

# Group Term Life Amendment #1

## Securian Life Insurance Company

400 Robert Street North • St. Paul, Minnesota 55101-2098

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To be attached to and made a part of Group Policy number 70748, issued by Securian Life Insurance Company to Prisma Health. This amendment is effective as of the dates shown below. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

### **Effective January 1, 2025:**

- 1) The GROUP definition as found on the Certificate Specifications Page is amended to include certain retirees of the policyholder as eligible under the policy.
- 2) The waiting period is amended to reflect the period commencing with the employee's date of employment and ending with the first day of the month next following the employee's date of employment.
- 3) The employee benefit schedule is amended as follows:

### **EMPLOYEE TERM LIFE INSURANCE:**

#### **Basic Life Insurance**

<b><u>Eligible Class</u></b>	<b><u>Amount of Basic Life Insurance</u></b>
Class 1	One times annual earnings, rounded to the next higher \$1,000 if not already a multiple thereof, subject to a maximum of \$1,500,000.*
Class 2	One times annual earnings, rounded to the next higher \$1,000 if not already a multiple thereof, subject to a maximum of \$500,000.*
Class 3	Two times annual earnings, rounded to the next higher \$1,000 if not already a multiple thereof, then multiplied, subject to a maximum of \$1,500,000.*
Classes 4, 5, 6 and 7	Amounts as on file with the policyholder as reported to Securian.

#### **Supplemental Life Insurance**

<b><u>Eligible Class</u></b>	<b><u>Amount of Supplemental Life Insurance</u></b>
Classes 1, 2, and 3	An amount elected by the employee from the following options: One, two, three, four, five, six, seven or eight times annual earnings rounded to the next higher \$1,000 if not already a multiple thereof then multiplied subject to a maximum of \$2,500,000.*
Classes 4, 6 and 7	None.
Class 5	Amounts as on file with the policyholder as reported to Securian.

\*The combined amount of basic and supplemental insurance for an employee shall not exceed \$2,500,000.

- 4) Class 6 is subject to basic employee life, basic employee AD&D and supplemental employee life insurance age reductions.
- 5) The section CONTRIBUTORY/NONCONTRIBUTORY under the Employee Benefit Schedule is amended as follows:

**CONTRIBUTORY/  
NONCONTRIBUTORY:**

Classes 1, 2, 3, and 5: Basic insurance is noncontributory insurance; supplemental insurance is contributory insurance.

Classes 4 and 6: Basic insurance is noncontributory insurance.

Class 7: Basic insurance is noncontributory insurance.

- 6) Civil Union Partners are added to eligible dependents.
- 7) Classes 4, 5, 6 and 7 have no Spouse/Civil Union Partner Life Insurance amounts or Child Life Insurance amounts.
- 8) Class 7 has grandfathered amounts of Packaged Dependents Life Insurance. As a result, Packaged Dependents Life Insurance is added to the Dependents Benefit Schedule.
- 9) Spouse/Civil Union Partner Age reductions are rounded to the next higher \$1,000 if not already a multiple thereof. The Certificate Specifications Page is amended as follows:

**SPOUSE/CIVIL UNION  
PARTNER AGE  
REDUCTIONS (applies to  
classes 1, 2, and 3):**

The amount of insurance on an insured spouse/civil union partner age 70 or older shall be a percentage of the amount otherwise provided by the plan of insurance applicable to such spouse/civil union partner in accordance with the following table:

<u>Age of Spouse/Civil Union Partner</u>	<u>Amount of Insurance</u>
70 and over	50%

Age reductions will apply the first day of the month following an insured spouse's/civil union partner's 70th birthday. The sum amount following the reduction will be rounded to the next higher \$1,000 if not already a multiple thereof.

- 10) The section CONTRIBUTORY/NONCONTRIBUTORY as found under the Dependents Benefit Schedule is amended as follows:

**CONTRIBUTORY/  
NONCONTRIBUTOR**

Classes 1, 2, and 3: Dependents insurance is contributory insurance.

Classes 4, 5 and 6: Not applicable.

Class 7: Packaged dependents insurance is noncontributory insurance.

- 11) Class 5 has grandfathered amounts of insurance on file. Therefore, Class 5 is removed from the following sections: One Time Open Enrollments, Annual Open Enrollments, and Certain Qualified Status Changes.

12) The section Annual Open Enrollments is amended for employee supplemental life insurance to include "Coverage will be set at the lowest multiple of salary that does not exceed \$1,000,000.

13) The section CERTIFICATE SUPPLEMENTS is amended as follows:

**CERTIFICATE SUPPLEMENTS (found later in this document):**

Accelerated Benefits	Applies to all classes.
Accidental Death and Dismemberment	Applies to classes 1, 2 and 3.
Dependents Term Life	Applies to classes 1, 2, 3, and 7.
Portability	Applies to classes 1, 2, 3 and 5.
Repatriation	Applies to classes 1, 2, 3 and 5 basic and supplemental employee insurance.
Waiver of Premium	Applies to classes 1, 2, 3 and 5.

14) References to assignments are removed in their entirety.

15) The section "Is there a minimum or maximum death benefit eligible for an accelerated benefit?" as found on the Accelerated Benefits Certificate Supplement is amended to read as follows:

**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 greater of \$5,000 or 10% of the insured's life insurance. The maximum death benefit that can be accelerated is \$500,000.

16) The section "Is a partial accelerated benefit available?" as found on the Accelerated Benefits Certificate Supplement is amended as follows:

**Is a partial accelerated benefit available?**

Yes. You may choose to accelerate only a portion of an insured's death benefit, providing the remaining amount of insurance is at least \$25,000. 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 \$500,000. We may ask for further evidence satisfactory to us in substance and in form that the insured meets all requirements for the accelerated benefit.

17) The section "What is the adaptive home and vehicle benefit?" as found on the Accidental Death and Dismemberment Certificate Supplement is amended as follows:

**What is the adaptive home and vehicle benefit?**

If you suffer a loss other than loss of life and a benefit is payable under the AD&D benefit, we will pay for your principal residence to be made accessible and/or your private automobile to be made drivable or rideable. These one-time alteration expenses must be incurred within two years from the date of the accident. Your benefit will be the lesser of:

- (1) 10% of your amount of AD&D insurance; or
- (2) the actual alteration expense; or
- (3) \$10,000.

The Adaptive Home and Vehicle Benefit will be payable only if:

- (1) such home alterations are made by a person or persons with experience in such alterations and recommended by a recognized organization associated with the injury;
- (2) such vehicle modifications are carried out by a person or persons with experience in such matters and approved by the Motor Vehicle Department.

- 18) The section "What is the child care benefit?" as found on the Accidental Death and Dismemberment Certificate Supplement is amended as follows:

If you die as a result of a covered accident and you are survived by one or more dependent children under age 13, we will pay additional benefits to reimburse for child care expenses incurred for your dependent children while under age 13.

The benefit for each child per year will be the lesser of:

- (1) \$5,000 of your amount of AD&D insurance, not to exceed a cumulative total of the lesser of \$10,000 or 25% of your AD&D insurance; or
- (2) actual incurred child care expenses.

Child care expenses are those expenses which are for a service or supply furnished by a licensed child care provider or facility for a dependent child's care. No payment will be made for expenses incurred more than three months after the date of your death or for expenses incurred for dependent children over age 13. Proof of incurred child care expenses shall be required before any benefit payment is made. The child care benefit will be paid to the surviving parent, to the child's guardian, the custodian under the Uniform Transfers to Minors Act or to an adult caretaker when permitted under state law.

- 19) The section "What is the dependent child education benefit?" as found on the Accidental Death and Dismemberment Certificate Supplement is amended as follows:

**What is the dependent child education benefit?**

We will pay an education benefit on behalf of your dependent children if you die as a result of a covered accident and are survived by one or more dependent children, provided that:

- (1) at the time of your death, the dependent child is enrolled as a full-time student at an accredited post-secondary educational institution (however, no benefit will be payable for the current school year); or
- (2) the dependent child enrolls on a full-time basis in an accredited post-secondary educational institution within one year of your death.  
The benefit payable will be the lesser of:
  - (1) the actual tuition charged, exclusive of room and board; or
  - (2) \$5,000 per year not to exceed a cumulative total of the lesser of \$20,000 or 25% of your AD&D insurance.

The benefit will be payable at the beginning of each school year for a maximum of four consecutive years, but not beyond the date the child attains age 25. The benefit will be paid to the dependent child if he or she is of legal age. If the dependent child is not of legal age the benefit will be paid to the person who provides proof they have paid or will pay the tuition bill for that school year. Proof of enrollment and tuition costs are required for each school year.

- 20) The section "What is the public transportation benefit?" as found on the Accidental Death and Dismemberment Certificate Supplement is amended as follows:

**What is the public transportation benefit?**

If you die or suffer a covered dismemberment as a result of a covered accident which occurs while you are a fare-paying passenger on a public transportation vehicle, we will pay an additional benefit equal to the lesser of:

- (1) 100% of your full amount of AD&D insurance; or
- (2) \$200,000.

Public transportation vehicle means any air, land or water vehicle operated under a license for the transportation of fare paying passengers.

- 21) The section "Spouse Education Benefit" as found on the Accidental Death and Dismemberment Certificate Supplement is amended as follows:

**Spouse/Civil Union Partner Education Benefit**

**What is the spouse/civil union partner education benefit?**

We will pay an education benefit on behalf of your spouse/civil union partner if you die as a result of a covered accident and are survived by your spouse/civil union partner, provided that your spouse/civil union partner enrolls in a program of higher education within 12 months after your death.

The benefit payable will be the least of:

- (1) the actual tuition charged for all such education; or
- (2) \$5,000 not to exceed a cumulative total of the lesser of \$10,000 or 25% of your AD&D insurance.

Only expenses occurring within 36 months after the date of your death will be eligible for reimbursement.

- 22) The section "When does an insured's coverage under this supplement terminate" as found on the Accidental Death and Dismemberment Certificate Supplement is amended as follows:

**When does your coverage under this supplement terminate?**

Your coverage ends on the earliest of:

- (1) the date you are no longer covered for life insurance under the group policy; or
- (2) 60 days (the grace period) after the due date of any premium contribution which is not paid; or
- (3) the date this supplement terminates.

- 23) Item (2) under the section "What members of your family are eligible for insurance under this supplement?" as found on the Dependents Certificate Supplement is amended as follows:

- 2) your or your spouse's/civil union partner's natural, legally adopted, stepchildren or any child living in your home for whom you are the court appointed legal guardian, who are less than 26 years old. An adopted child includes a child legally placed for adoption with you. Eligibility begins at live birth (stillborn or unborn children are not eligible). Children who are age 26 or older are eligible if they are physically or mentally incapable of self-support, were incapable of self-support prior to age 26 and are financially dependent on you for more than one-half of their support and maintenance.

- 24) The section "Is there a maximum amount of insurance that can be continued under this supplement?" as found on the Portability Certificate Supplement is amended as follows:

**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 the insured's portability date, but not more than \$1,000,000 for an employee or \$250,000 for a spouse/civil union partner. However, for an insured age 65 or older on his or her portability date, the amount will not be more than \$650,000 for an employee or \$162,500 for a spouse/civil union partner.

The amount of ported AD&D insurance cannot exceed the amount of ported life insurance.

- 25) The section "Are there any limitations?" as found on the Waiver of Premium Certificate Supplement is removed in its entirety.

- 26) The section "What will be considered due proof of total and permanent disability?" is amended to reflect continuously disabled for less than six months, as follows:

**What will be considered due proof of total and permanent disability?**

You must furnish evidence satisfactory to us as to both substance and form that your disability:

- (1) commenced while your insurance under your certificate was in force; and
- (2) meets the definition of total disability; and
- (3) commenced before your 60th birthday; and
- (4) was continuous for six months or more.

We will, from time to time, also require additional proof satisfactory to us that you continue to be totally and permanently disabled. After you have provided at your expense the requested claim forms and records, we may also require that you submit to one or more medical examinations at our expense.

If you die within one year of the date of onset of your total disability, your beneficiary may claim benefits under this supplement even if your premium payments were discontinued and you had not submitted due proof satisfactory to us of your total disability or you were continuously disabled for less than six months. Your beneficiary must submit due proof satisfactory to us that your total disability, which began before premium payments on your behalf were discontinued and before your 60th birthday, continued without interruption until your death.

- 27) The section "What members of your family are eligible for insurance under this supplement?" as found under item (3) on the Group Term Life Insurance Certificate Endorsement is amended as follows:

**What members of your family are eligible for insurance under this supplement?**

The following members of your family are eligible for insurance under this supplement:

- (1) your lawful spouse who is not legally separated from you or your civil union partner as recognized under the laws of the jurisdiction of celebration; and
- (2) your or your spouse's/civil union partner's natural, legally adopted, stepchildren or any child living in your home for whom you are the court appointed legal guardian, who are less than 26 years old. An adopted child includes a child legally placed for adoption with you. Eligibility begins at live birth (stillborn or unborn children are not eligible).

A person who is eligible as an employee or retiree under the policy, or insured under the portability provisions, is not eligible as a dependent. Only one person can insure an eligible dependent child.

Any dependent who, subsequent to the effective date of your dependents term life insurance, meets the eligibility requirements of this supplement will become insured on the date he or she so qualifies, provided no additional premium is required and the dependent is not hospitalized or confined because of illness or disease (except in the case of a newborn).

If additional premium is required, the insurance for that dependent will be effective under the same conditions which would apply if you were newly becoming eligible for dependents term life insurance under this supplement. If the dependent is hospitalized or confined because of illness or disease on the date his or her insurance would otherwise become effective, his or her effective date shall be delayed until he or she is released from such hospitalization or confinement (except in the case of a newborn).

Coverage may continue after any dependent insured under this supplement attains age 26 and is both:

- (1) incapable of self-sustaining employment by reason of mental retardation or physical handicap, and
- (2) is chiefly dependent upon you for support and maintenance.

- 28) The section "When will the implementation credit be payable?" as found on the Implementation Credit Policy Rider EdF106908-11 Rev 4-2024 is amended to allow for documentation sent within two years of the policy effective date.
- 29) The Implementation Credit Policy Rider EdF106908-12 4-2025 is added to the policy in the amount of \$50,000.

**Effective July 1, 2025:**

- 1) The policyholder has acquired Blount life employees. As a result, a new Class 8 is added to the policy and the GROUP definition as found on the Certificate Specifications Page is amended as follows:

**GROUP:**

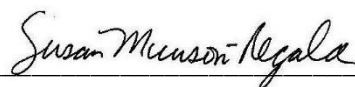
The group is composed of all active full-time and part-time employees and certain retirees of the policyholder and its associated companies working in the United States in the following classes:

- |         |  |
|---------|--|
| Class 1 | Executives & Physicians, excluding L1 and L2 Executives and those in Class 8.  |
| Class 2 | All active employees.  |
| Class 3 | L1 and L2 Executives.  |
| Class 4 | A closed group of grandfathered retirees and disabled employees.   |
| Class 5 | A closed group of grandfathered Executives with benefit amounts as on file with the policyholder and reported to Securian. |
| Class 6 | A closed group of disabled employees.  |
| Class 7 | A closed group of retirees with dependent coverage.  |
| Class 8 | Executives & Physicians, excluding those in Classes 1 and 3.   |

As a result of this amendment, the following changes are made to the Group Policy:

- The Certificates of Insurance Schedule is replaced in its entirety with the attached Certificates of Insurance Schedule.
- The Group Term Life Certificate of Insurance bearing the date of July 1, 2025 replaces the prior attached certificate.

Agreed to by Securian Life Insurance Company on April 17, 2025.

By  SS  
Vice President and Actuary

# Implementation Credit Policy Rider

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

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## General Information

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

### What does this rider provide?

This rider provides for an additional benefit to offset the direct and indirect costs that you incur in connection with the insurance coverage offered under the group policy issued by Securian Life.

### What is the amount of the implementation credit?

The implementation credit is in an amount equal to the lesser of:

- (1) \$50,000; or
- (2) the direct or indirect costs you incur in connection with the insurance coverage offered under the group policy, provided that such costs are incurred no later than 365 days after the policy effective date.

### When will the implementation credit be payable?

We will pay the implementation credit after you have submitted to us reasonably detailed documentation evidencing the cost you incurred in connection with the insurance coverage offered under the group policy. Such documentation must be sent within two years of the policy effective date.

### To whom will we pay the implementation credit?

We will pay the implementation credit to you or to an entity you have named to receive it.

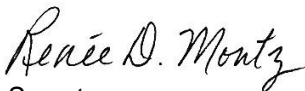
## Termination

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### When does this rider terminate?

This rider terminates upon the earlier of:

- (1) the date the group policy to which it is attached terminates; or
- (2) the date requested by you to cancel this rider for your plan.

  
Secretary

  
President



# Implementation Credit Policy Rider

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

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## General Information

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

### What does this rider provide?

This rider provides for an additional benefit to offset the direct and indirect costs that you incur in connection with the insurance coverage offered under the group policy issued by Securian Life.

### What is the amount of the implementation credit?

The implementation credit is in an amount equal to the lesser of:

- (1) \$100,000; or
- (2) the direct or indirect costs you incur in connection with the insurance coverage offered under the group policy, provided that such costs are incurred no later than 365 days after the policy effective date.

### When will the implementation credit be payable?

We will pay the implementation credit after you have submitted to us reasonably detailed documentation evidencing the cost you incurred in connection with the insurance coverage offered under the group policy. Such documentation must be sent within two years of the policy effective date.

### To whom will we pay the implementation credit?

We will pay the implementation credit to you or to an entity you have named to receive it.

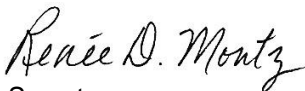
## Termination

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### When does this rider terminate?

This rider terminates upon the earlier of:

- (1) the date the group policy to which it is attached terminates; or
- (2) the date requested by you to cancel this rider for your plan.

  
Secretary

  
President

## **Certificates of Insurance Schedule**

The following Certificates of Insurance are attached to and made a part of this policy:

### Current Certificates

<u>Certificate Title</u>	<u>Certificate Form Number</u>	<u>Applies To</u>	<u>Effective Date</u>
Employee Group Term Life Certificate of Insurance	14-31702	All eligible employees	July 1, 2025

### Historic Certificates (if any)

<u>Certificate Title</u>	<u>Certificate Form Number</u>	<u>Applies To</u>	<u>Effective Date</u>
Employee Group Term Life Certificate of Insurance	14-31702	All eligible employees	January 1, 2025

Group Term Life Insurance Policy

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



POLICYHOLDER:	Prisma Health
POLICY NUMBER:	70748
POLICY SITUS:	This policy was issued and delivered in South Carolina.
POLICY EFFECTIVE DATE:	January 1, 2025
POLICY ANNIVERSARY DATE:	January 1 of each year beginning January 1, 2026
POLICY PREMIUM DUE DATE(S):	The first day of each month

Read Your Policy Carefully

This policy was issued to the policyholder on the effective date shown above. We promise to pay the benefits provided by this policy, subject to its conditions,

limitations, and exceptions. We make this promise and issue this policy in consideration of the application for this policy and the payment of the premiums.

Signed for Securian Life Insurance Company at St. Paul, Minnesota on the effective date.

*Reece D. Montz*  
Secretary

*Stephen M. Hefner*  
President

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GROUP TERM LIFE INSURANCE POLICY • NONPARTICIPATING

## Certificates of Insurance Schedule

The following Certificates of Insurance and Certificate Endorsements (if any) are attached to and made a part of this policy:

### Current Certificates

<u>Certificate Title</u>	<u>Certificate Form Number</u>	<u>Applies To</u>	<u>Effective Date</u>
Employee Group Term life Certificate of Insurance	14-31702	All eligible employees	January 1, 2025

### Historic Certificates (if any)

<u>Certificate Title</u>	<u>Certificate Form Number</u>	<u>Applies To</u>	<u>Effective Date</u>
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## Definitions

### **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 this policy.

### **contributory insurance**

Insurance for which an employee is required to make premium contributions.

### **noncontributory insurance**

Insurance for which an employee is not required to make premium contributions.

### **policyholder**

The owner of the group policy as shown on the first page of this policy.

### **we, our, us**

Securian Life Insurance Company.

### **you, your**

The policyholder.

## General Information

### **What is your agreement with us?**

This policy and your application contain the entire insurance contract between you and us. Any statements you make will, in the absence of fraud, be considered representations and not warranties. Also, any statement that you make will not be used to void this policy, nor will it be used in our defense if we refuse to pay a claim, unless the statement is contained in your application.

No change or waiver of any provisions of this policy, or any certificate issued under it, will be valid unless made in writing by us and signed by our president, a vice-president, our secretary, or an assistant secretary. No agent or other person has the authority to change or waive any provisions of this policy, or of any certificate issued under it.

### **Are employees of associated companies eligible for insurance under this policy?**

Yes. Employees of associated companies may be eligible for insurance under this policy. You represent any associated company in all transactions pertaining to this policy. Your acts or omissions and every notice given by us to you 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.

### **Can this policy be amended?**

Yes. The insured's consent is not required to amend this policy or any certificates issued under it. Any amendment will be without prejudice to any claim for benefits incurred prior to the effective date of the amendment.

## Premiums

### **When and how often are premiums due?**

Unless we have agreed to some other premium payment procedure, premiums for this policy are remitted to us monthly. Premiums are due on the premium due date as shown on the first page of this policy. We apply premiums consecutively to keep the insurance in force.

Premium contributions for contributory insurance are to be paid to you. The premium contributions by insureds for contributory insurance should be remitted to us as due along with the premiums payable for noncontributory insurance.

### **How is the premium determined?**

The premium will be the 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 you 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) on any premium due date following the date that the amount of insurance in force for any one coverage changes by more than 25% from that which was used to determine the current rates (active employee coverage and retiree coverage are considered separate coverages, as are basic life, supplemental life, spouse life, child life and basic AD&D); or
- (3) anytime the policy terms are amended.

### **What factors do we consider when premium is changed?**

If premium is changed, the change will be based upon future estimated or emerging experience, which factors include: interest rates, mortality, taxes, our expenses and profit considerations.

### **Can a premium be paid after the date it is due?**

Yes. This policy has a 60-day grace period. If a premium is not paid on or before the date it is due, that premium may be paid during the 60-day period following the due date. The insurance under this policy will remain in effect during the 60-day grace period.

### **Can the premium be adjusted?**

Yes. An adjustment will be made to the premium on each due date for insurance which was effective or terminated before the most recent due date, but not reflected in prior premium payments, so that the correct premium is paid.

## **Termination**

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### **When does this group policy terminate?**

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

- (1) 60 days (the grace period) after the due date of any premiums which are not paid; or
- (2) 31 days after we provide you with notice of our intent to terminate this policy.

## **Additional Information**

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### **Are you required to maintain records?**

Yes. You are required to maintain adequate records of any information necessary for us to administer this policy. We will have reasonable access to such records in order to administer the policy.

If an administration or clerical error is made in keeping records on or administering the insurance under this policy, it will not affect otherwise valid insurance. 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 this 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 a certificate of insurance be provided for each insured?**

Yes. We will provide you with a certificate of insurance for delivery to each insured. The certificate will include information regarding the principal provisions of his or her coverage.

### **Are you our agent?**

No. For all purposes of this policy, neither you, an associated company, nor any administrator you appoint is our agent. We will not be liable for any of your acts or omissions or those of an associated company or administrator.

### **Will the provisions of this policy conform with state law?**

Yes. If any provision in this policy, or in the certificates issued under this policy, is in conflict with the laws of the state governing the policy or the certificates, the provision will be deemed to be amended to conform to such laws.

### **Does ownership of this policy entitle you to membership in Securian Life Insurance Company's parent company?**

No. The ultimate parent company of Securian Life Insurance Company is a mutual insurance holding company. This policy does not entitle you to any holding company membership rights.

# Implementation Credit Policy Rider

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

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## General Information

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

### What does this rider provide?

This rider provides for an additional benefit to offset the direct and indirect costs that you incur in connection with the insurance coverage offered under the group policy issued by Securian Life.

### What is the amount of the implementation credit?

The implementation credit is in an amount equal to the lesser of:

- (1) \$100,000; or
- (2) the direct or indirect costs you incur in connection with the insurance coverage offered under the group policy, provided that such costs are incurred no later than 365 days after the policy effective date.

### When will the implementation credit be payable?

We will pay the implementation credit after you have submitted to us reasonably detailed documentation evidencing the cost you incurred in connection with the insurance coverage offered under the group policy. Such documentation must be sent within one year of the policy effective date.

### To whom will we pay the implementation credit?

We will pay the implementation credit to you or to an entity you have named to receive it.

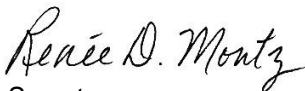
## Termination

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### When does this rider terminate?

This rider terminates upon the earlier of:

- (1) the date the group policy to which it is attached terminates; or
- (2) the date requested by you to cancel this rider for your plan.

  
Secretary

  
President

**Securian Life Insurance Company • A Stock Company**

400 Robert Street North • St Paul, Minnesota 55101-2098

**GROUP TERM LIFE INSURANCE POLICY • NONPARTICIPATING**