life Insurance being converted stops.

If you or your insured dependent dies within the 31-day period allowed for making application to convert, ReliaStar Life will pay a death benefit to your or your insured dependent's beneficiary in the amount you or your insured dependent were entitled to convert. ReliaStar Life will pay the amount whether or not application was made. ReliaStar Life will return any premium paid for the individual policy to your or your insured dependent's beneficiary named under the Group Policy.

Premiums
Premiums for the new policy are based on your or your insured dependent's age on the date of conversion.
CLAIM PROCEDURES

Submitting a Claim
You, your insured dependent or someone on your behalf must send ReliaStar Life written notice of the loss on which your claim will be based. The notice must –
· include information to identify you or your insured dependent, like your name, address and Group Policy number.
· be sent to ReliaStar Life or to the authorized administrator.
· be sent within 91 days after the loss for which claim is based has occurred or as soon as reasonably possible.

Claim Forms
ReliaStar Life or its authorized administrator will send proof of loss claim forms within 15 days after ReliaStar Life receives notice of claim.

Completed proof of loss claim forms or other written proof of loss detailing how the loss occurred must be sent to ReliaStar Life within 91 days after the loss or as soon as reasonably possible.
GENERAL PROVISIONS

Life Insurance Assignment
You can change the owner of your Life Insurance under the Group Policy by sending ReliaStar Life written notice. This change is an absolute assignment. You cannot make an absolute assignment to the Policyholder. You transfer all your rights and duties as owner to the new owner. The new owner can then make any change the Group Policy allows. A request for an absolute assignment –
• does not change the insurance or the beneficiary.
• applies only if ReliaStar Life receives your notice.
• takes effect from the date signed.
• does not affect any payment ReliaStar Life makes or action ReliaStar Life takes before receiving your notice.

A collateral assignment is not allowed.

ReliaStar Life assumes no responsibility for the validity of any assignment. You are responsible to see that the assignment is legal in your state and that it accomplishes the goals that you intend.

Legal Action
Legal action may not be taken to receive benefits until 60 days after the date proof of loss is submitted according to the requirements of the Group Policy. Legal action must be taken within 3 years after the date proof of loss must be submitted.

If the Policyholder's state requires longer time limits, ReliaStar Life will comply with the state's time limits.

Exam and Autopsy
For AD&D Insurance, when reasonably necessary, ReliaStar Life may have you or your insured dependent examined while a claim is pending under the Group Policy. ReliaStar Life pays for the initial exam. ReliaStar Life may have an autopsy made if you or your insured dependent dies, if not forbidden by state law.

Incontestability
Your and your dependent's insurance has a contestable period starting with the effective date of your insurance and continuing for 2 years while you are living. During that 2 years, ReliaStar Life can contest the validity of your and your dependent's insurance because of inaccurate or false information received relating to your and your insured dependent's insurability. Only statements that are in writing and signed by you or your insured dependent can be used to contest the insurance.
DEFINITIONS

**Accident** – an unexpected, external, violent and sudden event.

**Active Work, Actively at Work** – the employee is physically present at his or her customary place of employment with the intent and ability of working the scheduled hours and doing the normal duties of his or her job on that day.

**Child** –
- your natural or adopted child.
- a child for whom you have legal obligation for purposes of adoption.
- a child who is primarily dependent on you for support and lives with you in a permanent parent-child relationship, and who is your stepchild, your domestic partner’s child, your foster child, or a child for whom you are a legal guardian.

**Dependent** –
- your lawful spouse.
- your domestic partner, as defined.
- your child from birth but less than 26 years of age.

The term “dependent” does not include –
- a spouse, domestic partner or child living outside the United States.
- a spouse, domestic partner or child eligible for Employee’s Insurance under the Group Policy.
- a spouse, domestic partner or child on active military duty.
- a parent of you or your spouse or domestic partner.
- a spouse, domestic partner or child who does not give proof of good health when requested, or whose proof is not approved.

**Domestic Partner** – another adult with whom you have completed and signed the Policyholder’s Domestic Partnership Policy Statement and filed it with the Policyholder attesting that –
- you are both the same sex,
- neither of you are married to anyone and you are the sole partners of each other,
- you are both at least 18 years of age,
- you are not related by blood closer than would bar marriage in your State,
- you are both mentally competent to consent to contract,
- you share a common residence,
- you are in a committed and mutually exclusive relationship, and
- you meet any other requirements listed in the Domestic Partnership Policy Statement.

You must notify the Policyholder in writing if there is any change of circumstances attested to in the Domestic Partnership Policy Statement within 30 days of such change.

**Employee** – an active employee residing in the United States who is employed by the Policyholder and is regularly scheduled to work as follows:
- For Faculty employees, must have at least a 4/9 appointment.
- For Administrative and Professional employees, at least 20 hours or more per week for at least 9 months.
- For Confidential employees, at least 20 hours or more per week for at least 9 months.
- For Service employees, either a full year or school year basis and working at least 20 hours per week.
- For Security employees, either a full year or school year basis and working at least 18 hours per week.
- For Administrative Assistants, at least .36 FTE in a position designated as 9 months per fiscal year or .40 FTE in a position designated for more than 9 months per fiscal year.
- For Intern employees, at least 9 months or more.

Faculty and Staff employees who are in active employment and are at least 52 years of age with a minimum of 10 years of service are eligible retirees.

Such employees of companies and affiliates controlled by the Policyholder are included. Temporary and seasonal employees are excluded.

**Group Policy** – the written group insurance contract between ReliaStar Life and the Policyholder.

**Nonworking Day** – a day on which the employee is not regularly scheduled to work, including time off for the following:
- Vacations.
DEFINITIONS

- Personal holidays.
- Weekends and holidays.
- Approved nonmedical leave of absence.
- Paid Time Off for nonmedical-related absences.

Nonworking day does not include time off for any of the following:
- Medical leave of absence. Time off for a medical leave of absence will be considered a scheduled working day.
- Temporary layoff.
- The Policyholder suspending its operations, in part or total.
- Strike.

Policyholder – Oberlin College


Spouse – your legal husband or wife. The term "spouse" does not include a domestic partner.

Terminal Condition – an injury or sickness that is expected to result in your or your insured dependent spouse's or domestic partner's death within 12 months and from which there is no reasonable chance of recovery. ReliaStar Life or a qualified party chosen by ReliaStar Life will make this determination.

Written, In Writing – signed, dated and received at ReliaStar Life’s Home Office in a form ReliaStar Life accepts.

You, Your – an employee insured for Employee's Insurance under the Group Policy.
The Summary Plan Description on the following pages is provided to you at the request of the Policyholder. It is not a part of the insurance certificate.
SUMMARY PLAN DESCRIPTION

For a Plan of Insurance Underwritten by
ReliaStar Life Insurance Company
P.O. Box 20
Minneapolis, Minnesota 55440

Plan Name, Number and Name and Address of Policyholder:
Oberlin College Plan
68437-6GAT
Oberlin College
173 West Lorain Street
Oberlin, OH 44074-8430

Name, Address, and Telephone Number of the Plan Administrator:
Oberlin College, Department of Human Resources
173 West Lorain Street
Oberlin, OH 44074-8430
440-775-8430

Identification Numbers
IRS Employer Identification Number: 34-0714363
Plan Number: 502

Agent for Legal Process: Plan Administrator

Trustees: Oberlin College is the Plan Administrator and named fiduciary of the Plan, with authority to
delegate its duties. The Plan Administrator may designate Trustees of the Plan, in which case the
Administrator will advise you separately of the name, title, and address of each Trustee.

Collective Bargaining or Multiple-Employer Agreements under which Plan is Established: None

Type of Administration: Records maintained by Policyholder.

Premium Payments: 100% of the Supplemental Life and AD&D Insurance and Dependent Life and
AD&D Insurance premiums are paid by the employee.

Plan Year: January 1 through December 31

Claim Procedures: Please refer to CLAIM PROCEDURES section(s).

Statement of ERISA Rights: Please refer to STATEMENT OF ERISA RIGHTS section.

Eligibility and Circumstances Limiting Eligibility: As described in the Certificate of Insurance.

Type of Plan: As described in the Certificate of Insurance.

Benefits in Plan: As described in the Certificate of Insurance.

Amendment or Termination of Plan: The Policyholder makes no promise to continue these benefits in
the future and rights to future benefits will never vest. The Policyholder reserves the right to amend,
modify, revoke or terminate the plan, in whole or part, at any time.

ReliaStar Life's Group Policy may be amended or terminated as set forth in the Group Policy.

Benefits, Rights, and Obligations after Termination: As described in the Certificate of Insurance.
SUMMARY PLAN DESCRIPTION

CLAIM PROCEDURES FOR LIFE INSURANCE

1. Information regarding claim submission may be obtained from the Plan Administrator or Human Resource Department.
2. ReliaStar Life Insurance Company (ReliaStar Life) will process the claim and make payment or issue a denial notice.
3. Written notice of denial of a claim will be furnished to the claimant within 90 days after receipt of the claim. An extension of 90 days will be allowed for processing the claim if special circumstances are involved. The claimant will be given notice of any such extension. The notice will state the special circumstances involved and the date a decision is expected.
4. The notice of denial will be written in an understandable manner and include the following:
   a. The specific reason(s) for the denial.
   b. Specific reference to the provision which forms the basis of the denial.
   c. A description of additional information, if any, which would enable a claimant to receive the benefits sought and an explanation of why it is needed.
   d. An explanation of the claim review procedure.
5. The claimant may request an appeal at any time during the 60-day period following receipt of the notice of denial of the claim.
6. ReliaStar Life will consider requests for an appeal of a denied claim upon written application of the claimant or his or her duly authorized representative. As part of the appeal the claimant also has the right, upon request and free of charge, to access and copies of all documents, records and other information that is relevant to the claim for benefits. The claimant may, in the course of this appeal, review relevant documents and submit to ReliaStar Life written comments, documents, records, and other information relating to the claim. Review of claim denials and final decisions on appeal are the responsibility of ReliaStar Life.
7. ReliaStar Life will provide the claimant with a written decision of the final determination of the claim. This decision will be written in an understandable way, will state the specific reason(s) for the decision, and will make specific reference to the provision on which the decision is based. This decision will be issued as soon as practicable from the date of appeal, but no longer than 60 days unless an extension is needed. An extension of 60 days will be allowed for making this decision if special circumstances are present. The claimant will be given notice if this extension is necessary. If the decision on review is not received within these time limits, the claim may be considered denied.
8. ReliaStar Life has final discretionary authority to determine all questions of eligibility and status and to interpret and construe the terms of this policy(ies) of insurance.
STATEMENT OF ERISA RIGHTS

As a participant in the Plan you are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974 (ERISA). ERISA provides that all plan participants shall be entitled to:

**Receive Information About Your Plan and Benefits**

Examine, without charge, at the Plan Administrator's office and at other specified locations, such as worksites and union halls, all documents governing the Plan, including insurance contracts and collective bargaining agreements, and a copy of the latest annual report (Form 5500 Series) filed by the Plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration.

Obtain, upon written request to the Plan Administrator, copies of documents governing the operation of the Plan, including insurance contracts and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and updated Summary Plan Description. The administrator may make a reasonable charge for the copies.

Receive a summary of the Plan's annual financial report. The Plan Administrator is required by law to furnish each participant with a copy of this summary annual report.

**Prudent Actions by Plan Fiduciaries**

In addition to creating rights for plan participants, ERISA imposes duties upon the people who are responsible for the operation of the employee benefit plan. The people who operate your Plan, called “fiduciaries” of the Plan, have a duty to do so prudently and in the interest of you and other plan participants and beneficiaries. No one, including your employer, your union, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a benefit or exercising your rights under ERISA.

**Enforce Your Rights**

If your claim for a benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.

Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of plan documents or the latest annual report from the Plan and do not receive them within 30 days, you may file suit in a Federal court. In such a case, the court may require the Plan Administrator to provide the materials and pay you up to $110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the administrator. If you have a claim for benefits which is denied or ignored, in whole or in part, you may file suit in a state or Federal court. In addition, if you disagree with the Plan's decision or lack thereof concerning the qualified status of a domestic relations order or a medical child support order, you may file suit in Federal court. If it should happen that Plan fiduciaries misuse the Plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a Federal court. The court will decide who should pay court costs and legal fees. If you are successful the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees, for example, if it finds your claim is frivolous.

**Assistance with Your Questions**

If you have any questions about your Plan, you should contact the Plan Administrator. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the Plan Administrator, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory or the Office of Participant Assistance, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.